



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

Must be typewritten.

DEPT.BLDGS	320121612	Job Number
SC352003971		Scan Code

1 Location Information

House No(s) 434 Street Name CLERMONT AVE Work Proposed on Floor No(s)
Borough BROOKLYN Block 1958 Lot 49 BIN 3055901 CB No. 302

2 Requestor Information

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

Last Name CHENG/WANG/SHI/RUAN First Name CHI/QIU/XIONG/CAN Middle Initial

Business Name MA ENGINEERING PC Business Telephone (212) 219-8689

Business Address 401 BROADWAY, SUITE# 213 Business Fax (718) 228-2575

City NEW YORK State NY Zip 10013 Mobile Telephone

E-Mail INFO@MAENGINEERINGPC.COM 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 A1-1" here and submit a completed A1-1 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

Date

7/19/10

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: S/O 7-19-10

MA ENGINEERING CONSULTANT, PC

401 BROADWAY SUITE# 213 NEW YORK NY 10013

TEL: (212) 925-5961

July 15, 2010

NYC Dept of Buildings
Manhattan Borough Office
210 Joralemon Street, 8th FL
Brooklyn, NY 11201

To Whom It May Concern:

Respectfully request to issue letter of completion for the following application which is under Directive 14 of 1975:

DOB Application: 320121612
Address: 434 Clermont Ave, Brooklyn
Block: 1958
Lot: 49

Sincerely yours,

Mohammad Alauddin, PE





TR1: Technical Report Statement of Responsibility

This form must be typewritten

DEPT. BLDGS 320121612 Job Number
SC352003965 Scan Code

1 Location Information *Required for all applications.*

House No(s) 434

Street Name CLERMONT AVENUE

Work on Floor(s) CEL, BAS 001 THRU 003

2 Applicant Information *Required for all applications.*

Choose all that apply: ☒ Design Applicant 3A, 4A, 5 ☒ Special Inspections Applicant 3B-D, 6-8 ☒ Progress Inspections Applicant 4B-D, 6-8

Last Name ALAUDDIN

First Name MOHAMMAD

Middle Initial

Business Name MA ENGINEERING CONSULTING, PC

Business Telephone 212-219-8689

Business Address 401 BROADWAY, SUITE#213

Business Fax

City NEW YORK

State NY

Zip 10013

Mobile Telephone

License Type choose one: ☒ P.E. ☐ R.A. ☐ Other:

License Number 083149

3 Special Inspection Items *Required for all applications, continued on page 2; ■ indicates report required.*

3A Identification of Requirement		3B Identification of Responsibilities	3C Certificate of Complete Inspections / Tests	3D Withdraw Responsibilities
Y	N Special Inspections	Code/Section	Initial & Date	Initial & Date
☐	☒ Flood Zone Compliance	BC G105		
☐	☒ Fire Alarm Test	BC 907, BC 1704.13		
☐	☒ Photoluminescent Exit Path Markings ■ TR7	BC 1026.11		
☐	☒ Emergency Power Systems (Generators)	BC 1704.13, BC 2702		
☐	☒ Structural Steel - Welding	BC 1704.3.1		
☐	☒ Structural Steel - Erection & Bolting	BC 1704.3.2, BC 1704.3.3		
☐	☒ Structural Cold-Formed Steel	BC 1704.3.4		
☐	☒ Concrete - Cast-In-Place	BC 1704.4		
☐	☒ Concrete - Precast	BC 1704.4		
☐	☒ Concrete - Prestressed	BC 1704.4		
☐	☒ Masonry	BC 1704.5		
☐	☒ Wood - Off-Site fabrication of Structural Elements	BC 1704.6		
☐	☒ Wood - Installation of High-Load Diaphragms	BC 1704.6.1		
☐	☒ Wood - Installation of Metal-Plate-Connected Trusses	BC 1704.6.3		
☐	☒ Wood - Installation of Prefabricated I-Joists	BC 1704.6.4		
☐	☒ Soils - Site Preparation	BC 1704.7.1		
☐	☒ Soils - Fill placement & In-Place Density	BC 1704.7.2, BC 1704.7.3		
☐	☒ Soils - Investigations (Borings/Test Pits) ■ TR4	BC 1704.7.4		
☐	☒ Pile Foundations & Drilled Pier Installation ■ TR5	BC 1704.8		
☐	☒ Pier Foundations	BC 1704.9		
☐	☒ Underpinning	BC 1704.9.1		
☐	☒ Wall Panels, Curtain Walls, and Veneers ■	BC 1704.10		
☐	☒ Sprayed Fire-Resistant Materials	BC 1704.11		
☐	☒ Exterior Insulation Finish Systems (EIFS)	BC 1704.12		
☐	☒ Alternative Materials - OTCR Buildings Bulletin # _____	BC 1704.13		
☐	☒ Smoke Control Systems	BC 1704.14		
☒	☐ Mechanical Systems	BC 1704.15		
☐	☒ Fuel-Oil Storage and Fuel-Oil Piping Systems	BC 1704.16		
☐	☒ High-Pressure Steam Piping (Welding)	BC 1704.17		
☐	☒ Fuel-Gas Piping (Welding)	BC 1704.18		
☐	☒ Structural Safety - Structural Stability	BC 1704.19		
☐	☒ Mechanical Demolition	BC 1704.19, BC 3306.6		

