



PW1: Plan / Work Application

Must be typewritten.

**1 Location Information** Required for all applications.

House No(s) 705 Street Name ST. MARKS AVENUE
Borough BROOKLYN Block 01220 Lot 00078 BIN 3030733 C.B. No. 308
Work on Floor(s) CEL Apt. / Condo No(s)

2 Applicant Information Required for all applications. Fax, mobile telephone and e-mail address are optional information.

Last Name RUDIKOFF, P.E. First Name NEAL Middle Initial M
Business Name NEW YORK ENGINEERING ASSOC, PC Business Telephone (631) 753-0333
Business Address 270 SPAGNOLI ROAD, SUITE 204 Business Fax (631) 753-0427
City MELVILLE State NY Zip 11747 Mobile Telephone
E-Mail License Number 050579
Choose one: ☒ P.E. ☐ R.A. ☐ Sign Hanger ☐ Other, please specify:

3 Filing Representative Complete only if different from applicant specified in section 2. Fax, mobile phone, and e-mail are optional info.

Last Name MOSKOVER/SIMON/MAYS First Name PETER/LANETTE/T Middle Initial
Business Name D & D EXPEDITORS Business Telephone (631) 957-9770
Business Address 211 SOUTH WELLWOOD AVENUE Business Fax (631) 957-9772
City LINDENHURST State NY Zip 11757 Mobile Telephone
E-Mail Registration Number M07992

4 Filing Status Required for all applications. Choose one and provide specified associated information.

- ☒ **Initial Filing** 5, 7, 11, 12A, 25-26
Review is requested under which Building Code?
☐ 2008 ☒ 1968 ☐ Prior to 1968
Choose ☐ Standard Plan Examination or Review
one: ☒ Professional Certification PC1, POC1
☐ Self Certification of Objections A/I
- ☐ **Prior to Approval Actions** 25-26
☐ Amend Existing Filing 4A
☐ Subsequent Filing 6-7, 8A (All-2 only), 11
- ☐ **Reinstatement** 24-26
☐ **Withdrawal** 25-26
☐ Specified in 4A and 6
☐ Entire Job
4A Indicate existing document number affected by filing:
- ☐ **Post Approval Amendment (PAA)** 4A, 6, 24-25
Will PAA affect filing fees? ☐ Yes ☐ No
- ☐ **New Applicant** 4A, 25-26

5 Job/Project Types Choose one and provide specified associated information.

- ☐ **Alteration Type 1** 6A-E, 8B-C, 9-10, 12, 13C-F & 14, 18-20, 22, PW1A, PD1, select all that apply:
☐ Change in Exits
☐ Change in Number of Stories
☐ Change in Number of Dwelling Units
☐ Change in Occupancy / Use
☐ Change inconsistent with current Cert. of Occup.
- ☐ **Alteration Type 1, OT: "No Work"** 8C, 9-10 & 12, 13C-F, 14, 18-19, PW1A, PD1
- ☒ **Alteration Type 2** 5A, 6A-D, 8A-B, 9-10, & 13C-E, 14, 20, 22
- ☐ **Alteration Type 3** 5A, 6B-F, 8C, 9-10, 13C-E, 22
- ☐ **New Building** 6A-E, 8F-G, 9A-C, 10, 12, 13A-E (13B: 2008 Code only), 14, 18-20, PW1A, PD1
- ☐ **Full Demolition** 6B, 8D, 9B-D, & 13D-E, 14, 21A, 22
- ☐ **Sign** 5A, 6B-D, 9B, 22-23
- ☐ **Subdivision** 9B, 12A-B
- ☐ Condominium ☐ Improved 17
5A Directive 14 acceptance requested?
☒ Yes ☐ No

6 Work Types Select all that apply but no more than allowed by job and filing type. "OT" required on all NB and Alteration 1 initial applications.

- | | | | |
|--|---|--|--|
| 6A ☐ BL - Boiler PW1C
☐ FA - Fire Alarm
☒ FB - Fuel Burning PW1C | ☐ FS - Fuel Storage PW1C
☐ FP - Fire Suppression
☐ MH - Mechanical | ☒ PL - Plumbing PW1B
☐ SD - Standpipe PW1B
☐ SP - Sprinkler PW1B | 6E ☐ CC - Curb Cut 16 |
| 6B ☐ EQ - Construction Equipment 15 | 6C ☐ OT/GC - General Construction | 6D ☐ OT - Other, describe: | 6F ☐ OT/ANT - Antenna
☐ OT/BPP - Builders Pavement Plan 8D
☐ OT/FPP - Fire Protection Plan
☐ OT/MAR - Marquee 8E, 26B |

DOB Reference Number: T00000047877-000055

User Ref ID: 606-08JH

11	Job Description	11A	Related DOB Job Numbers
REPLACE OIL BURNER WITH GAS/OIL BURNER ON EXISTING LOW PRESSURE BOILER.			

11B Primary application job no.

