



PW1B: Schedule B
Plumbing, Sprinkler, Standpipe

Must be typewritten.

Page 1 of 2



1 Location Information Required for all applications.

House No(s) 45 Street Name HAZEL COURT
Borough BROOKLYN Block 8891 Lot 528 BIN 3249286 CB No. 315
Work on Floor(s) CEL, 001, 002, OSP

2 Work Type Information Required for all applications. Select all that apply. Filing components/fixtures? ☒ Yes ☐ No

☒ Plumbing - PL ☐ Sprinkler - SP ☐ Standpipe - SD
Cost: \$ 43000 Cost: \$ Cost: \$
Total sprinkler heads in 8B: 0 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.

☐ SD-1, SD-2, SD-3 ☐ 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:
PL-RELOCATE 1RES. GASCOOK EQUIP@1ST FL&1TUB @2ND FL REPLACE
1WASHMACH,1 GAS HWHEAT,1 FURNACE&1SINK @CEL,REPLACE
1WC,1LAV,1TUB&1SINK @1ST FL,REPLACE 1LAV &1WC@2ND

6 Gas and Gas Equipment Data

Gas piping involved? ☒ Yes ☐ No Describe gas fired equipment:
RELOCATE 1 RES. GAS COOK EQUIPMENT AT 1ST FLOOR

Total Location(s), floor/apt. - list all that apply:
Meters total: 1 OSP
Risers total: 1 CELLAR, 1ST FLOOR, OSP
Gas Usage: ☐ Heat ☐ Dryer ☒ Water Heater ☐ Tankless Coil
☒ HVAC ☒ Cooking ☐ Fire Place ☐ Boiler Pilot for Oil Burner
☐ Other:

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)
MICHAEL D. JUST
Signature Date
P.E. / R.A. Seal (apply seal, then sign and date over seal)

DOB Reference Number: T00000863417-000160
User Ref ID: 45 HAZEL

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>															
		1	2														
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)																
	P* Water Piping		1														
	P Water Service Piping																
	E Sewer Ejection Pump																
	F Bathtubs/Whirlpools/Hot Tub/Sauna																
	F Bidet																
	F Chiller/Cooler																
	F Dishwasher																
	F Domestic Water Tank/Pump																
	F Drinking Fountain																
	F Floor Drain																
	F Grease Trap/Oil Separator																
	F Ice Maker																
	F In-sink Garbage Disposal																
	F Lavatory (Common Wash Basin)																
	F Laundry - Standpipe																
	F Pool																
	F RPZ/Backflow Preventer (Primary)																
	F RPZ/Backflow Preventer (Secondary)																
	F Sink - Non Residential																
	F Sink - Residential																
	F Stall Shower		1														
	F Tankless Coil																
	F Toilet (Water Closet)																
	F Urinal																
	F Washing Machine																
	F Water Heater (Non-Gas)																
8E Storm (PL)	P* Storm Drainage Piping																
	E Sump Pump																
	F Area/Yard Drain																
	F Detention Tank																
	F Dry Well/Retention																
8F Gas (PL)	F Roof Drain																
	P* Gas Piping		1														
	E Emergency Shut-off Valve																
	E* Fire Suppression Shut-off Valve																
	E Gas Booster Pump																
	F Cooking Equipment (non-residential)																
	F Cooking Equipment (residential)																
	F Gas Boiler (<350K, non-comm,<6 family)																
	F Gas Bumer																
	F Gas Dryer																
	F Gas Furnace																
	F Gas Meter																
8G Medical (PL)	F Gas Water Heater																
	P* Medical Gas Piping																
	E Assorted Medical Equipment																

** Must be off domestic.

* Indicates test *may* be required.

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7/08