



DEPT OF BLDGS 321071335

Job Number



ES087443125

Scan Code IS Job No. 321071335



Scan Code ESHS1364178

Borough Intake Form

1. **Location & Requestor Information** required for all requests. Provide location information, requestor's name, email, and relation to job. Please note denied requests will be sent disapproval reason (s) to email address provided on Borough Drop-off Intake Sheet.

House No: 504 Street Name: MYRTLE AVENUE Application#: 321071335 Date: Dec 16, 2019

Borough: BROOKLYN Block: 1905 Lot: 7503 BIN: 3424731 Requestor Name: Sal Russo

Relation to job (select one): ☐ Owner ☐ Applicant of Record ☐ Contractor ☒ Filing Representative

Email: srusso@eastcoastexpedit Owner's Email: ☒ Initial ☐ Resubmission Date:

2. **Type of Request** Borough Drop-off Intake Sheet is required for each request submitted, ensure all forms are fully completed, signed, sealed and dated. Select one of the following options:

☒ **PAA (Post Approval Amendments)**

Submit PW1 (PAA) to make changes to an already approved (P+ status in BIS) application. Changes made after initial approval are subject to PAA fees and plan examination unless initial job was professionally certified.

☐ **PW1 Withdrawal**

Submit PW1 to withdraw all or part of a job.

☐ **Initial Work Permit Application**

Submit PW2 Initial Work Permit Application if this is the first time applying for this permit. Select **No Work Permit**, if this application will not include any physical work to be performed under this permit.

☐ **PW6 Certificate of Occupancy Inspection Application (Initial)**

Submit PW6 in order to initiate inspections required prior to issuance of a Certificate of Occupancy.

☐ **PW7 Certificate of Occupancy /Temporary Certificate of Occupancy /Letter of Completion**

Submit PW7 to obtain a final Certificate of Occupancy (CO), Temporary Certificate of Occupancy (TCO), Letter of Completion (LOC) or renew a Temporary Certificate of Occupancy. **Note: Resubmissions require new BSCAN sticker**

Internal Use Only, reason (s) for denial will be indicated below by borough staff and emailed to addresses indicated above.

Disapproval Reasons request cannot be processed for the following reason (s)

- | | |
|---|---|
| ☐ Job is not approved. | ☐ Resolve open required items and resubmit for permit. |
| ☐ Job is in 'R - PERMIT-ENTIRE' status. | ☐ Not an initial work permit application must be processed through permit renewal. |
| ☐ Job is for different borough submit to corresponding borough. | ☐ No permits have been issued for this job number. |
| ☐ Fees due, pay outstanding fees and resubmit. | ☐ Job number incorrect/invalid. |
| ☐ Job is on hold for 'No Good Check', resolve and resubmit. | ☐ Floors invalid. |
| ☐ Withdrawal Job/Doc #/Work type is missing/not on file. | ☐ Electrical Control Number (s) missing (required for NB filings) |
| ☐ Property/Job on 'Hold', see Borough Commissioner's Office. | ☐ Notarization by Superintendent of Construction missing. |
| ☐ Owner's signature required for withdrawal. | ☐ Open ECB/DOB violation (s) |
| ☐ Architect/Engineer's signature and/or seal missing. | ☐ Incomplete PAA |
| ☐ Applicant's information is different from Dept. records. | ☐ Missing inspection sign-off (s): |
| ☐ Permitted application must see Plan Exam for determination if withdrawal inspection is required. | ☐ Construction ☐ Plumbing ☐ Electrical ☐ Elevator |
| ☐ Inspection required resubmit with 'Final-Pass' inspection report (OP113). | ☐ Other: _____ |
| ☐ Work type signed off, cannot withdraw. | ☐ Missing required items (s): _____ |
| ☐ PAA approved, cannot withdraw. | ☐ TR-1 error (s): _____ |
| ☐ All PAA fees must be paid prior to withdrawal. | ☐ Missing/Incomplete/Invalid: |
| | ☐ Form (s) _____ |
| | ☐ Section (s) _____ |
| | ☐ Other: _____ |

Print Form



PW1: Plan / Work Application

Must be typewritten

DEPT BLDGS	321071335	Job Number
SC131212034		Scan Code

1 Location Information Required for all applications.

House No(s) 504 Street Name Myrtle Avenue

Borough Brooklyn Block 01905 Lot 07503 BIN 3424731 C.B. No. 302

Work on Floor(s) ROF Apt. / Condo No(s)

2 Applicant Information Required for all applications. Fax, mobile telephone and e-mail address are optional information.