12 Zoning Characteristics										
12A District(s) R6				12B Street legal width: _____ ft.						
Overlay(s) C1-3				Street Status: ☐ Public ☐ Private						
Special Dist.(s)				If the zoning lot includes multiple tax lots, list all tax lots here ►						
Map Number 17A										
12C Proposed: Use*		Zoning Floor Area	District	FAR	Proposed Lot Details:			Proposed Yard Details:		
		sq. ft.			Lot Type: ☐ Corner ☐ Interior ☐ Through			Check here if no yards: ☐ or		
		sq. ft.			Lot Coverage _____ %			Front Yard _____ ft.		
		sq. ft.			Lot Area _____ sq. ft.			Rear Yard _____ ft.		
		sq. ft.			Lot Width _____ ft.			Rear Yard Equivalent _____ ft.		
		sq. ft.			Proposed Other Details:			Side Yard 1 _____ ft.		
		sq. ft.			Enclosed Parking? ☐ Yes ☐ No			Side Yard 2 _____ ft.		
Proposed Totals		sq. ft.			If yes, no. of parking spaces: _____					
Existing Total		sq. ft.			Perimeter Wall Height _____ ft.					

*Use can be one of the following: residential, commercial, manufacturing, or community facility. List only one use per line.

13 Building Characteristics *Main use/dominant occupancy per AC §28-101.5. **Use 2008 Code equivalents only.									
13A Primary structural system, choose one : ☐ Masonry ☐ Concrete (CIP) ☐ Concrete (Precast) ☐ Wood ☐ Steel (Structural) ☐ Steel (Cold-Formed) ☐ Steel (Encased in Concrete)									
13B		Existing	Proposed		13D Building Type: ☐ 1, 2, or 3 Family ☒ Other				
Structural Occupancy Category					Mixed use building? ☐ Yes ☒ No				
Seismic Design Category			2008 Code Designations?		13E				
					Existing Proposed				
13C Occupancy Classification*		RES	☐ Yes ☒ No		Building Height 40 ft.				
Construction Classification		3	☐ Yes ☒ No		Building Stories 4				
Multiple Dwelling Classification					Dwelling Units 20				
13F Building was originally erected pursuant to which Building Code: ☐ 2008 ☐ 1968 ☐ Prior to 1968									
The earliest Code with which this building or any part of it is required to comply: ☐ 2008 ☐ 1968 ☐ Prior to 1968									

14 Fill Choose one.									
☒ Not Applicable ☐ On-Site ☐ Off-Site ☐ Under 300 cubic yards									

15 Construction Equipment					16 Curb Cut Description				
☐ Chute ☐ Sidewalk Shed ☐ Fence ☐ Supported Scaffold ☐ Other: _____					Construction Material: _____ Size: _____ linear ft. BSA/MEA Approval No. _____ Size of cut (with splays): _____ ft. Distance to nearest corner: _____ ft. on street: _____				

17 Tax Lot Characteristics										18 Fire Protection Equipment									
Original tax lots being merged or reapportioned (if applicable):										Existing Proposed									
										Yes No Yes No									
Tentative tax lot numbers (new tax lots only):										Fire Alarm ☐ ☐ ☐ ☐									
										Fire Suppression ☐ ☐ ☐ ☐									
										Sprinkler ☐ ☐ ☐ ☐									
										Standpipe ☐ ☐ ☐ ☐									

19 Open Spaces										20 Site Characteristics									
		Existing	Proposed			Existing	Proposed			Yes No									
Plaza Area		sq. ft.	sq. ft.	Arcade Area		sq. ft.	sq. ft.			☐ ☒ Tidal / Fresh Water Wetlands									
Parking Area		sq. ft.	sq. ft.	Parking Spaces						☐ ☒ Urban Renewal									
Loading Berths		sq. ft.	sq. ft.	Loading Berths						☒ ☐ Fire District									
										☐ ☒ Flood Hazard Area									

21 Demolition Details *Mechanical equipment other than handheld devices to be used for demolition or removal of debris (BC §3306.4).

