



PW1: Plan / Work Application

Must be typewritten.

DEPT. BLDGS.	320166743	Job Number
SC091104031		Scan Code

1 Location Information Required for all applications.			
House No(s) 1794	Street Name CONEY ISLAND AVENUE		
Borough BROOKLYN	Block 06592	Lot 00033	BIN 3174029
Work on Floor(s) 001 to 002, CEL			

2 Applicant Information Required for all applications. Fax, mobile telephone and e-mail address are optional information.			
Last Name WEISS		First Name SANDOR	Middle Initial
Business Name GELU DURUS MUSICA		Business Telephone (718) 692-0800	
Business Address 1317 AVENUE J		Business Fax (718) 692-1914	
City BROOKLYN	State NY	Zip 11230	Mobile Telephone
E-Mail ANNO.MUNDI.ARCHITECT@GMAIL.COM		License Number 014318	
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 JOHN/LEUDO/SAM		First Name ADAMSKE/MARIA/I	Middle Initial
Business Name GELU-DURUS MUSICA		Business Telephone (718) 692-0800	
Business Address 1317 AVENUE J		Business Fax (718) 692-1914	
City BROOKLYN	State NY	Zip 11230	Mobile Telephone
E-Mail ANNO.MUNDI.ARCHITECT@GMAIL.COM		Registration Number	

4 Filing Status Required for all applications. Choose one and provide specified associated information.			
☒ Initial Filing 5, 7, 11, 12A, 25-26	☐ Prior to Approval Actions 25-26	☐ Reinstatement 24-26	
Review is requested under which Building Code?	☐ Amend Existing Filing 4A	☐ Withdrawal 25-26	
☐ 2008 ☒ 1968 ☐ Prior to 1968	☐ Subsequent Filing 6-7, 8A (Alt-2 only), 11	☐ Specified in 4A and 6	
Choose ☒ Standard Plan Examination or Review	☐ Post Approval Amendment (PAA) 4A, 6, 24-25	☐ Entire Job	
one: ☐ Professional Certification PC1, POC1	Will PAA affect filing fees? ☐ Yes ☐ No	4A Indicate existing document number affected by filing:	
☐ Self Certification of Objections A11	☐ 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:	☐ Alteration Type 1, OT: "No Work" 8C, 9-10 & 12, 13C-F, 14, 18-19, PW1A, PD1	☐ Full Demolition 6B, 8D, 9B-D, & 13D-E, 14, 21A, 22	
☐ Change in Exits	☐ Alteration Type 2 5A, 6A-D, 8A-B, 9-10, & 13C-E, 14, 20, 22	☐ Sign 5A, 6B-D, 9B, 22-23	
☐ Change in Number of Stories	☐ Alteration Type 3 5A, 6B-F, 8C, 9-10, 13C-E, 22	☐ Subdivision 9B, 12A-B	
☐ Change in Number of Dwelling Units	☐ New Building 6A-E, 8F-G, 9A-C, 10, 12, 13A-E (13B: 2008 Code only), 14, 18-20, PW1A, PD1	☐ Condominium ☐ Improved 17	
☒ Change in Occupancy / Use		5A Directive 14 acceptance requested?	
☐ Change inconsistent with current Cert. of Occup.		☐ 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	☐ FS - Fuel Storage PW1C	☒ PL - Plumbing PW1B	6E ☐ CC - Curb Cut 16
☐ FA - Fire Alarm	☐ FP - Fire Suppression	☐ SD - Standpipe PW1B	6F ☐ OT/ANT - Antenna
☐ FB - Fuel Burning PW1C	☐ MH - Mechanical	☐ SP - Sprinkler PW1B	☐ OT/BPP - Builders Pavement Plan 8D
6B ☐ EQ - Construction Equipment 15	6C ☒ OT/GC - General Construction	6D ☐ OT - Other, describe:	☐ OT/FPP - Fire Protection Plan
			☐ OT/MAR - Marquee 8E, 26B

DOB Reference Number: T00000305416-000049

User Ref ID: 5770-229

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7 Plans/Construction Documents Submitted *Plans are required for most applications.*

☒ AR - Architectural ☐ BP - BPP Checklist ☐ DM - Demolition (Full/Partial) ☒ EN - Energy Analysis ☐ FO - Foundation or ☐ NP - No Plans
☐ ME - Mechanical ☐ OT - Other ☒ PL - Plumbing ☐ ST - Structural ☒ ZO - Zoning

8 Additional Information

8A WT	Cost	WT	Cost	WT	Cost	8B Is a building enlargement proposed?	8C Estimated Job Cost \$ 65000
PL	10000					☒ No enlargement is proposed	8D Street Frontage: linear ft.
						☐ Yes 12, PD1	8E Height: ft. Width: ft.
						☐ Horizontal ☐ Vertical	8F Name of cluster or development below:
						Additional Construction Floor Area:	Project lead job no.
8G Total Construction Floor Area: sq. ft.							

