



Equipment Use Application/Permit

Please File 3 Copies
Application Must Be Typewritten

Stone Ave Branch Library 1738.001

DEPT BLDGS	320049657	Job Number
SC342217345		Scan Code

1 Filing Status

Job Number 320049657

2 Type of Equipment

☐ Heating	☐ Ventilation	☒ Air Conditioning	☐ Refrigeration
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3 Location

Borough Brooklyn	Block 3794	Lot(s) 18	BIN 3084596
House No.(s) 581	Street Name: Mother Gaston Blvd		Apt/Condo No(s).
Special Place Name	Floor(s) 1		

4 Applicant

Last Name Scheller	First Name Frank	M.I. J
Business Name Greenman Pedersen Inc.		Business Phone (845) 368-4050
Address 400 Rella Boulevard		City Montebello
State NY		Zip 10901
☒ P.E.	☐ R.A.	Other:
Lic. No. 060643		

5 Equipment Specifications

Item - Manufacturer/Trade Name	Floor	No. of Items	MEA Number or Serial Number	Capacity: BTU's/CFM
Carrier 38APD02555A20050	Roof	1	0810Q39130	25 Tons
Carrier 38AUDA16A0K5A0A0A0	Roof	1	0810U03327	15 Tons

6 Statements and Signatures

The owner certifies that he authorizes the applicant to perform the proposed work in accordance with plans and specifications approved under said application. Falsification of any statement is a misdemeanor under Section 26-124 of the Administrative 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 both.	Applicant Name Frank Scheller
	Title PE
	Signature <i>Frank Scheller</i> Date 8/3/11
	Owner Name
	Title
Signature	Date

Approvals

Examined and Recommended for Approval	Approved
Examiner Name	Borough Commissioner Signature Date
Signature	Date

Sign Off

I hereby certify that the work indicated above has been done in a manner required by the Rules and Regulations of the Department of Buildings except where reported adversely.	Name <i>Aviraj BAKI</i>
	Inspector's Signature <i>[Signature]</i> Date Signed Off 8/4/11