Yes No

- 21A ☐ ☐ Demo. filing is for a secondary structure? If yes, specify structure being demolished:
☐ ☐ Mechanical means* from out of building? If yes, mechanical means will demolish: ☐ entire structure or ☐ part of structure
☐ ☐ Mechanical means* from within building? If yes, describe equipment proposed:
- 21B ☐ ☐ Demolition work affects the exterior building envelope

22 Asbestos Abatement Compliance Choose one.

- ☐ The scope of work requires related asbestos abatement as defined in the regulations of the NYC Department of Environmental Protection (DEP).
☒ The scope of work does **not** require related asbestos abatement as defined in the regulations of the NYC DEP.
☐ The scope of work is exempt from the asbestos requirement as defined in the regulations promulgated by the NYC DEP (15 RCNY 1-23(a)).

23 Sign

- | | | | |
|--|--|----------------------------------|---|
| Purpose: | Type: | Estimated Cost: \$ | 23A Illuminated type: ☐ Direct ☐ Flashing ☐ Indirect |
| ☐ Advertising | ☐ Illuminated 23A | Total Square Feet: _____ | Yes No |
| ☐ Non-Advertising | ☐ Non-Illuminated | Height above Curb: _____ ft. in. | ☐ ☐ If sign projects beyond building line, is owner billed for annual permit? If no, specify in 26B |
| Location: ☐ Ground ☐ Roof 23B ☐ Wall | Height above Roof: _____ ft. in. | | 23B ☐ ☐ Is roof sign tight, closed or solid? |
| Yes No | | | 23C Sign wording. If extensive, provide only key wording. |
| ☐ ☐ Is sign inside building line? If no, sign projects by: _____ ft. in. | | | |
| ☐ ☐ Designed for changeable copy? If no, 23C | | | 23D Distance from Arterial Highway: _____ ft. |
| ☐ ☐ Does an OAC have an interest in this sign or location? If yes, 23G | | | 23E Distance from Park 1/2 acre or more: _____ ft. |
| ☐ ☐ Within 900' and within view of an arterial highway? If yes, 23D | | | 23F OAC Sign Number: _____ |
| ☐ ☐ Within 200' and within view of a park 1/2 acre or more? If yes, 23E | | | 23G OAC Registration Number: _____ |
- If answer is "yes" to either of the above two questions and this is an advertising sign, OAC sign number is required in section 23F

24 Comments Place additional comments on an AI-1 form. See Guide for proper incorporation of professional certification statements.**25 Applicant's Statements and Signatures** Required for all applications.

Falsification of any statement is a misdemeanor 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. I understand that if I am found after hearing to have knowingly or negligently made a false statement or to have knowingly or negligently falsified or allowed to be falsified any certificate, form, signed statement, application, report or certification of the correction of a violation required under the provisions of this code or of a rule of any agency, I may be barred from filing further applications or documents with the Department. I prepared or supervised the preparation of the construction documents and specifications herewith submitted and to the best of my knowledge and belief, the construction documents and work shown thereon comply with the provisions of the NYC Administrative Code and other applicable laws and rules. ☐ (check here if except as set forth in the accompanying documents. I acknowledge that I have read and complied with all instructions pertaining to this application and supplementary schedules submitted.

Cluster Development Statement (if applicable): I hereby state that all specifications relating to this job are identical to those previously filed under the group lead job number, except as specified herein.

Yes No

- ☐ ☐ For initial New Building and Alteration 1 applications filed under the 2008 NYC Building Code only: does this building qualify for high-rise designation?
- ☒ ☐ Directive 14 initial applications only: I certify that the construction documents submitted and all construction documents related to this application do not require a new or amended Certificate of Occupancy as there is no change in use, exits, or occupancy.

Name (please print)

NEAL M. RUDINOFF, P.E.

Signature

Date

7/17/2008

P.E. / R.A. Seal (apply seal, then sign and date over seal)

DOB Reference Number: T00000047877-000055
User Ref ID: 606-08JH

7/08

26 Property Owner's Statements and Signatures

Falsification of any statement is a misdemeanor 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. I understand that if I am found after hearing to have knowingly or negligently made a false statement or to have knowingly or negligently falsified or allowed to be falsified any certificate, form, signed statement, application, report or certification of the correction of a violation required under the provisions of this code or of a rule of any agency, I may be barred from filing further applications or documents with the Department.

