



DEPT OF BLDGS 321325650 Job Number

ES708415949

Scan Code 21325650

PW1: Plan / Work Application

Must be typewritten.

**1 Location Information** Required for all applications.

House No(s) 1772 Street Name BERGEN STREET

Borough BROOKLYN Block 01357 Lot 00032 BIN 3035961 C.B. No. 308

Work on Floor(s) 001 to 004, CEL, PEN, ROF Apt. / Condo No(s)

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

Last Name SOSKIN First Name ALEXANDER Middle Initial

Business Name A&D ENGINEERING, PLLC Business Telephone (718) 871-6122

Business Address 2613 EAST 65TH STREET Business Fax

City 11234 State NY Zip 11234 Mobile Telephone

E-Mail AD@ADNYENG.COM License Number 083057

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 FURT/KA/BRAC/SHI/PEN First Name SHM/REU/MA/SHIR Middle Initial

Business Name KABUDA DE SAENZ Business Telephone (917) 915-7204

Business Address 154 LEFFERTS PLACE Business Fax

City BROOKLYN State NY Zip 11238 Mobile Telephone

E-Mail SCHEDULE5012@GMAIL.COM Registration Number 005074

4 Filing Status Required for all applications. Choose one and provide specified associated information.☐ Initial Filing 5, 7, 11, 12A, 25-26☒ Prior to Approval Actions 25-26☐ Reinstatement 24-26

Choose only one:

☐ Standard Plan Examination or Review☐ Amend Existing Filing 4A☐ Withdrawal 26☐ Professional Certification PC1, POC1☒ Subsequent Filing 6-7, 8A (Alt-2 only), 11☐ Specified in 4A and 6☐ Professional Certification of Objections A17☒ Post Approval Amendment (PAA) 4A, 6, 24-25☐ Entire JobWill PAA affect filing fees? ☐ Yes ☐ No

4A Indicate existing document number affected by filing: 62

☐ New (Superseding) Applicant 4A, 25-26**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)☐ Alteration Type 2 5A, 6A-D, 8A-B, 9-10, 13C-E, & 14, 20, 22☐ Full Demolition 6B, 8D, 9A & 9C-D, 9K, 13D-E, 14, 21A, 22

6A-E, 8B-C, 9-10, 12, 13C-F, 14, 18-20, 22 & PW1A, PD1

☐ Alteration Type 3 5A, 6B-F, 8C, 9-10, 13C-E, 20, 22☐ Subdivision 9A, 9D, 12A-B☐ Alteration Type 1, OT: "No Work" 8C, 9-10 & 12, 13C-F, 14, 18-19, 22, PW1A, PD1☐ New Building 6A-E, 8F-G, 9A, 9C-K, 10, 12 & 13A-E, 14, 18-20, PW1A, PD1☐ Condominium ☐ Improved 17☐ Sign 5A, 6B-D, 9A, 9D, 22-235A 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☐ FS - Fuel Storage PW1C☒ PL - Plumbing PW1B6E ☐ CC - Curb Cut 16☐ FA - Fire Alarm☐ FP - Fire Suppression☐ SD - Standpipe PW1B☐ OT/LAN - Landscape☐ FB - Fuel Burning PW1C☒ MH - Mechanical☒ SP - Sprinkler PW1B6F ☐ OT/ANT - Antenna6B ☐ EQ - Construction Equipment 156C ☐ OT/GC - General Construction6D ☐ OT - Other, describe:☐ OT/BPP - Builders Pavement Plan 8D☐ OT/FPP - Fire Protection Plan☐ OT/MAR - Marquee 8E, 26B

DOB Reference Number: T00001886041-000013

User Ref ID: 1772 MEP 12/14

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 \$
PI	15000					☐ No enlargement is proposed	8D Street Frontage: linear ft.
SP	15000					☐ Yes 12, PD1	8E Height: ft. Width: ft.
						☐ Horizontal ☐ Vertical	8F Total Construction Floor Area: 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) *If yes, 13A-B*