07/15/10

3 Special Inspection Items (continued) Required for all applications; ■ indicates report required.					
3A Identification of Requirement			3B Identification of Responsibilities	3C Certificate of Complete Inspections / Tests	3D Withdraw Responsibilities
Y	N	Special Inspections	Code/Section	Initial & Date	Initial & Date
☐	☒	Excavation - Sheeting, Shoring, and Bracing	BC 1704.19, BC 3304.4.1		
☐	☒	Soil Percolation Test - Drywell ■	BC 1704.20.1		
☐	☒	Soil Percolation Test - Septic ■	BC 1704.20.1		
☐	☒	Site Storm Drainage Disposal and Detention System Installation	BC 1704.20		
☐	☒	Septic System Installation	BC 1704.20		
☐	☒	Sprinkler Systems	BC 1704.21		
☐	☒	Standpipe Systems	BC 1704.22		
☐	☒	Heating Systems	BC 1704.23		
☐	☒	Chimneys	BC 1704.24		
☒	☐	Firestop, Draftstop, and Fireblock systems	BC 1704.25		07/15/10
☐	☒	Aluminum Welding	BC 1704.26		
☐	☒	Seismic Isolation Systems	BC 1707.8		
☐	☒	Concrete Test Cylinders ■ TR2	BC 1905.6	Submit TR2 to complete these items	
☐	☒	Concrete Design Mix ■ TR3	BC 1905.3	Submit TR3 to complete these items	

4 Progress Inspection Items Required for all applications.					
4A Identification of Requirement			4B Identification of Responsibilities	4C Certificate of Complete Inspections / Tests	4D Withdraw Responsibilities
Y	N	Progress Inspections	Code/Section	Initial & Date	Initial & Date
☐	☒	Preliminary	28-116.2.1, BC 109.2		
☐	☒	Footing and Foundation	BC 109.3.1		
☐	☒	Lowest Floor Elevation (attach FEMA form)	BC 109.3.2		
☐	☒	Frame Inspection	BC 109.3.3		
☒	☒	Energy Code Compliance Inspections	BC 109.3.5		7/15/10
☒	☒	Fire-Resistance Rated Construction	BC 109.3.4		7/15/10
☐	☒	Public Assembly Emergency Lighting	28-116.2.2		
☒	☐	Final* Directive 14 of 1975, and 1 RCNY §101-10	28-116.2.4.2, BC 109.5,		07/15/10

* For column 4C, indicate date when the actual final inspection was performed

5 Design Applicant's Statements and Signatures P.E./R.A. responsible for plans, choose both below and sign/seal.	
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☐ I have identified all of the special inspections, progress inspections and tests required for compliance.

☐ I certify that the Special Inspection and Approved Agencies engaged by the owner to supervise the work specified above are acceptable. (BC 1704.1)

Name (please print)

Signature

Date

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

6 Owner's Statement and Signature for Progress/Special Inspector	
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Required when inspection applicant identifies responsibilities.

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 a fine or imprisonment, 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.

Name (print)

Title

Signature

Date

7 Inspection Applicant's Identification of Responsibilities

Check all that apply below:

- ☐ For the **special inspections** indicated above in section 3, I certify that I am the principal/director of the special inspection agency accepting responsibility for conducting the inspections. I further certify that I have read the applicable sections of the New York City Construction Codes in connection with special inspections as well as 1 RCNY 101-06 Rule, which specifies the qualifications required for each inspection and that this agency meets those qualifications for each and every special inspection for which I/we take responsibility. I agree that both I and the agency will comply with all provisions of the New York City Construction Codes and the Rule. I am aware of the additional sanctions imposed on false filings by §28-211.1.2 of the Administrative Code.
- ☐ I certify that I am conducting **Small Building Inspections** and assume the responsibility for the special inspections specified in section 3 above. I personally, or where permitted by the New York City Construction Codes, qualified personnel under my direct supervision, will perform the required inspections and tests. All inspection and test reports shall be signed and made available to the Department. I understand that a qualified special inspection agency is required for Soils Investigation, Pier and Pile installation, Underpinning of structures and Protection of the sides of excavations greater than 10 feet in depth. I am aware of the additional sanctions imposed on false filings by §28-211.1.2 of the Administrative Code.
- ☐ For the **progress inspections** indicated above in section 4, and/or **concrete test items** indicated in section 3, I assume the responsibility and I personally, or where permitted by the New York City Construction Codes, qualified personnel under my direct supervision, will perform the required inspections and tests on such forms and in such matter as the Department requires or requests. I am aware of the additional sanctions imposed on false filings by §28-211.1.2 of the Administrative Code.

