



PW-7: Certificate of Occupancy /
Letter of Completion Folder
Review Request

Must be typewritten.

DEPT. BLDGS	310160786	Job Number
SC080923600	Scan Code	Scan Code

1 Location Information

House No(s) 760	Street Name 45TH STREET	Work Proposed on Floor No(s)
Borough BROOKLYN	Block 750 Lot 31	BIN CB No.

2 Requestor Information

Individuals Relationship to Job (example: applicant, owner, filing representative)			
Last Name SITU	First Name AMY	Middle Initial	
Business Name M2 DESIGN INC	Business Telephone 718-938-5828		
Business Address 54-39 80TH ST	Business Fax		
City ELMHURST	State NY	Zip 11373	Mobile Telephone
E-Mail	License Number		

3 Type of Request Choose one.

- ☒ Letter of Completion (Directive 14 or Non-Directive 14)
- ☐ TCO - Temporary Certificate of Occupancy (Borough Commissioner's Office approval may be required. All requirements must be fulfilled before a TCO will be issued)
- ☐ Renewal of TCO - Temporary Certificate of Occupancy (Borough Commissioner's Office approval may be required. All requirements must be fulfilled before a TCO will be issued)
- ☐ Final Certificate of Occupancy

4 Comments If additional space is required, write "see AI-1" here and submit a completed AI-1 form with this request.

5 Statements and Signatures

By signing below, I understand that all the information provided is true to the best of my knowledge and that falsification of any statement is a misdemeanor under § 26-124 of the NYC Administrative Building Code and is punishable by a fine or imprisonment, or both. It is unlawful to give to a city employee, or for a city employee to accept, any benefit, monetary or otherwise, either as a gratuity for properly performing the job or in exchange for special consideration. Violation is punishable by imprisonment or fine, or both.

Requestor Signature *[Signature]* Date 9-23-08

Borough Commissioner's Office TCO Authorization Do not write in this section.

Comments:	
Authorized Name (please print)	☐ Approved ☐ Disapproved
Authorized Signature (if approved only)	Date

Disapproval Reasons Review request cannot be processed for the following reasons:

- | | | | |
|--|--|---|---|
| ☐ Fees unpaid | ☐ Open ECB/DOB Violation(s) | ☐ Incomplete PAA | ☐ Audit Conditions Pending / Job on Hold |
| ☐ Missing Inspection Sign-off(s): | ☐ Construction | ☐ Plumbing | ☐ Electrical |
| ☐ Missing Required Item(s): | ☐ TR-1 Error(s): | ☐ Other: _____ | |
| ☐ Form(s) missing/incomplete: Form(s) | Section(s)/Reason(s) | _____ | |
| ☐ Other: | _____ | | |

MEHRABAN AHOURAIE, P.E.

83-11 252 STREET QUEENS, NY 11426 PHONE: (917) 882-0079

Date: 9/18/08

Premises: 760 45 STREET **BROOKLYN**

Application # 310160786

Block: 750 Lot: 31

Dear Sir:

Please be advised that the work relative to the above subject application has been noted to have been completed in accordance with the provision of Department of Buildings Directive#14 of 1975.

This directive permits the retention by the owner of a licensed professional Engineer or Registered Architect to certify to the Department of Buildings that he inspected the work approved under subject application and that it has been completed and complies with all the Rules and Regulations of the Department.

I am hereby requesting a letter of completion and to close the above application. Your prompt response to this matter is greatly appreciated.

Very truly yours,

MEHRABAN AHOURAIE

