



PW1B: Schedule B
Plumbing, Sprinkler, Standpipe

Must be typewritten.

☒ Orient and affix BIS job number label here ☒

Page 1 of 2

1 Location Information *Required for all applications.*

House No(s) 7620 Street Name RIDGE BLVD

Borough BROOKLYN Block 5948 Lot 48 BIN 3149134 CB No. 310

Work on Floor(s) SC2,SC1,CEL,001,002,ATT

2 Work Type Information *Required for all applications. Select all that apply.*

Filing components/fixtures? ☐ Yes ☐ No

☐ Plumbing - PL

☐ Sprinkler - SP

☐ Standpipe - SD

Cost: \$

Cost: \$

Cost: \$

Total sprinkler heads in 8B:

Total sprinkler heads in 8A:

To remove violation(s): 1)

To remove violation(s): 1)

To remove violation(s): 1)

2)

2)

2)

3 Drainage Information

Storm Drainage Discharges into: *select one.*

Sanitary Drainage Discharges into: *select one.*

☐ Storm Sewer ☐ Combined Sewer ☐ Private Disposal

☐ Sanitary Sewer ☐ Combined Sewer ☐ Private Disposal

4 Sewer Work *Select all that apply.*

☐ HCP-1/HCP-2

☐ Site Connection

☐ Septic Tank

5 Cap / Remove / Replace / Relocate Components *If this section is completed, components are required.*

☐ Cap or Remove *Describe all:*

☐ Replace or Relocate *Describe all:*

6 Gas and Gas Equipment Data

Gas piping involved? ☒ Yes ☐ No

Describe gas fired equipment:

TWO GAS STOVES, GAS WATER HEATER, GAS DRYERS, GAS BBQ AND GAS BURNER @ OSP

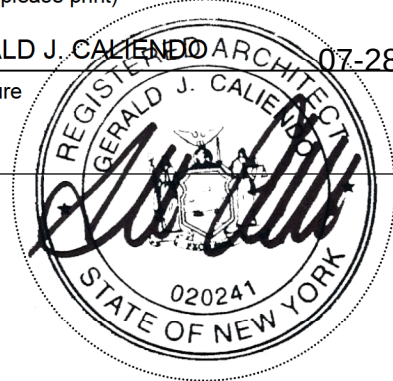
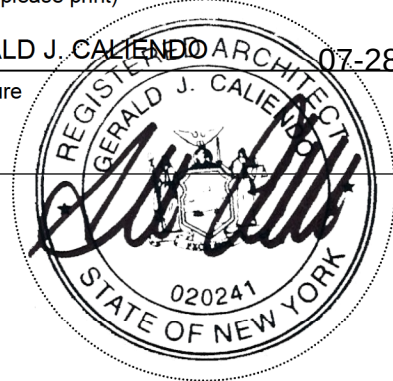
Total Location(s), floor/apt. - list all that apply:
Meters total: 1 OSP

Risers total: 1 SUB CELLAR,CELL 001,002 AND OSP

Gas Usage: ☐ Heat ☒ Dryer ☒ Water Heater ☐ Tankless Coil
☐ HVAC ☒ Cooking ☐ Fire Place ☐ Boiler Pilot for Oil Burner
☒ Other: BBQ@ OSP

7 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.

Name (please print)	
GERALD J. CALIENDO	
Signature	Date
	07-28-2025
	
P.E. / R.A. Seal (apply seal, then sign and date over seal)	

8 Equipment Information <i>For new work only.</i>																
System (work type)	Components (Piping / Equipment / Fixture)	Floors <i>indicate no. of proposed components and/or "X" for piping</i>														
		SC	CEL	OSP	001	002										
8A Sprinkler (SP) <i>Must not be off domestic.</i>	P* Sprinkler Piping - Dry															
	P* Sprinkler Piping - Wet															
	E* Dry Pipe Valve															
	E* Booster Pump - SP															
	F Floor/Riser Control Valve															
	F Siamese FDC															
	F Sprinkler Heads															
8B Sprinkler (PL)**	F Sprinkler Heads over 999															
	F Sprinkler Heads (thirty or less)															
8C Fire Standpipe (SD)	P* Standpipe Piping															
	E* Fire Pump															
	E* Special Service Fire Pump															
	F Floor/Riser Control Valve															
	F Hose Cabinet/Rack/Valve															
8D Water/San. (PL)	F Siamese FDC															
	P* Sanitary Piping (Soil & Venting)			1												
	P* Water Piping	0	1													
	P Water Service Piping	1														
	E Sewer Ejection Pump															
	E Submeters															
	F Bathtubs/Whirlpools/Hot Tub/Sauna					1										
	F Bidet															
	F Chiller/Cooler															
	F Dishwasher				2											
	F Domestic Water Tank/Pump															
	F Drinking Fountain															
	F Floor Drain															
	F Grease Trap/Oil Separator/GRD															
	F Ice Maker															
	F In-sink Garbage Disposal															
	F Lavatory (Common Wash Basin)	1	2		3	4										
	F Laundry - Standpipe															
	F Pool															
	F RPZ/Backflow Preventer (Primary)															
	F RPZ/Backflow Preventer (Secondary)															
	F Sink - Non Residential	1	1													
	F Sink - Residential				2											
	F Stall Shower		1			3										
	F Tankless Coil															
	F Toilet (Water Closet)	1	1		1	3										
	F Urinal															
	F Washing Machine	1	1													
	F Water Heater (Non-Gas)															
8E Storm (PL)	P* Storm Drainage Piping															
	E Sump Pump															
	F Area/Yard Drain		0	3												
	F Detention Tank															
	F Dry Well/Retention			2												
8F Gas (PL)	F Roof Drain					2										
	P* Gas Piping	1	1	1	1	0										
	E Emergency Shut-off Valve															
	E* Fire Suppression Shut-off Valve															
	E Gas Booster Pump															
	F Cooking Equipment (non-residential)															
	F Cooking Equipment (residential)				2											
	F Gas Boiler (<350K, non-comm,<6 family)	0	0													
	F Gas Burner	0	0	2												
	F Gas Dryer	1	1	0												
	F Gas Furnace															
	F Gas Meter	0	0	1												
	F Gas Water Heater	1	0													
8G Medical (PL)	P* Medical Gas Piping															
	E Assorted Medical Equipment															

** Must be off domestic.

* Indicates test **may** be required.