Last Name Carnavalla First Name Stephen Middle Initial J

Business Name SJC Engineering Business Telephone (212) 687-3050

Business Address 60 East 42nd Street, Suite 956 Business Fax (212) 687-3053

City New York State NY Zip 10165 Mobile Telephone

E-Mail scarnavalla@sjceng.com License Number 080090

Choose one: ☒ P.E. ☐ R.A. ☐ Sign Hanger ☐ R.L.A. ☐ Other:**3 Filing Representative** Complete only if different from applicant specified in section 2. Fax, mobile phone, and e-mail are optional info.

Last Name Diaz/Russo/Sosa First Name Orlando/Sal/Elena Middle Initial

Business Name East Coast Expediting & Code Consulting, Inc. Business Telephone (212) 500-5975

Business Address 132 Nassau Street, Suite 309 Business Fax

City New York State NY Zip 10038 Mobile Telephone (917) 519-0220

E-Mail orlando@eastcoastexpediting.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

Choose only one:

☐ Standard Plan Examination or Review☐ Professional Certification PC1, POC1☐ Professional Certification of Objections A11☐ Prior to Approval Actions 25-26☐ Amend Existing Filing 4A☐ Subsequent Filing 6-7, 8A (Alt-2 only), 11☒ Post Approval Amendment (PAA) 4A, 6, 24-25Will PAA affect filing fees? ☐ Yes ☒ No☐ New (Superseding) Applicant 4A, 25-26☐ Reinstatement 24-26☐ Withdrawal 26☐ Specified in 4A and 6☐ Entire Job

4A Indicate existing document number affected by filing 02

5 Job/Project Types Choose one and provide specified associated information.☐ Alteration Type 1 or Alteration Type 1 required

to meet New Building requirements (28-101.4.5)

6A-E, 8B-C, 8F, 9-10, 12, 13C-F, 14, 18-20, 22 &

PW1A, PD1

☐ Alteration Type 1, OT: "No Work" 8C, 8F, 9-10 &

12, 13C-F, 14, 18-19, 22, PW1A, PD1

☒ Alteration Type 2 5A, 6A-D, 8A-B, 9-10, 13C-E, & 14, 20, 22☐ Alteration Type 3 5A, 6B-F, 8C, 9-10, 13C-E, 20, 22☐ New Building 6A-E, 8F, 9A, 9C-K, 9M, 10, 12 &

13A-E, 14, 18-20, PW1A, PD1

☐ Sign 5A, 6B-D, 9A, 9D, 22-23☐ Full Demolition 6B, 8D, 9A & 9C-D, 9K, 9M, 13D-E, 14, 21A, 22☐ Subdivision 9A, 9D, 12A-B☐ Condominium ☐ Improved 17

5A Directive 14 acceptance requested?

☒ 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☐ FA - Fire Alarm☐ FB - Fuel Burning PW1C6B ☐ EQ - Construction Equipment 15☐ FS - Fuel Storage PW1C☐ FP - Fire Suppression☐ MH - Mechanical6C ☐ OT/GC - General Construction☒ PL - Plumbing PW1B☐ SD - Standpipe PW1B☐ SP - Sprinkler PW1B6D ☐ OT - Other, describe:6E ☐ CC - Curb Cut 16☐ OT/LAN - Landscape6F ☐ OT/ANT - Antenna☐ OT/BPP - Builders Pavement Plan 8D☐ OT/FPP - Fire Protection Plan☐ OT/MAR - Marquee 8E, 26B

7 Plans/Construction Documents Submitted *Plans are required for most applications.*Are plans being submitted with this PW1? ☐ Yes ☐ No *If yes, do the plans include:* ☐ FO — Foundation ☐ EN — Energy Analysis**8 Additional Information**

8A WT	Cost	WT	Cost	WT	Cost	8B Is a building enlargement proposed?	8C Estimated Job Cost \$
						☐ No enlargement is proposed	8D Street Frontage: linear ft.
						☐ Yes 12, PD1	8E Height: ft. Width: ft.
						☐ Horizontal ☐ Vertical	8F Total Building Square Footage: sq. ft.
						Additional Construction Floor Area: sq. ft.	

