



PW4: Application for Certificate of Compliance for Equipment

Form must be typewritten.

DEPT BLDGS Job No. 321192598
Scan Code ESHS7586578

1 FILING STATUS

Job Number 321192598

2 TYPE OF EQUIPMENT (required for all applications)

☐ Heating System (not including boilers) ☐ Ventilation System ☒ Air Conditioning System ☐ Refrigeration ☐ Other: _____ (required if selected)

3 LOCATION INFORMATION (required for all applications)

House No. 860 Street Name Pacific St Apt/Condo No.(s)
Borough Brooklyn Block 1130 Lot 27 BIN 3424141 CB No. 308
Work on Floor CEL, ROF, 001-004

4 APPLICANT INFORMATION (required for all applications)

Last Name LAWRENCE First Name JAKE Middle Initial
Business Name AKF GROUP Business Telephone (212) 626-0178
Business Address 165 BROADWAY Business Fax
City NY State NY Zip 10006 Mobile Telephone
Email Address JLAWRENCE@AKFGROUP.COM
☒ P.E. ☐ R.A. ☐ Other License Number 079475

5 EQUIPMENT SPECIFICATIONS (Section Instructions - complete all)

Item: Manufacturer/Trade Name	Floor	No. of Items	Certification Number for Listing	Capacity Value	Units
ch-1 / multistack / afs030xca3abma21-cdgd-a-ba-b-r410a	ROF	1	Serial # AI 10-100	30 TONS	
ch-1 / multistack / afs030xca3abma21-cdgd-a-ba-b-r410a	ROF	1	Serial # AI 10-101	30 TONS	

6 STATEMENT & SIGNATURES (required for all applications)

The owner certifies that he authorizes the applicant to perform the proposed work in accordance with plans and specifications approved under said application. 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 both.

Owner Name SEAN OGLE

Title REV. MONSIGNOR

Signature Sean A. Ogle Date 7/21/24

I hereby certify the work indicated above has been done in a manner required by the Rules & Regulations of the Department of Buildings except where reported adversely.

Inspector's Name RICHARD GREENWALD

Inspector's Signature [Signature] Date Signed Off 7/30/24

Name (please print) JAKE LAWRENCE 2024-07-31
Signature [Signature] Date
STATE OF NEW YORK
JACOB V. LAWRENCE
079475
LICENSED PROFESSIONAL ENGINEER
P.E./R.A. Seal (apply seal, then sign and date over seal)

INTERNAL USE ONLY

Examined and Recommended for Approval: ☐ Yes ☐ No Approved: ☐ Yes ☐ No
Examiner Signature Date Borough Commissioner Signature Date



PW4: Application for Certificate of Compliance for Equipment

Form must be typewritten.

DEPT BLDGS Job No. 321192598



Scan Code ESHS0405050

1 FILING STATUS

Job Number 321192598

2 TYPE OF EQUIPMENT (required for all applications)

☐ Heating System (not including boilers) ☐ Ventilation System ☒ Air Conditioning System ☐ Refrigeration ☐ Other: _____ (required if selected)

3 LOCATION INFORMATION (required for all applications)

House No. 860 Street Name Pacific St Apt/Condo No.(s)
Borough Brooklyn Block 1130 Lot 27 BIN 3424141 CB No. 308
Work on Floor CEL, ROF, 001-004

4 APPLICANT INFORMATION (required for all applications)

Last Name LAWRENCE First Name JAKE Middle Initial
Business Name AKF GROUP Business Telephone (212) 626-0178
Business Address 165 BROADWAY Business Fax
City NY State NY Zip 10006 Mobile Telephone
Email Address JLAURENCE@AKFGROUP.COM
☒ P.E. ☐ R.A. ☐ Other License Number 079475

5 EQUIPMENT SPECIFICATIONS (Section instructions - complete all)

Item: Manufacturer/Trade Name	Floor	No. of Items	Certification Number for Listing	Capacity Value	Units
ch-1 / multistack / afs030xca3abma21-cdgd-a-ba-b-r410a	ROF	1	Serial # AI 10-102	30 TONS	
ch-1 / multistack / afs030xca3abma21-cdgd-a-ba-b-r410a	ROF	1	Serial # AI 10-103	30 TONS	

6 STATEMENT & SIGNATURES (required for all applications)

The owner certifies that he authorizes the applicant to perform the proposed work in accordance with plans and specifications approved under said application. 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 both.