Final Inspection:

- ☐ I will make final inspection of the construction work, including those inspections during its progress necessary to my certification upon final inspection that all work substantially conforms to approved construction documents and applicable laws and rules. I will confirm that the performance of progress inspections and other inspections has been documented before I report the work complete. As prescribed by 1 RCNY 101-10, I will perform the final inspection within 1 year from the expiration of the last valid permit of the work.
- Upon completion of the work and within 30 days of my final inspection, I will file a certification attesting to the fact that all work was performed and completed in accordance with the approved construction documents, laws and rules, except as reported otherwise.
- I understand that my failure to file a certification of completion or to notify the Department of my withdrawal of responsibilities within one year from expiration of the last valid permit may result in the loss of my privileges to file under Directives 2 and 14 of 1975 or issuance of a violation, or both. I am aware of the additional sanctions imposed on false filings by §28-211.1.2 of the Administrative Code.

- ☐ **Change of Applicant:** I am a newly designated individual responsible for the items specified herein and I hereby state that:
- ☐ None of the inspections/tests indicated herein have been performed to date by the previously designated individual.
- ☐ Some of the inspections/tests indicated herein have been performed by the previously designated individual, as indicated in the attached report.

I am aware of the additional sanctions imposed on false filings by §28-211.1.2 of the Administrative Code.

Name (please print)

Signature

Date

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

8 Inspection Applicant's Certification of Completion

- ☒ I have completed the items specified herein and certify the following (check one only):
- ☒ All work performed has been performed in accordance with applicable provisions of the New York City Construction Codes and other designated rules and regulations.
- ☐ All work performed has been performed in accordance with applicable provisions of the New York City Construction Codes and other designated rules and regulations, except as indicated in the attached report.
- I am aware of the additional sanctions imposed on false filings by §28-211.1.2 of the Administrative Code.
- ☐ **Withdrawal of Applicant:** I am withdrawing responsibility for the items of special/progress inspections and/or tests indicated herein and herewith submit the results or status of the work performed to date.

Name (please print)

MOHAMMAD ALAUDIN

07-15-2010

Signature

Date

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



PW3: Cost Affidavit

Must be typewritten.

DEPT. BLDGS	320121612	Job Number
SC352003968		Scan Code

1 Reason For Filing Required for all applications.

Reason for filing cost affidavit:

- ☐ Initial Filing 2-7
☐ Prior to Approval Actions 1A, 2-7
☐ Post Approval Amendment (PAA) 1A, 2-7
☒ To obtain Sign-off 2-3, 5, 7

Cost information provided must be based on:

- Estimated cost of construction
Estimated cost of construction
Estimated cost of construction
Actual construction cost of completed work

1A Indicate existing document number affected by filing:

2 Location Information Required for all applications.

House No(s) 434

Street Name CLERMONT AVENUE

Borough BROOKLYN

Block 1958

Lot 49

BIN 3055901

C.B. No. 302

3 Cost Details Required for all applications.

Cost estimates shall include total value of work per §28-112.3 of the NYC Administrative Code and shall be direct work costs based upon material and labor; work shall include all construction elements including, but not limited to, construction equipment, wall and floor finishes, built-in cabinets, and kitchen appliances. Indirect costs, including but not limited to general conditions and insurance, shall be added to direct work costs and shall be reflected in the unit costs shown. When filing an enlargement the estimated cost should be exclusive of any work performed within the additional square footage. "Yes" or "No" must be specified for each "Category of Work" listed below.

Categories of Work (Must match all applicable categories indicated on PW1.)