9 Additional Considerations, Limitations or Restrictions

9A Review is requested under which building code? ☐ 2014 ☐ 2008 ☐ 1968 ☐ Prior to 1968	Yes No	Yes No
9B ☐ Alteration required to meet New Building requirements (28-101.4.5) <i>If yes, 13A-B</i>	☐ Alteration is a major change to exits	☐ Change in number of dwelling units
9C ☐ Façade Alteration	☐ Adult Establishment <i>If yes, plot diagram (except DM)</i>	☐ Change in occupancy / use
☐ Compensated Development (Inclusionary Housing)	☐ Low Income Housing (Inclusionary Housing)	☐ Change is inconsistent with current certificate of occupancy
☐ Single Room Occupancy (SRO) Multiple Dwelling	☐ Filing includes Lot Merger / Reapportionment <i>If yes, 17</i>	☐ Change in number of stories
9D ☐ Landmark	☐ Little "E" or RD Site	☐ Infill Zoning
☐ Unmapped/CCO Street	☐ Requesting legalization of work where no work without a permit violations have been issued	☐ Loft Board
☐ Other (please specify on line provided below):	☐ Filing to address violations (list #s—max. 5):	☐ Quality Housing
☐ CRFN(s) Restrictive Declaration / Easement (max. 4):	☐ Filing to comply with Local Laws (list #s—max. 2):	☐ Site Safety Job/Project
☐ CRFN(s) Zoning Exhibit (I, II, III, etc. - max. 4):		☐ Included in LMCCC
9E ☐ BSA Calendar Numbers (max. 5):		☐ Prefab wood I-joists
9F ☐ CPC Calendar Numbers (max. 5):		☐ Structural cold-formed steel
9G ☐ Work includes lighting fixture and/or controls, installation or replacement. [ECC §404 and §505]		☐ Open-web steel joists
9H ☐ Work includes modular construction under New York State jurisdiction		
☐ Work includes modular construction under New York City jurisdiction		
9I ☐ Structural peer review required per BC 16. <i>If yes, provide NYS P.E. license number:</i>		
9J ☐ Work includes permanent removal of standpipe, sprinkler or fire suppression related systems		
9K ☐ Work includes partial demolition as defined in AC §28-101.5, or the raising/moving of a building <i>If yes, 21B</i>		
☐ Structural stability affected by proposed work		
9L ☐ Work involves or will result in an amount of soil disturbance greater than or equal to one acre in an MS4 area		
☐ Work is part of a larger common plan or development or sale that involves or will result in an amount of soil disturbance greater than or equal to one acre in an MS4 area		

10 NYCECC Compliance *New York City Energy Conservation Code*

☐ To the best of my knowledge, belief and professional judgment, all work under this application is in compliance with the NYCECC*
 Code Compliance Path (choose one): ☐ NYCECC ☐ ASHRAE
 Energy Analysis (choose one): ☐ Tabular Analysis ☐ REScheck ☐ COMcheck ☐ Energy Modeling (EN1)

☐ To the best of my knowledge, belief and professional judgment, all work under this application is exempt from the NYCECC* in accordance with one of the following (choose one):

☐ The work is an alteration of a State or National historic building.

☐ The scope of the work is entirely in a "low-energy building" and is limited to the building envelope.

☐ The entire scope of work involves a temporary structure and/or one or more of the following work types:
 FA, FP, SD, SP, FS, EQ, CC, OT/BPP, OT/FPP. Other work types are not exempt.

☐ This is a post-approval amendment and exempt under a prior edition of the energy code. See statement of exemption on attached drawings.

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	20A Flood Hazard Area Information
Yes No ☐ ☐ Tidal Wetlands ☐ ☐ Coastal Erosion Hazard Area ☐ ☐ Fire District	Yes No ☐ ☐ Freshwater Wetlands ☐ ☐ Urban Renewal ☐ ☐ Flood Hazard Area <i>if yes, 20A</i> ☐ ☐ Substantial improvement? ☐ ☐ Substantially damaged? ☐ ☐ Floodshields part of proposed work?