Owner Name SEAN OGLE

Title REV. MONSIGNOR

Signature Sean J. Ogle Date 7/31/24

I hereby certify the work indicated above has been done in a manner required by the Rules & Regulations of the Department of Buildings except where reported adversely.

Inspector's Name RICHARD GREENWALD

Inspector's Signature [Signature] Date Signed Off 7/30/24

Name (please print) JAKE LAWRENCE 2024-07-31
Signature _____ Date _____

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

INTERNAL USE ONLY

Examined and Recommended for Approval: ☐ Yes ☐ No Approved: ☐ Yes ☒ No
Examiner _____ Borough Commissioner _____
Signature _____ Date _____ Signature _____ Date _____



PW4: Application for Certificate of Compliance for Equipment

Form must be typewritten.

DEPT BLDGS Job No. 321192598
Scan Code ESHS2244403

1 FILING STATUS

Job Number 321192598

2 TYPE OF EQUIPMENT (required for all applications)

☐ Heating System (not including boilers) ☐ Ventilation System ☒ Air Conditioning System ☐ Refrigeration ☐ Other: _____ (required if selected)

3 LOCATION INFORMATION (required for all applications)

House No. 860 Street Name Pacific St Apt/Condo No.(s)
Borough Brooklyn Block 1130 Lot 27 BIN 3424141 CB No. 308
Work on Floor CEL, ROF, 001-004

4 APPLICANT INFORMATION (required for all applications)

Last Name LAWRENCE First Name JAKE Middle Initial
Business Name AKF GROUP Business Telephone (212) 626-0178
Business Address 165 BROADWAY Business Fax
City NY State NY Zip 10006 Mobile Telephone
Email Address JLAWRENCE@AKFGROUP.COM
☒ P.E. ☐ R.A. ☐ Other License Number 079475

5 EQUIPMENT SPECIFICATIONS (Section Instructions - complete all)

Item: Manufacturer/Trade Name	Floor	No. of Items	Certification Number for Listing	Capacity Value	Units
rtu-2/johnson controls/07zjn12k2a6bcd3a2, vr028a12h2aaa1	ROF	1	Serial # N1G9127046	2600 CFM	
rtu-1 / Johnson Controls / YPAL070NVE17B BFXM	ROF	1	Serial # 11551K97920743	793.2 MBH	
accu-r-1/ LG / LSU363HLV3	ROF	1	Serial # 201KASL00Z02	36.00 MBH	

6 STATEMENT & SIGNATURES (required for all applications)

The owner certifies that he authorizes the applicant to perform the proposed work in accordance with plans and specifications approved under said application. 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 both.

Owner Name SEAN OGLE

Title REV. MONSIGNOR

Signature *Sean J. Ogle* Date 7/31/24

I hereby certify the work indicated above has been done in a manner required by the Rules & Regulations of the Department of Buildings except where reported adversely.

Inspector's Name RICHARD GREENWALD

Inspector's Signature *Richard Greenwald* Date Signed Off 7/31/24

Name (please print) JAKE LAWRENCE 2024-07-31
Signature *Jake Lawrence* Date
Seal of the State of New York, Licensed Professional Engineer, License No. 079475

INTERNAL USE ONLY

Examined and Recommended for Approval: ☐ Yes ☐ No Approved ☐ Yes ☒ No
Examiner Signature _____ Date _____ Borough Commissioner Signature *[Signature]* Date _____



ch-1 (1)

THE CITY OF NEW YORK

DEPARTMENT OF BUILDINGS
160009

EQUIPMENT USE PERMIT

LOCATION 860 Pacific St BORO Brooklyn
 HOUSE NO. _____ STREET _____
 FLOOR OR ROOM NO. ROF
 APPLICATION TO WHICH ACCESSORY NO. 321192598 DATE 7/3/24
 N.B., ALT., B.M., MISC.