- | | | |
|--|---|--|
| Yes No | Yes No | Yes No |
| ☐ ☒ Boiler (BL) | ☐ ☒ Standpipe (SD) | ☒ ☐ General Construction (OT) |
| ☐ ☒ Fire Alarm (FA) | ☐ ☒ Sprinkler (SP) | ☐ Partial Demolition |
| ☐ ☒ Fuel Burning (FB) | ☐ ☒ Signs (SG) | ☒ Non-Structural Demolition |
| ☐ ☒ Fuel Storage (FS) | ☐ ☒ Other (OT) | ☐ Structural Work |
| ☐ ☒ Fire Suppression (FP) | ☐ Antenna (OT/ANT) | ☒ Interior Renovation |
| ☒ ☐ Mechanical (MH) | ☐ Marquee (OT/MAR) | ☐ Exterior Renovation |
| ☒ ☐ Plumbing (PL) | ☐ (Describe) _____ | ☐ (Describe) _____ |

Category of Work*	Description of Work	Area/Units	Unit Cost (\$)	Total Cost (\$)	Work Category Total Cost (\$)
PLUMBING	REMOVE ALL EXISTING PLUMBING FIXTURES	20 FIX	\$500/FIX	\$10000	
	INSTALL NEW BATHROOM FIXTURES	12 FIX	\$2000/FIX	\$24000	
	INSTALL NEW KITCHEN FIXTURES	8 FIX	\$2500/FIX	\$20000	
	INSTALL NEW LAUNDRY FIXTURES	8 FIX	\$1000/FIX	\$8000	
	INSTALL NEW HEATING & HOT WATER SYST	8 FIX	\$2500/FIX	\$20000	
	INSTALL NEW FLOOR DRAIN AND SEWER EJECTION PUMP	5 FIX	\$1000	\$5000	\$87000
MECHANICAL	VENTILATION FOR BATHROOM & KITCHEN	680 CFM	\$10/CFM	\$6800	\$6800
GEN. CONSTRUC.					
NON-STRU. DEMO	REMOVE EXISTING INTERIOR FINISHING	1200 SF	\$10/SF	\$12000	
INTERIOR RENO	REPAIR INTERIOR STAIR FROM WOOD TO STEEL	200 SF	\$40/SF	\$8000	
	REPAINT EXISTING WALL & CEILING	3000 SF	\$5/SF	\$15000	
	REPLACE FLOORING	3000 SF	\$15/SF	\$45000	
	INSTALL NEW INTERIOR PARTITION	800 SF	\$20/SF	\$16000	
STRUCTURAL	INSTALL NEW FLOOR JOIST	5 FIX	\$1000/FIX	\$5000	\$101000
TOTAL JOB COST: \$				194,800	

*List ALL Categories of Work specified "Yes" above. Use more than one line for Categories of Work that involve multiple unit costs. See PW3 Form Instructions for a sample of completed Section 3 Cost Details. For enlargements, only items associated with work performed in the existing area should be listed.

4 Design Applicant InformationChoose One: ☐ P.E. ☐ R.A. ☐ Sign Hanger ☐ Other (specify) _____ License Number _____

Last Name	First Name	Middle Initial
Business Name	Business Phone	Business Fax
Business Address	Mobile Phone	
City	State	Zip
		E-Mail

5 Owner/Lease Holder InformationChoose One: ☒ Owner ☐ Lease Holder

Last Name HUANG	First Name TRISTA	Middle Initial
Business Name N/A	Business Phone 646-338-3311	Business Fax
Business Address 434 CLERMONT AVENUE	Mobile Phone	
City BROOKLYN	State NY	Zip 11238
		E-Mail

6 Design Applicant's Statements and Signatures

I hereby state the information on this form is correct and complete to the best of my knowledge. I understand falsification of any statement is a misdemeanor and punishable by a fine, imprisonment, or both. I also understand 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.

Name (print)

Signature

Date

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

7 Owner's/Lease Holder's Statements and Signatures *Notary only required when submitting to obtain Sign-off.*

I hereby state the information on this form is correct and complete to the best of my knowledge. I understand falsification of any statement is a misdemeanor and is punishable by a fine or imprisonment, or both. I also understand 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.

Name (print)

TRISTA HUANG

Signature

Date

[Signature]
7/15/10

Notarization

State of New York, County of: *New York*

Sworn to or affirmed under penalty of perjury

15th day of July 2010

Notary Public Signature

[Signature]

Notary Seal

TIAN JING WANG
Notary Public, State of New York
No. 01WA6137101
Qualified in Kings County
Commission Expires Nov. 14, 2013

Internal Use Only

Staff	PW3 Cost Details Validation	Comments (May include cost guidance.)	Initials
Pre-File:	☐ Accept Original ☐ Revised Cost Needed		
Plan Examiner/Project Advocate:	☐ Accept Original ☐ Revised Cost Needed		
C of O:	☐ Accept Original ☐ Revised Cost Needed		
Pre-File/C of O:	☐ Accept Revised Submission (Resolved)		