9 Additional Considerations, Limitations or Restrictions

Yes No	Yes No	9F Structural Peer Reviewer License No. P.E.
9A ☐ ☒ Structural peer review required per BC §1627 <i>If yes, 9F</i>		
9B ☐ ☒ Filed to Comply with Local Law <i>If yes, 9G</i>	☐ ☒ Landmark	9G Local Law No(s) Year
☐ ☒ Other, specify: _____	☐ ☒ "Little E" Hazmat Site	
☐ ☒ Restrictive Declaration / Easement <i>If yes, 9L</i>	☐ ☒ Unmapped Street	9H Violation No(s)
☐ ☒ Zoning Exhibit (I, II, III, etc.) <i>If yes, 9M</i>	☐ ☒ Filing to Address Violation(s) <i>If yes, 9H</i>	
☐ ☒ Requesting legalization of work on or after Jan. 1, 1989 where no work w/o a permit violations have been issued		
9C ☐ ☒ Adult Establishment <i>If yes, plot diagram (except DM)</i>	☐ ☒ Included in LMCCC	9I BSA Calendar No(s)
☐ ☒ Compensated Development (Inclusionary Housing)	☐ ☒ Infill Zoning	
☐ ☒ Low Income Housing (Inclusionary Housing)	☐ ☒ Loft Board	9J CPC Calendar No(s)
☐ ☒ Single Room Occupancy (SRO) Multiple Dwelling	☐ ☒ Quality Housing	
☐ ☒ Filing includes Lot Merger / Reapportionment <i>If yes, 17</i>	☐ ☒ Site Safety Job/Project	
9D ☐ ☒ Includes permanent removal of standpipe, sprinkler or fire suppression related systems		9K High-Rise Team Tracking Number:
9E ☐ ☒ Work includes partial demolition as defined in AC §28-101.5 <i>If yes, 21B</i>		
☐ ☒ Structural Stability affected by proposed work		
9L CRFN(s) Restrictive Declaration / Easement (max. 4):		
9M CRFN(s) Zoning Exhibit (I, II, III, etc. - max. 4):		

10 ECCCNY Compliance *Energy Conservation Construction Code of NYS*

- ☒ To the best of my knowledge, belief and professional judgment, this application is in compliance with the ECCCNY.*
☐ Energy analysis is on another job number: _____
☐ The work proposed in this application is exempt from the ECCCNY because per Chapter 1 of the ECCCNY it is:*
☐ An alteration but not a substantial alteration
☐ Work in a historic building
☐ Work in an exempt building (*specify category/reasons in 10A***)

**I understand the Department may require supporting analyses and documentation.*
***§101.5.2.1 of the ECCCNY only exempts thermal envelope provisions.*

10A Specific Reason for ECCCNY Exemption**11 Job Description**

CHANGE USE AT FIRST FLOOR FROM PARKING UG 8 TO AMBULATORY DIAGNOSTIC TREATMENT HEALTHCARE FACILITY. INTERIOR MODIFICATION OF PARTITIONS AND PLUMBING WORK AS INDICATED ON PLANS.

11A Related DOB Job Numbers

11B Primary application job no.

DOB Reference Number: T00000305416-000049

User Ref ID: 5770-229

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12 Zoning Characteristics					
12A District(s) C8-2 Overlay(s) Special Dist.(s) OP Map Number 22D			12B Street legal width: 100 ft. Street Status: ☒ Public ☐ Private <i>If the zoning lot includes multiple tax lots, list all tax lots here ►</i>		
12C Proposed: Use* Zoning Floor Area District FAR COMMUNITY FAC 2128 sq. ft. C8-2 4 .8 COMMERCIAL 1600 sq. ft. C8-2 4 .8 sq. ft. sq. ft. sq. ft. sq. ft. Proposed Totals 3728 sq. ft. 4 .8 Existing Total 1600 sq. ft.			Proposed Lot Details: Lot Type: ☐ Corner ☒ Interior ☐ Through Lot Coverage 100 % Lot Area 2000 sq. ft. Lot Width 20 ft. Proposed Other Details: Enclosed Parking? ☐ Yes ☒ No <i>If yes, no. of parking spaces:</i> Perimeter Wall Height 24 ft.		
<i>*Use can be one of the following: residential, commercial, manufacturing, or community facility. List only one use per line.</i>					