This PERMIT is for the use and operation of: **MAKE: Multistack**

- (4) ☒ AIR CONDITIONING SYSTEM MODEL# ep030xcz3abme21-cdgd-a-bq-b-410a
 (5) ☐ VENTILATING SYSTEM Serial # AI 10-100
 (6) ☐ REFRIGERATION SYSTEM
 (7) ☐ HEATING SYSTEM (NOT INCLUDING BOILER)

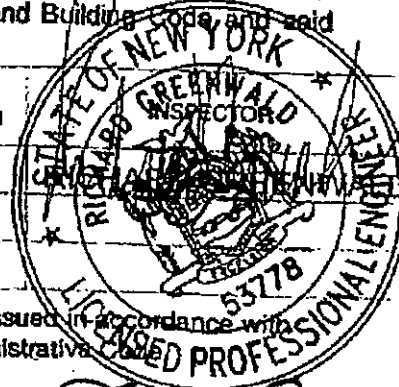
I have inspected the equipment described above only insofar as required by Directive No. 16 of 1971, as modified June 26, 1974, and find said equipment has been installed in accordance with the approved plans and Building Code, and said Directive.

DATE OF INSPECTION

CAPACITY: BTU OR CUBIC FT. PER MIN

7/3/24

30 TONS



This Equipment Use Permit is issued in accordance with Section C26-117.3 of the Administrative Code.

Borough Superintendent

James S. Oddo
 Commissioner

THIS CERTIFICATE MUST BE POSTED



ch-1 (2)

THE CITY OF NEW YORK

DEPARTMENT OF BUILDINGS

160009

EQUIPMENT USE PERMIT

LOCATION 860 Pacific St BORO Brooklyn
 HOUSE NO. ROF STREET
 FLOOR OR ROOM NO. ROF
 APPLICATION TO WHICH ACCESSORY NO. 321192598 DATE 7/3/24
 N.B., ALT., B.N., MISC.

This PERMIT is for the use and operation of: **MAKE: Multistack**

- (4) ☒ AIR CONDITIONING SYSTEM MODEL# ast000ma3abma21-cdpd-e-ba-b-n410a
 (5) ☐ VENTILATING SYSTEM Serial # AI 10-101
 (6) ☐ REFRIGERATION SYSTEM
 (7) ☐ HEATING SYSTEM (NOT INCLUDING BOILER)

I have inspected the equipment described above only insofar as required by Directive No. 16 of 1971, as modified June 28, 1974, and find said equipment has been installed in accordance with the approved plans and Building Code and said Directive.

DATE OF INSPECTION <u>7/3/24</u>	CAPACITY: BTU OR CUBIC FT. PER MIN <u>30 TONS</u>
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This Equipment Use Permit is issued in accordance with Section C26-117.3 of the Administrative Code.

Borough Superintendent

Commissioner

THIS CERTIFICATE MUST BE POSTED

ch-1 (3)

THE CITY OF NEW

DEPARTMENT OF BUILDINGS

160009

EQUIPMENT USE PERMIT

LOCATION 860 Pacific St BORO Brooklyn
 HOUSE NO. _____ STREET _____
 FLOOR OR ROOM NO. ROF
 APPLICATION TO WHICH ACCESSORY NO. 321192598 DATE 7/3/24
 N.B., ALT., B.N., MISC.