☐ ☐ Change in number of dwelling units

☐ ☐ Change in occupancy / use

☐ ☐ Alteration is a major change to exits

☐ ☐ Change is inconsistent with current certificate of occupancy

9C ☐ ☐ Façade Alteration

☐ ☐ Change in number of stories

☐ ☐ Adult Establishment *If yes, plot diagram (except DM)*

☐ ☒ Infill Zoning

☐ ☐ Compensated Development (Inclusionary Housing)

☐ ☒ Loft Board

Yes No Work Includes:

☐ ☐ Low Income Housing (Inclusionary Housing)

☐ ☒ Quality Housing

☐ ☐ Prefab wood I-joists

☐ ☒ Single Room Occupancy (SRO) Multiple Dwelling

☐ ☒ Site Safety Job/Project

☐ ☐ Structural cold-formed steel

☐ ☐ Filing includes Lot Merger / Reapportionment *If yes, 17*

☐ ☐ Included in LMCCC

☐ ☐ Open-web steel joists

9D ☐ ☒ Landmark

☐ ☐ Filing to address violations (list #s—max. 5):

☐ ☐ Little "E" or RD Site

☐ ☐ Unmapped/CCO Street

☐ ☐ Requesting legalization of work where no work without a permit violations have been issued

☐ ☐ 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. *If yes, provide NYS P.E. license number:*

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 *If yes, 21B*

☐ ☐ Structural stability affected by proposed work

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.

DOB Reference Number: T00001886041-000013

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17	Tax Lot Characteristics	18	Fire Protection Equipment															
Original tax lots being merged or reapportioned (if applicable):																		
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 12.5%; height: 20px;"></td> <td style="width: 12.5%;"></td> <td style="width: 12.5%;"></td> <td style="width: 12.5%;"></td> <td style="width: 12.5%;"></td> <td style="width: 12.5%;"></td> <td style="width: 12.5%;"></td> <td style="width: 12.5%;"></td> </tr> </table>																		
Tentative tax lot numbers (new tax lots only):																		
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		<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 75%;"></td> <td style="width: 12.5%; text-align: center;">Existing Yes No</td> <td style="width: 12.5%; text-align: center;">Proposed Yes No</td> </tr> <tr> <td style="padding: 5px;">Fire Alarm</td> <td style="text-align: center;"> ☐ ☐ </td> <td style="text-align: center;"> ☐ ☐ </td> </tr> <tr> <td style="padding: 5px;">Fire Suppression</td> <td style="text-align: center;"> ☐ ☐ </td> <td style="text-align: center;"> ☐ ☐ </td> </tr> <tr> <td style="padding: 5px;">Sprinkler</td> <td style="text-align: center;"> ☐ ☐ </td> <td style="text-align: center;"> ☐ ☐ </td> </tr> <tr> <td style="padding: 5px;">Standpipe</td> <td style="text-align: center;"> ☐ ☐ </td> <td style="text-align: center;"> ☐ ☐ </td> </tr> </table>			Existing Yes No	Proposed Yes No	Fire Alarm	☐ ☐	☐ ☐	Fire Suppression	☐ ☐	☐ ☐	Sprinkler	☐ ☐	☐ ☐	Standpipe	☐ ☐	☐ ☐
	Existing Yes No	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	Yes No	Yes No	
☐ ☐ Tidal Wetlands	☐ ☐ Freshwater Wetlands	☐ ☐ Substantial improvement?	
☐ ☐ Coastal Erosion Hazard Area	☐ ☐ Urban Renewal	☐ ☐ Substantially damaged?	
☐ ☐ Fire District	☐ ☐ Flood Hazard Area <i>If yes, 20A</i>	☐ ☐ 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:</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:	Type:	Estimated Cost: \$	23A Illuminated type: ☐ Direct ☐ Flashing ☐ Indirect
☐ Advertising	☐ Illuminated 23A	Total Square Feet: _____	Yes No
☐ Non-Advertising	☐ Non-Illuminated	Height above Curb: _____ ft. in.	☐ ☐ If sign projects beyond building line, is owner billed for annual permit? <i>If no, specify in 26B</i>
Location: ☐ Ground ☐ Roof 23B ☐ Wall	Height above Roof: _____ ft. in.		23B ☐ ☐ Is roof sign tight, closed or solid?
Yes No			23C Sign wording. <i>If extensive, provide only key wording.</i>
☐ ☐ Is sign inside building line? <i>If no, sign projects by:</i> _____ ft. in.			23D Distance from Arterial Highway: _____ ft.
☐ ☐ Designed for changeable copy? <i>If no, 23C</i>			23E Distance from Park 1/2 acre or more: _____ ft.
☐ ☐ Does an OAC have an interest in this sign or location? <i>If yes, 23G</i>			23F OAC Sign Number: _____
☐ ☐ Within 900' and within view of an arterial highway? <i>If yes, 23D</i>			23G OAC Registration Number: _____
☐ ☐ 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>