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 Structural Occupancy Category Seismic Design Category 13C Occupancy Classification* E Construction Classification 3 Multiple Dwelling Classification		Existing Proposed 2008 Code Designations? 2008 Code Designations? E X Yes** 3 X Yes X No		13D Building Type: ☐ 1, 2, or 3 Family ☒ Other Mixed use building? ☐ Yes ☒ No 13E Building Height 24 ft. 24 ft. Building Stories 2 2 Dwelling Units	
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	
☐ Chute ☐ Sidewalk Shed ☐ Fence Size: _____ linear ft. ☐ Supported Scaffold ☐ Other: _____	Construction Material: _____ BSA/MEA Approval No. _____

16 Curb Cut Description
Size of cut (with splays): _____ ft. Distance to nearest corner: _____ ft. on street: _____

17 Tax Lot Characteristics											
Original tax lots being merged or reapportioned (if applicable):											
<table border="1" style="width: 100%; height: 20px;"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> </table>											
Tentative tax lot numbers (new tax lots only):											
<table border="1" style="width: 100%; height: 20px;"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> </table>											

18 Fire Protection Equipment	
	Existing Proposed
	Yes No Yes No
Fire Alarm	☐ ☒ ☐ ☒
Fire Suppression	☐ ☒ ☐ ☒
Sprinkler	☐ ☒ ☐ ☒
Standpipe	☐ ☒ ☐ ☒

19 Open Spaces					
	Existing	Proposed		Existing	Proposed
Plaza Area	sq. ft.	sq. ft.	Arcade Area	sq. ft.	sq. ft.
Parking Area	sq. ft.	sq. ft.	Parking Spaces		
Loading Berths	sq. ft.	sq. ft.	Loading Berths		

20 Site Characteristics	
	Yes No
☐ ☒ Tidal / Fresh Water Wetlands	
☐ ☒ Urban Renewal	
☒ ☐ 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(b)).**23 Sign**

Purpose:

☐ Advertising☐ Non-Advertising

Type:

☐ Illuminated 23A☐ Non-Illuminated

Estimated Cost: \$

Total Square Feet:

Height above Curb: ft. in.

Height above Roof: ft. in.

Location: ☐ Ground ☐ Roof 23B ☐ Wall

Yes No

☐ ☐ Is sign inside building line? If no, sign projects by: ft. in.☐ ☐ Designed for changeable copy? If no, 23C☐ ☐ Does an OAC have an interest in this sign or location? If yes, 23G☐ ☐ Within 900' and within view of an arterial highway? If yes, 23D☐ ☐ Within 200' and within view of a park 1/2 acre or more? If yes, 23EIf answer is "yes" to either of the above two questions and this is an advertising sign, OAC sign number is required in section 23F23A Illuminated type: ☐ Direct ☐ Flashing ☐ Indirect

Yes No

☐ ☐ If sign projects beyond building line, is owner billed for annual permit? If no, specify in 26B23B ☐ ☐ Is roof sign tight, closed or solid?

23C Sign wording. If extensive, provide only key wording.

23D Distance from Arterial Highway: ft.

23E Distance from Park 1/2 acre or more: ft.

23F OAC Sign Number:

23G OAC Registration Number:

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)

SANDOR WEISS

Signature

Date

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

DOB Reference Number: T00000305416-000049

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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 (ECCCNYS).

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): **ALAN FISHER**

Relationship to Owner: **SELF**

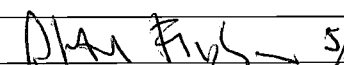
Business Name/Agency: **AF CONEY ISLAND AVENUE**

Street Address: **1775 BROADWAY**

City: **NEW YORK** State: **NY** Zip: **10019**

Telephone Number: **(212) 315-3390** Fax:

E-Mail Address:

Signature and Date  **5/24/2010**

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-File Name:

Pre-File Signature: Date:

Cost Estimate: \$

Amount Due: \$ Verified by ▼ Date ▼

Initial Amount Paid: \$

Balance Due: \$

Stamps, Certifications and Notes:

DOB Reference Number: T00000305416

User Ref ID: 5770-229

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