21 Demolition Details <i>Mechanical equipment other than handheld devices to be used for demolition or removal of debris (BC §3306.4).</i>
Yes No 21A ☐ ☐ Demo, filing is for a secondary structure? <i>if yes, specify structure being demolished:</i> ☐ ☐ Mechanical means* from out of building? <i>if yes, mechanical means will demolish: ☐ entire structure or ☐ part of structure</i> ☐ ☐ Mechanical means* from within building? <i>if yes, describe equipment proposed:</i> 21B ☐ ☐ Demolition work affects the exterior building envelope ☐ ☐ The scope of work involves raising/moving of a building

22 Asbestos Abatement Compliance <i>Choose one.</i>
☐ The scope of work requires related asbestos abatement as defined in the regulations of the NYC Department of Environmental Protection (DEP). ☐ The scope of the work is not an asbestos project as defined in the regulations of the NYC DEP. <i>DEP Control # is required.</i> DEP ACP-5 Control No. _____ ☐ 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)) or is an alteration to a building constructed pursuant to plans submitted for approval on or after April 1, 1987, in accordance with § 28-106.1.

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.	23A Illuminated type: ☐ Direct ☐ Flashing ☐ Indirect Yes No ☐ ☐ If sign projects beyond building line, is owner billed for annual permit? <i>if no, specify in 26B</i> 23B ☐ ☐ Is roof sign tight, closed or solid? 23C Sign wording. <i>if extensive, provide only key wording.</i> 23D Distance from Arterial Highway: _____ ft. 23E Distance from Park 1/2 acre or more: _____ ft. 23F OAC Sign Number: _____ 23G OAC Registration Number: _____
Location: ☐ Ground ☐ Roof 23B ☐ Wall Yes No ☐ ☐ Is sign inside building line? <i>if no, sign projects by: _____ ft. in.</i> ☐ ☐ Designed for changeable copy? <i>if no, 23C</i> ☐ ☐ Does an OAC have an interest in this sign or location? <i>if yes, 23G</i> ☐ ☐ Within 900' and within view of an arterial highway? <i>if yes, 23D</i> ☐ ☐ Within 200' and within view of a park 1/2 acre or more? <i>if yes, 23E</i> <i>if answer is "yes" to either of the above two questions and this is an advertising sign, OAC sign number is required in section 23F</i>			

24 Comments <i>Place additional comments on an AI-1 form. See Guide for proper incorporation of professional certification statements.</i>

File PAA TO Correct Gas use as per Inspectors comments

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.

For Initial New Building and Alteration 1 applications filed under the 2008 or 2014 NYC Building Code only: does this building qualify for high-rise designation? ☐ Yes ☐ No

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, lots, or occupancy. ☐ Yes ☐ No

Name (print): Stephen J. CamavellaSign and Date: 12/11/19

P.E. / R.A. Seal (copy seal and place over seal)

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. Furthermore, I understand that I am responsible for insuring that a final inspection be performed when the permitted work is complete, and that a satisfactory report of final inspection be submitted, along with all required submittal documents, so that the NYC Department of Buildings may issue a letter of completion or certificate of occupancy within the time prescribed by law.

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 all applicable laws, rules, and regulations.

Yes No

☐ ☒ **Fee Exemption Request (Non-Profit Owned and Operated)**
In accordance with Administrative Code §28-112.1, Exception 1, I certify that the deed holder is a corporation or association organized and operated exclusively for the purposes indicated in such section, and that the property is used exclusively by such entity for such purpose. ★

☐ ☒ **Fee Exemption Request (NYCHA/HHC, NYC Agency, or Other Government Owned and Operated)** The building or any part thereof to be constructed, renovated, altered or demolished is owned and operated exclusively for the purposes of the NYC Agency, NYC Authority, NYS Agency, Federal Government or any other government entity. ★

☐ ☒ **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 25 of the New York City Administrative Code. If yes, select one of the following:

☒ The owner is not required to notify the New York State Homes and Community Renewal (NYSHCR) of the owner's intention to file because the nature and scope of the work proposed, pursuant to NYSHCR regulations, does not require notification.

