



PW7: Certificate of Occupancy /
Letter of Completion Folder
Review Request

Must be typewritten.



12-19-08

1 Location Information

House No(s) 195

Street Name AMITY STREET

Work Proposed on Floor No(s)

Borough BROOKLYN

Block 292

Lot 40

BIN

CB No. 2

2 Requestor Information

Individuals Relationship to Job (example: applicant, owner, filing representative)

Last Name WESTON

First Name PAMELA

Middle Initial

Business Name N/A

Business Telephone 718-875-6280

Business Address 100 REMSEN STREET

Business Fax

City BROOKLYN

State NY

Zip 11201

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.

WITH EQUIPMENT USE CARDS- PHIL SHOULD CALL CARLOS TO WAIVE NEED FOR EQUIP USE REQUIRED ITEM. -MICROFILM FEES ARE PAID.

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

Date

12-18-08

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

☐ Other:

☐ Missing Required Item(s):

☐ TR-1 Error(s):

☐ Form(s) missing/incomplete: Form(s)

Section(s)/Reason(s)

☐ Other:

Must file a P.A.A. to add
EQI permits to items list!

J	A	N	E						
C	A	R	R	O	L	L			
M	C	G	R	O	A	R	T	Y	
A	R	C	H	I	T	E	C	T	

Dec 10, 2008

NYC Department of Buildings
210 Joralemon Street
Brooklyn, NY 11201

RE: 195 Amity Street

ALT TYPE 2
JOB #: 310172256

Dear Borough Commissioner:

I am writing to request a Letter of Completion for the above referenced job. All the work has been completed in accordance with the approved application.

Thanking you in advance for your kind assistance in this regard, I remain,

Sincerely yours,

Jane C. McGroarty
Jane C. McGroarty AIA

JCM/ns