I have authorized the applicant to file this application for the work specified herein and all future amendments. I will not knowingly authorize any work that is not in compliance with the Energy Conservation Construction Code of NYS (ECCCNY).

Yes No

- ☐ ☒ **Energy Conservation Construction Code of NYS**
Does the proposed work constitute part or all of a replacement of 50% or more of a system or subsystem at this location in any consecutive 12 month period?
- ☐ ☒ **Fee Deferred Request Statement**
I hereby request a fee deferral for the work proposed on this application and understand that **all fees must be paid before issuance of any Certificate of Occupancy or job sign off.**
- ☐ ☒ **Fee Exemption Request Statement**
In accordance with §28-112.1 of the NYC Administrative Code I hereby state that the proposed work involves a building or property owned or used exclusively for the purposes indicated in such section.
- ☐ ☒ **Owner's Certifications Regarding Occupied Housing**
The site of the building to be altered or demolished, or the site of the new building to be constructed, contains one or more occupied dwelling units that will remain occupied during construction. These occupied dwelling units have been clearly identified on the submitted construction documents.
- ☐ ☒ The site of the building to be altered or demolished, or the site of the new building to be constructed, contains occupied housing accommodations subject to rent control or rent stabilization under Chapters 3 and 4 of Title 26 of the New York City Administrative Code. **If yes, select one of the following:**
- ☐ The owner is not required to notify the Division of Housing and Community Renewal (DHCR) of the owner's intention to file because the nature and scope of the work proposed, pursuant to DHCR regulations, does not require notification.
- ☐ The owner has notified the Division of Housing and Community Renewal (DHCR) of its intention to file such construction documents/apply for such permit and has complied with all requirements imposed by the regulations of such agency as preconditions for such [filing/application].
Provide date DHCR notified: _____
- ☐ ☒ **Owner's Certification for Adult Establishments**
I authorize and intend to create, enlarge, or extend an establishment with adult activity and/or adult material as defined in ZR §12-10 "adult establishment" or related sign at the subject premises.
- ☒ ☐ **Owner's Certification for Directive 14 Applications (if applicable)**
I have read and am fully aware of the applicant's statement that the construction documents submitted and all construction documents related to this application will not require a new or amended Certificate of Occupancy as there is no change in use, exits, or occupancy. Furthermore, I understand that I am responsible for retaining a qualified design professional to perform a final inspection when the permitted work is complete and this professional must submit a final inspection report to the NYC Department of Buildings within the time following inspection prescribed by Department rule.

Owner type: ☐ Individual ☐ DCAS ☐ HHC ☐ NYCHA
☒ Partnership ☐ DOE ☐ HPD ☐ NYS
☐ Corporation 26A ☐ Other Government
☐ Condo Unit Owner or Co-Op Tenant-shareholder 26A

Is the owner a non-profit organization? ☐ Yes ☒ No

Name (please print): **SOL AOLD**

Relationship to Owner: **MANAGER**

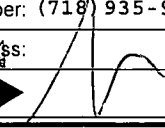
Business Name/Agency: **705 ST. MARKS LLC**

Street Address: **199 LEE AVENUE- #233**

City: **BROOKLYN** State: **NY** Zip: **11211**

Telephone Number: **(718) 935-9624** Fax:

E-Mail Address:

Signature and Date  **7/17/2008**

26A Condo/Co-Op Board or Corporation Second Officer

Name (please print):

Title:

Street Address:

City:

State:

Zip:

Telephone Number:

Fax:

E-Mail Address:

Signature and Date* 

*Signature required for authorized representative of Condo or Co-Op board. Second officer signature not required for corporations.

26B Lessee Responsible for Annual Sign or Marquee Permit

Name (please print):

Relationship to Owner:

Business Name/Agency:

Street Address:

City:

State:

Zip:

Telephone Number:

Fax:

E-Mail Address:

Internal Use Only

Pre-Filer Name:

Pre-Filer Signature:

Date:

Cost Estimate: \$

Amount Due: \$

Verified by ▼

Date ▼

Initial Amount Paid: \$

Balance Due: \$

Stamps, Certifications and Notes:

DOB Reference Number: T00000047877

User Ref ID: 606-08JH

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