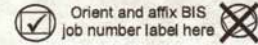




PW1B: Schedule B
Plumbing, Sprinkler, Standpipe

321295745



Must be typewritten.

Page 1 of

1 Location Information Required for all applications.

House No(s) 1623 Street Name 40 STREET

Borough Brooklyn Block 5383 Lot 19 BIN 3126551 CB No.

Work on Floor(s) CEL, 1,2,3

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

☐ Plumbing - PL Cost: \$
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:

6 Gas and Gas Equipment Data

Gas piping involved? ☒ Yes ☐ No Describe gas fired equipment:

HOT WATER HEATER, COOKING RANGE, CLOTH DRYER

Meters total: 3 Location(s), floor/apt. - list all that apply: OSP

Risers total: 3 OSP TO 1, 2,3,ROF

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)	
PETER GEE	
Signature	Date
	9.24.2025
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	OSP	ROF	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												
	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												
	P Water Service Piping	1											
	E Sewer Ejection Pump												
	E Submeters												
	F Bathtubs/Whirlpools/Hot Tub/Sauna				2	2	2						
	F Bidet												
	F Chiller/Cooler												
	F Dishwasher												
	F Domestic Water Tank/Pump												
	F Drinking Fountain	0											
	F Floor Drain	0			1	1	1						
	F Grease Trap/Oil Separator/GRD												
	F Ice Maker												
	F In-sink Garbage Disposal												
	F Lavatory (Common Wash Basin)	0			3	3	3						
	F Laundry - Standpipe												
	F Pool												
	F RPZ/Backflow Preventer (Primary)	1											
	F RPZ/Backflow Preventer (Secondary)												
	F Sink - Non Residential	0											
	F Sink - Residential				4	4	4						
	F Stall Shower				1	1	1						
	F Tankless Coil												
	F Toilet (Water Closet)	0			3	3	3						
	F Urinal												
	F Washing Machine				1	1	1						
	F Water Heater (Non-Gas)												
8E Storm (PL)	P* Storm Drainage Piping												
	E Sump Pump												
	F Area/Yard Drain	5											
	F Detention Tank												
	F Dry Well/Retention												
8F Gas (PL)	F Roof Drain			3									
	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)				2	2	2						
	F Gas Boiler (<350K, non-comm,<6 family)												
	F Gas Burner												
	F Gas Dryer				1	1	1						
	F Gas Furnace												
8G Medical (PL)	F Gas Meter	3											
	F Gas Water Heater			3									
	P* Medical Gas Piping												
	E Assorted Medical Equipment												

** Must be off domestic.

CEL OSP ROF 001 002 003

* Indicates test **may** be required.