



Buildings

OP-98 Notice/Results—Self-Certification of Plumbing, Sprinkler, Standpipe Inspection(s) & Test(s)

A copy of this completed notice must be retained for re-submission with results.



1 Permit No. 320307994		Document No. 01		Permit Type (check one only): ☒ PL ☐ SP ☐ SD ☐ LAA	
Borough Brooklyn		Block 3335 Lot 1 House No 557		Street Name Knickerbocker Avenue	
2 Permit Applicant E-Mail: tony@1energygroup.com Business Phone (718) 633-3631 Fax No. (516) 795-6506					
Last Name MONGONE		First Name ANTHONY		M.I.	
Address 978 39TH STREET		City BROOKLYN		State NY ZIP 11219 License No. 1560	
3 Inspection Data Inspection/test scheduled for: 9/16/12 (mmddyy) Time: ☐ 8:00am ☐ 8:30 ☐ 9:00 ☐ 9:30 ☐ 10:00 ☐ 10:30 ☐ 11:00 ☒ 11:30 ☐ 12:30pm					
Apts and Floors: ROOF ☐ 100pm ☐ 1:30 ☐ 2:00 ☐ 2:30 ☐ 3:00 Meeting Location: FOB					

4 Notice/Result (Select one: PL, SP, SD only)																	
Systems: Inspections						Systems: Inspections						Systems: Inspections					
Plumbing (PL)						Sprinkler (SP)						Standpipe (SD)					
Underground		Roughing		Finish		Underground		Roughing		Finish		Underground		Roughing		Finish	
Notice	Results	Notice	Results	Notice	Results	Notice	Results	Notice	Results	Notice	Results	Notice	Results	Notice	Results	Notice	Results
	Pass Fail		Pass Fail		Pass Fail		Pass Fail		Pass Fail		Pass Fail		Pass Fail		Pass Fail		Pass Fail
Sprinkler - PL						Sprinkler - SP						Fire Standpipe - SD					
Water/Sanitary - PL																	
Storm - PL																	
Gas - PL																	
Medical Gas - PL																	
												Alarm Sys 64/09					
Tests						Tests						Tests					
Notice		Results				Notice		Results				Notice		Results			
	Pass Fail		Pass Fail				Pass Fail		Pass Fail				Pass Fail		Pass Fail		
Hydrostatic - PL						Hydrostatic - SP						Hydrostatic - SD					
Water - Sanitary						Dry Pipe Valve						Fire Pump					
Pressure - Water						Booster Pump											
Water Storm																	
Gas																	
Medical Gas																	
												Hydrostatic 63/09					

Additional Information/Comments: Cellar called in on error inspection performed on roof	
☐ Submitted with minor variations, described here:	
☐ Legalization ☐ Gas to Gas Appliance Direct Replacement ☐ Remove/Cap ☐ Detention ☐ Drywell/Retention	

5 Gas Meters/Risers Data (Check all applicable to this inspection. Include gas usages for each listed meter(s)/riser(s)) ☒ Gas requested for listed meters and risers	
No. of Meters: 1 Location(s) (Floor/Apt.): existing in basement No. of Risers: 1 Location(s) (Floor/Apt.): existing bas-roof ☐ Welded Gas Piping	
Gas usage: ☒ Heat ☐ Boiler Pilot for oil burner ☐ Water Heater ☐ Dryer	
☐ Cooking ☐ Tankless Coil ☐ HVAC ☐ Fire Place ☐ Other (describe):	
6 Certifying Applicant E-Mail: tony@1energygroup.com Business Phone (718) 633-3631 Fax No. (516) 795-6506	
Last Name MONGONE First Name ANTHONY M.I.	
Address 978 39TH STREET City BROOKLYN State NY ZIP 11219 License No. 1560 ☒ LMP ☐ LFSC ☐ P.E. ☐ R.A.	

7 Applicant Statements and Signatures ☐ All Comments resolved, review for sign-off ☐ All required back-up documents attached			
I certify the statements herein are correct and comply with the NYC Building code. I meet the requirements of the NYC Building code as they relate to the experience requirements set forth for gas tests. I realize falsification of any statements is a misdemeanor under §28-211.1 of the Administrative code punishable by a fine or imprisonment or both and may result in removal from participation in the self-certification program and/or disciplinary action by the Licensed Master Plumber or Licensed Fire Suppression Piping Contractor License Board.			
Print Name of Certifying Applicant ANTHONY MONGONE		Print Name of Permit Applicant or Alternative licensee from same firm (LMP/LFSC) ANTHONY MONGONE	
Signature Date 12/17/12		Signature Date 12/17/12	

FOR DOB USE ONLY			
Reviewed by:		Date: 12/19/12 Entered by: 12/19/12 R.S.O. by: S/O by:	