



PW1: Plan / Work Application
Must be typewritten.



1 Location Information Required for all applications.

House No(s) 1230	Street Name St Marks Ave			
Borough Brooklyn	Block 1361	Lot 34	BIN 3036094	C.B. No. 308
Work on Floor(s) 003 Roof			Apt. / Condo No(s)	

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

Last Name Pisoneri	First Name Robert		Middle Initial
Business Name RJP Pisoneri		Business Telephone (718) 357-2014	
Business Address 50-52 194 St		Business Fax	
City Fresh Meadows	State NY	Zip 11365	Mobile Telephone
E-Mail		License Number 008660	
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 Barongi Ermandi	First Name Adriane Lea		Middle Initial
Business Name IMA		Business Telephone (718) 268-8600	
Business Address 123 23 82 Ave		Business Fax	
City Kew Gardens	State NY	Zip 11415	Mobile Telephone
E-Mail		Registration Number 3111	

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, 24-25 Will 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: 01
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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) 14, 20, 22 6A-E, 8B-C, 9-10, 12, 13C-F, 14, 18-20, 22 & PW1A, PD1 ☐ Alteration Type 1, OT: "No Work" 8C, 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-G, 9A, 9C-K, 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, 13D-E, 14, 21A, 22 ☐ Subdivision 9A, 9D, 12A-B ☐ Condominium ☐ Improved 17 5A Directive 14 acceptance requested? ☐ Yes ☐ No
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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 PW1C 6B ☐ EQ - Construction Equipment 15	☐ FS - Fuel Storage PW1C ☐ FP - Fire Suppression ☒ MH - Mechanical ☒ OT/GC - General Construction	☒ PL - Plumbing PW1B ☐ SD - Standpipe PW1B ☐ SP - Sprinkler PW1B 6D ☐ OT - Other, describe:	6E ☐ CC - Curb Cut 16 ☐ OT/LAN - Landscape 6F ☐ OT/ANT - Antenna ☐ OT/BPP - Builders Pavement Plan 8D ☐ OT/FPP - Fire Protection Plan ☐ OT/MAR - Marquee 8E, 26B
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Are plans being submitted with this PW1? ☐ Yes ☐ No *If yes, do the plans include:* ☐ FO — Foundation ☐ EN — Energy Analysis

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

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>		☐ ☐ Change in number of dwelling units	
☐ ☐ Alteration is a major change to exits		☐ ☐ Change in occupancy / use	
9C ☐ ☐ Façade Alteration		☐ ☐ Change is inconsistent with current certificate of occupancy	
☐ ☐ Adult Establishment <i>If yes, plot diagram (except DM)</i>		☐ ☐ Change in number of stories	
☐ ☐ Compensated Development (Inclusionary Housing)		☐ ☐ Infill Zoning	
☐ ☐ Low Income Housing (Inclusionary Housing)		☐ ☐ Loft Board	
☐ ☐ Single Room Occupancy (SRO) Multiple Dwelling		Yes No Work Includes:	
☐ ☐ Filing includes Lot Merger / Reapportionment <i>If yes, 17</i>		☐ ☐ Prefab wood I-joists	
9D ☐ ☐ Landmark		☐ ☐ Quality Housing	
☐ ☐ Little "E" or RD Site		☐ ☐ Site Safety Job/Project	
☐ ☐ Unmapped/CCO Street		☐ ☐ Included in LMCCC	
☐ ☐ Requesting legalization of work where no work without a permit violations have been issued		☐ ☐ Filing to address violations (list #s—max. 5):	
☐ ☐ Other (please specify on line provided below):		☐ ☐ Filing to comply with Local Laws (list #s—max. 2)	
☐ ☐ CRFN(s) Restrictive Declaration / Easement (max. 4):			
☐ ☐ CRFN(s) Zoning Exhibit (I, II, III, etc. - max. 4):			
9E ☐ ☐ BSA Calendar Numbers (max. 5):			
9F ☐ ☐ CPC Calendar Numbers (max. 5):			
9G ☐ ☐ Work includes lighting fixture and/or controls, installation or replacement. [ECC §404 and §505]			
9H ☐ ☐ Work includes modular construction under New York State jurisdiction		9I High Rise Team tracking #:	
☐ ☐ Work includes modular construction under New York City jurisdiction			
9J ☐ ☐ Structural peer review required per BC 16. <i>If yes, provide NYS P.E. license number:</i>			
9K ☐ ☐ Work includes permanent removal of standpipe, sprinkler or fire suppression related systems			
9L ☐ ☐ 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			

☐ 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.