This PERMIT is for the use and operation of: **MAKE: Multistack**

- (4) ☒ AIR CONDITIONING SYSTEM MODEL#: as030xcca3abms21-cdgd-a-ba-b-r410a
 (5) ☐ VENTILATING SYSTEM Serial # AI 10-102
 (6) ☐ REFRIGERATION SYSTEM
 (7) ☐ HEATING SYSTEM (NOT INCLUDING BOILER)

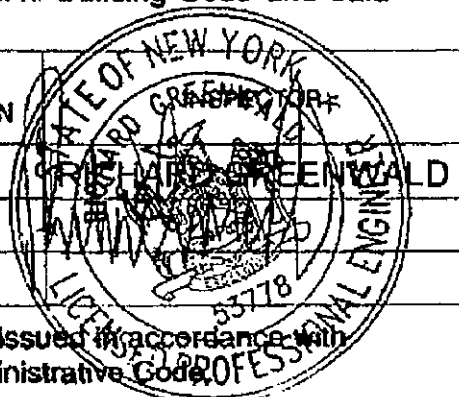
I have inspected the equipment described above only insofar as required by Directive No. 16 of 1971, as modified June 26, 1974, and find said equipment has been installed in accordance with the approved plans and Building Code and said Directive.

DATE OF INSPECTION	CAPACITY: BTU OR CUBIC FT. PER MIN
<u>7/3/24</u>	<u>30 TONS</u>

This Equipment Use Permit is issued in accordance with Section C26-117.3 of the Administrative Code.



Borough Superintendent



James S. Oddo
 James S. Oddo
 Commissioner

Commissioner

THIS CERTIFICATE MUST BE POSTED



Scan Code ESHS4857444

ch-1 (4)

THE CITY OF NEW YORK

DEPARTMENT OF BUILDINGS

160009

EQUIPMENT USE PERMIT

LOCATION 860 Pacific St BORO Brooklyn
 HOUSE NO. _____ STREET _____
 FLOOR OR ROOM NO. ROF
 APPLICATION TO WHICH ACCESSORY NO. 321192598 DATE 7/3/24
 N.B., ALT., B.N., MISC.

This PERMIT is for the use and operation of: **MAKE: Multistack**

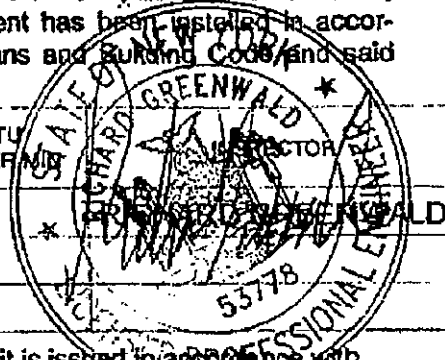
- (4) ☒ AIR CONDITIONING SYSTEM MODEL# asf930ce3abme21-cdgd-e-be-b-r410a
 (5) ☐ VENTILATING SYSTEM Serial # AI 10-103
 (6) ☐ REFRIGERATION SYSTEM
 (7) ☐ HEATING SYSTEM (NOT INCLUDING BOILER)

I have inspected the equipment described above only insofar as required by Directive No. 16 of 1971, as modified June 26, 1974, and find said equipment has been installed in accordance with the approved plans and Building Code and said Directive.

DATE OF
INSPECTION
7/3/24

CAPACITY: BTU
OR CUBIC FT. PER MIN

30 TONS



This Equipment Use Permit is issued in accordance with
 Section C26-117.3 of the Administrative Code

Borough Superintendent

Commissioner

THIS CERTIFICATE MUST BE POSTED



Scan Code ESHS9975146

rtu-2

THE CITY OF NEW YORK

DEPARTMENT OF BUILDINGS

160009

EQUIPMENT USE PERMIT

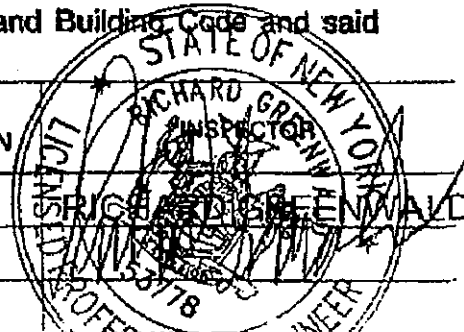
LOCATION 860 Pacific St BORO Brooklyn
 HOUSE NO. ROF STREET
 FLOOR OR ROOM NO.
 APPLICATION TO WHICH ACCESSORY NO. 321192598 DATE 7/3/24
 N.B., ALT., B.N., MISC.

