

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) 897 Street Name DEAN STREET
 Borough BROOKLYN Block 1133 Lot 71 BIN 3027743 CB No. 308
 Work on Floor(s) 001

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

☒ Plumbing - PL ☐ Sprinkler - SP ☐ Standpipe - SD
 Cost: \$ 10000 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

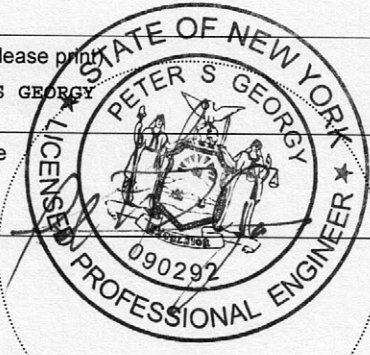
5 Cap / Remove / Replace / Relocate Components If this section is completed, components are required.

☐ Cap or Remove Describe all: ☐ Replace or Relocate Describe all:

6 Gas and Gas Equipment Data

Gas piping involved? ☒ Yes ☐ No Describe gas fired equipment:
 (1) HVAC

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

Name (please print) PETER S GEORGY	
Signature	Date
	
P.E. / R.A. Seal (apply seal, then sign and date over seal)	

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.

8 Equipment Information *For new work only.*

System (work type)	Components (Piping / Equipment / Fixture)	Floors indicate no. of proposed components and/or "X" for piping											
		1											
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												
	F Sprinkler Heads over 999												
8B Sprinkler (PL)**	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												
	F Siamese FDC												
8D Water/San. (PL)	P* Sanitary Piping (Soil & Venting)												
	P* Water Piping												
	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)	6											
	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												
	F Tankless Coil												
	F Toilet (Water Closet)	7											
	F Urinal	2											
	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												
	F Roof Drain												
8F Gas (PL)	P* Gas Piping												
	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 Burner												
	F Gas Dryer												
	F Gas Furnace												
	F Gas Meter												
	F Gas Water Heater												
8G Medical (PL)	P* Medical Gas Piping												
	E Assorted Medical Equipment												

** Must be off domestic.

* Indicates test *may* be required.

DOB Reference Number: T00000991307-000014

User Ref ID: 897 DEAN

7/08