11 Job Description

See comments section 24.

11A Related DOB Job Numbers

11B Primary application job no.

12 Zoning Characteristics

12A District(s)				12B Street legal width: _____ ft.			
Overlay(s)				Street Status: ☐ Public ☐ Private			
Special Dist.(s)				If the zoning lot includes multiple tax lots, list all tax lots here ►			
Map Number							

12C Proposed: Use*	Zoning	Floor Area	District	FAR	Proposed Lot Details:	Proposed Yard Details:
		sq. ft.			Lot Type: ☐ Corner ☐ Interior ☐ Through	Check here if no yards: ☐ or
		sq. ft.			Lot Coverage _____ %	Front Yard _____ ft.
		sq. ft.			Lot Area _____ sq. ft.	Rear Yard _____ ft.
		sq. ft.			Lot Width _____ ft.	Rear Yard Equivalent _____ ft.
		sq. ft.			Proposed Other Details:	Side Yard 1 _____ ft.
		sq. ft.			Enclosed Parking? ☐ Yes ☐ No	Side Yard 2 _____ ft.
Proposed Totals		sq. ft.			If yes, no. of parking spaces: _____	
Existing Total		sq. ft.			Perimeter Wall Height _____ ft.	

*Use can be one of the following: residential, commercial, manufacturing, or community facility. List only one use per line.

13 Building Characteristics *Main use/dominant occupancy per AC §28-101.5. **Use 2014 Code equivalents only. †Residential w/other use.

13A Primary structural system, choose one:					
☐ Masonry		☐ Concrete (CIP)		☐ Concrete (Precast)	
☐ Wood		☐ Steel (Structural)		☐ Steel (Cold-Formed) ☐ Steel (Encased in Concrete)	

13B	Existing	Proposed	13D Building Type: ☐ 1, 2, or 3 Family ☐ Other
Structural Occupancy/Risk Cat.			Mixed use building?† ☐ Yes ☐ No
Seismic Design Cat.	2014 Code Designations?	2014 Code Designations?	
13C Occupancy Classification*	☐ Yes ☐ No	☒ Yes**	13E
Construction Classification	☐ Yes ☐ No	☐ Yes ☐ No	Building Height _____ ft.
Multiple Dwelling Classification			Building Stories _____
			Dwelling Units _____

13F Building was originally erected pursuant to which Building Code: ☐ 2014 ☐ 2008 ☐ 1968 ☐ Prior to 1968
The earliest Code with which this building or any part of it is required to comply: ☐ 2014 ☐ 2008 ☐ 1968 ☐ Prior to 1968

14 Fill Choose one.
☐ Not Applicable ☐ On-Site ☐ Off-Site ☐ Under 300 cubic yards
15 Construction Equipment
☐ Chute ☐ Sidewalk Shed Construction Material: _____
☐ Fence Size: _____ linear ft. BSA/MEA Approval No. _____
☐ Supported Scaffold ☐ Other: _____
16 Curb Cut Description
Size of cut (with splays): _____ ft.
Distance to nearest corner: _____ ft.
to street: _____
17 Tax Lot Characteristics

Original tax lots being merged or reapportioned (if applicable):

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Tentative tax lot numbers (new tax lots only):

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18 Fire Protection Equipment

	Existing	Proposed
	Yes	No
Fire Alarm	☐	☐
Fire Suppression	☐	☐
Sprinkler	☐	☐
Standpipe	☐	☐

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 ☐ ☐ Substantial improvement? ☐ ☐ Substantially damaged? ☐ ☐ Floodshields part of proposed work?
Yes No ☐ ☐ Freshwater Wetlands ☐ ☐ Urban Renewal ☐ ☐ Flood Hazard Area <i>If yes, 20A</i>	

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:</i> ☐ entire structure or ☐ part of structure ☐ ☐ 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 Location: ☐ Ground ☐ Roof 23B ☐ Wall Estimated Cost: \$ _____ Total Square Feet: _____ Height above Curb: _____ ft. in. Height above Roof: _____ ft. in. Yes No ☐ ☐ Is sign inside building line? <i>If no, sign projects by:</i> _____ ft. in. ☐ ☐ 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>	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: _____

24 Comments
<i>Place additional comments on an AI-1 form. See Guide for proper incorporation of professional certification statements.</i> Respectfully request to amend Schedule B and Plans

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, exits, or occupancy. ☐ Yes ☐ No

Name (print): Robert Rosone, P.E.