This PERMIT is for the use and operation of: MAKE: Johnson Controls

- (4) ☒ AIR CONDITIONING SYSTEM MODEL#: j07zjn12k2a6bcd3a2, v028a12h2aaa1
 (5) ☐ VENTILATING SYSTEM Serial # N1G9127046
 (6) ☐ REFRIGERATION SYSTEM
 (7) ☐ HEATING SYSTEM (NOT INCLUDING BOILER)

I have inspected the equipment described above only insofar as required by Directive No. 16 of 1971, as modified June 26, 1974, and find said equipment has been installed in accordance with the approved plans and Building Code and said Directive.

DATE OF INSPECTION	CAPACITY: BTU OR CUBIC FT. PER MIN
7/3/24	2600 CFM



This Equipment Use Permit is issued in accordance with Section C26-117.3 of the Administrative Code.

Borough Superintendent

James S. Oddo
Commissioner

Commissioner

THIS CERTIFICATE MUST BE POSTED

rtu-1

THE CITY OF NEW YORK

DEPARTMENT OF BUILDINGS

160009

EQUIPMENT USE PERMIT

LOCATION 860 Pacific St BORO Brooklyn
 HOUSE NO. _____ STREET _____
 FLOOR OR ROOM NO. ROF
 APPLICATION TO WHICH ACCESSORY NO. 321192598 DATE 7/3/24
 N.B., ALT., B.N., MISC.

This PERMIT is for the use and operation of: MAKE: Johnson Controls

- (4) ☒ AIR CONDITIONING SYSTEM MODEL#: YPAL070NVE17BBFXM
 (5) ☐ VENTILATING SYSTEM Serial # 11551K97920743
 (6) ☐ REFRIGERATION SYSTEM
 (7) ☐ HEATING SYSTEM (NOT INCLUDING BOILER)

I have inspected the equipment described above only insofar as required by Directive No. 16 of 1971, as modified June 26, 1974, and find said equipment has been installed in accordance with the approved plans and Building Code and said Directive.

DATE OF INSPECTION	CAPACITY: BTU OR CUBIC FT. PER MIN	INSPECTOR
7/3/24	793.2 MBH	RICHARD GREENWALD

This Equipment Use Permit is issued in accordance with Section C26-117.3 of the Administrative Code.



Borough Superintendent



Commissioner

THIS CERTIFICATE MUST BE POSTED

accu-r-1

THE CITY OF NEW YORK

DEPARTMENT OF BUILDINGS

160009

EQUIPMENT USE PERMIT

LOCATION 860 Pacific St BORO Brooklyn
 HOUSE NO. ROF STREET
 FLOOR OR ROOM NO. ROF
 APPLICATION TO WHICH ACCESSORY NO. 321192598 DATE 7/3/24
 N.B., ALT., B.N., MISC.

This PERMIT is for the use and operation of: MAKE: LG

- (4) ☒ AIR CONDITIONING SYSTEM MODEL#: LSU363HLV3
 (5) ☐ VENTILATING SYSTEM Serial # 201KASL00Z02
 (6) ☐ REFRIGERATION SYSTEM
 (7) ☐ HEATING SYSTEM (NOT INCLUDING BOILER)

I have inspected the equipment described above only insofar as required by Directive No. 16 of 1971, as modified June 26, 1974, and find said equipment has been installed in accordance with the approved plans and Building Code and said Directive.

DATE OF INSPECTION	CAPACITY: BTU OR CUBIC FT. PER MIN	INSPECTOR
7/3/24	36.00 MBH	RICHARD GREENWALD

This Equipment Use Permit is issued in accordance with Section C26-117.3 of the Administrative Code.



Borough Superintendent



Commissioner

THIS CERTIFICATE MUST BE POSTED