☐ The owner has notified the New York State Homes and Community Renewal (NYSHCR) 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 NYSHCR notified: _____

☒ ☐ **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, lots, or occupancy and the work is not inconsistent with the current certificate of 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 satisfactory final inspection report to the NYC Department of Buildings within the time following inspection prescribed by Department rule.

Notes for Section 26A: Section required if unit owner signed Section 26. Signature required for authorized representative of Condo or Co-Op board.

★ For fee waivers, please see the PW1 User Guide

Owner ☐ Individual ☐ Partnership ☐ NYCHA / HHCType: ☐ Corporation ☐ Other Government ☐ NYC Agency☐ Condo Unit Owner or Co-Op Tenant-shareholder 26AIs the deed holder a non-profit organization? ☐ Yes ☐ No

Name (please print): _____

Relationship to Owner: _____

Business Name/Agency: _____

Street Address: _____

City: _____

State: _____

Zip: _____

Telephone Number: _____

Fax: _____

E-Mail Address: _____

Signature and Date ► _____

26A Condo/Co-Op Board *See note in bottom left corner of page.*

Name (please print): _____

Title: _____

Street Address: _____

City: _____

State: _____

Zip: _____

Telephone Number: _____

Fax: _____

E-Mail Address: _____

Signature and Date ► _____

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: _____



PW1B: Schedule B
Plumbing, Sprinkler, Standpipe

Must be typewritten.

Page 1 of



1 Location Information Required for all applications.

House No(s) 504 Street Name Myrtle Ave

Borough BROOKLYN

Block 1905

Lot 7503

BIN 3424731

CB No. 302

Work on Floor(s) CEL to roof

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

☒ Plumbing - PL

Cost: \$ 1000

Total sprinkler heads in 8B:

To remove violation(s): 1)

2)

☐ Sprinkler - SP

Cost: \$

Total sprinkler heads in 8A:

To remove violation(s): 1)

2)

☐ Standpipe - SD

Cost: \$

To remove violation(s): 1)

2)

3 Drainage Information

Storm Drainage Discharges into: select one.

☐ Storm Sewer

☐ Combined Sewer

☐ Private Disposal

Sanitary Drainage Discharges into: select one.

☐ 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:

NONE

☐ Replace or Relocate

Describe all:

6 Gas and Gas Equipment Data

Gas piping involved? ☒ Yes ☐ No

Describe gas fired equipment:

Existing - HEAT -HW - HVAC- NEW BBQ

Total
Meters total: 1

Location(s), floor/apt - list all that apply:

Cellar

Risers total: 1

Cellar Thru Roof

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

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)	
Stephen J. Carnavalla	
Signature	Date
	12/1/19
P.E. / R.A. Seal (apply seal, then sign and date over seal)	

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											
		ref											
8A Sprinkler (SP) Must not be off domestic.	P* Sprinkler Piping - Dry												
	P* Sprinkler Piping - Wet												
	E* Dry Pipe Valve												
	E* Booster Pump - SP												
	F FloorRiser Control Valve												
	F Siamese FDC												
	F Sprinkler Heads												
8B Sprinkler (PL)**	F Sprinkler Heads over 999												
8C Fire Standpipe (SD)	F Sprinkler Heads (thirty or less)												
8D Water/San. (PL)	P* Standpipe Piping												
	E* Fire Pump												
	E* Special Service Fire Pump												
	F FloorRiser Control Valve												
	F Hose Cabinet/Rack/Valve												
	F Siamese FDC												
	P* Sanitary Piping (Soil & Venting)	1											
	P* Water Piping												
	P Water Service Piping												
	E Sewer Ejection Pump												
	E Submeters												
	F Bathtubs/Whirlpools/Hot Tub/Seams												
	F Bidet												
	F Chiller/Cooler												
	F Dishwasher												
	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)												
	F Laundry - Standpipe												
	F Pool												
	F RPZ/Backflow Preventer (Primary)												
	F RPZ/Backflow Preventer (Secondary)												
	F Sink - Non Residential	1											
	F Sink - Residential												
	F Stall Shower												
	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 (<250K, non-comm, <6 family)												
	F Gas Burner	2											
	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.