Sign and Date:

P.E. / R.A. Seal (apply seal through and state 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 26 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, exits, 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 / HHC
Type: ☐ Corporation ☐ Other Government ☐ NYC Agency
☐ Condo Unit Owner or Co-Op Tenant-shareholder 26A
Is 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 2



1 Location Information Required for all applications.

House No(s) 1232 Street Name St Marks Ave

Borough Brooklyn

Block 1361

Lot 35

BIN 3036095

CB No. 308

Work on Floor(s) cellar 1 2

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

☐ Plumbing - PL

Cost: \$ 18,000

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:

☒ Replace or Relocate

Describe all:

DIRECT REPLACEMENT OF:

STALL SHOWER, TOILET, LAV., W/M IN CELLAR -

SINK, TUB, TOILET, LAV ON 1ST FL -

SINK, TUB, TOILET, LAV ON 2ND FL -

SINK, TUB, TOILET, LAV ON 3RD FL -

6 Gas and Gas Equipment Data

Gas piping involved? ☒ Yes ☐ No

Describe gas fired equipment:

NEW DRYER, BOILER, HWH IN CELLAR. DIRECT REPLACEMENT OF (1) STOVE ON 1ST FL, (1) STOVE ON 2ND FL, (1) STOVE ON 3RD FL.

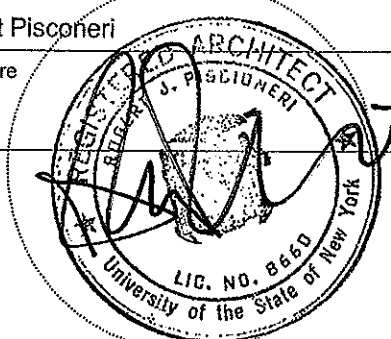
Total Meters total: 1 Location(s), floor/apt. - list all that apply: cellar existing

Risers total: 1 cellar thru 1st fl

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

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Name (please print)	
Robert Piscineri	
Signature	Date
	
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				
		CEL	001	002	003	
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					
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					
	P Water Service Piping					
	E Sewer Ejection Pump					
	E Submeters					
	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/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					
	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					
	E Emergency Shut-off Valve					
	E* Fire Suppression Shut-off Valve					
	E Gas Booster Pump					
	F Cooking Equipment (non-residential)					
	F Cooking Equipment (residential)		1	1	1	
	F Gas Boiler (<350K, non-comm, <6 family)	1				
	F Gas Burner					
	F Gas Dryer	1				
8G Medical (PL)	F Gas Furnace					
	F Gas Meter					
	F Gas Water Heater	1				
	P* Medical Gas Piping					
	E Assorted Medical Equipment					

** Must be off domestic.

* Indicates test may be required.



AI1: Additional Information

Must be typewritten.



Page number 1 of 1 BIS Document No. _____

1 Location and Job Information Required for all applications.

House No(s) 1230 Street Name St Marks Ave

Borough Brooklyn Block 1361 Lot 34 BIN 3036094 CB No. 308

2 Revisions to Plans/Drawings Required whenever updating plans. All revisions for each page must be clearly described in section 3.

Submission is part of a Post Approval Amendment (PAA)? ☐ Yes PW1 required ☒ No Indicate all actions for this submission:

Action	Original/New/ Omit Page ID	Superseding Page ID	Action	Original/New/ Omit Page ID	Superseding Page ID	Action	Original/New/ Omit Page ID	Superseding Page ID	Action	Original/New/ Omit Page ID	Superseding Page ID
T	100.00	100.01									
A	100.00	100.01									
A	101.00	101.01									
A	200.00	200.01									

For "Action" use "N" for new page, "S" for superseding page, "O" for omitting page.

Is this section continued on additional AI1 forms? ☐ Yes ☒ No

3 Additional Information Required for all applications.

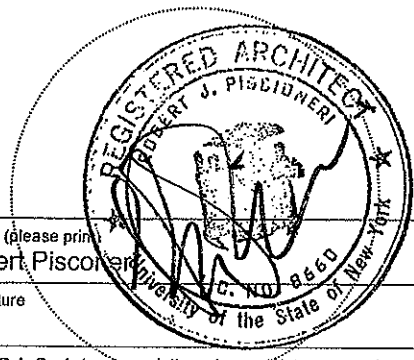
Attached are revised Plans

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.

Name (please print)
Robert Piscor

Signature

Date



P.E. / R.A. Seal (apply seal, then sign and date over seal)