PAA FILED 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 affidavits 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 construction related to this job is 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 (please print): **ALEXANDER MOSKIN**
 Sign and Date: **083057** **12.25.18**
 P.E. / R.A. Seal (app. seal) **PROFESSIONAL ENGINEER**

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): **YOSEF BEER**

Relationship to Owner:

Business Name/Agency: **RALPH BERGEN LLC**

Street Address: **199 LEE AVENUE, 751**

City: **BROOKLYN** State: **NY** Zip: **11211**

Telephone Number: **(347) 382-2658** Fax:

E-Mail Address: **JB@HOMERYCAPITAL.COM**

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:

DOB Reference Number: **T00001886041**

User Ref ID: **1772 MBP 12/14**



PW1B: Schedule B
Plumbing, Sprinkler, Standpipe

Must be typewritten.

Page 1 of 2

DEPT BLDGS Job No. 321325650



Scan Code ESHS8910659

1 Location Information Required for all applications.

House No(s) 1772 Street Name BERGEN STREET

Borough BROOKLYN Block 1357 Lot 32 BIN 3035961 CB No. 308

Work on Floor(s) 001 to 004, CEL, PEN, ROF

2 Work Type Information Required for all applications. Select all that apply.

Filing components/fixtures? ☒ Yes ☐ No

☒ Plumbing - PL

☒ Sprinkler - SP

☐ Standpipe - SD

Cost: \$ 15000

Cost: \$ 15000

Cost: \$

Total sprinkler heads in 8B: 0

Total sprinkler heads in 8A: 63

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.

☐ 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:

PL-NEW KITCHEN AND BATHROOMS

SP-NEW SPRINKLER SYSTEM

6 Gas and Gas Equipment Data

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

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

Meters total: _____

Risers total: _____

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)	
ALEXANDER SOSKIN	
01.25.18	
Signature	Date
P.E. / R.A. Seal (apply seal, then sign and date over seal)	

12/14

DOB Reference Number: T00001886041-000013

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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	PEN	ROF	1	2	3	4								
8A Sprinkler (SP) <i>Must not be off domestic.</i>	P* Sprinkler Piping - Dry																
	P* Sprinkler Piping - Wet	1		1	1	1	1	1	1								
	E* Dry Pipe Valve																
	E* Booster Pump - SP																
	F Floor/Riser Control Valve	1															
	F Siamese FDC		1														
	F Sprinkler Heads	10		3	0	14	12	12	12								
	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	1															
	F Hose Cabinet/Rack/Valve																
	F Siamese FDC																
8D Water/San. (PL)	P* Sanitary Piping (Soil & Venting)	1		1	0	1	1	1	1								
	P* Water Piping	1		1	0	1	1	1	1								
	P Water Service Piping	1															
	E Sewer Ejection Pump																
	E Submeters																
	F Bathtubs/Whirlpools/Hot Tub/Sauna					2	2	2	2								
	F Bidet																
	F Chiller/Cooler																
	F Dishwasher																
	F Domestic Water Tank/Pump																
	F Drinking Fountain																
	F Floor Drain	3					2	2	2								
	F Grease Trap/Oil Separator/GRD																
	F Ice Maker																
	F In-sink Garbage Disposal																
	F Lavatory (Common Wash Basin)	2				2	2	2	2								
	F Laundry - Standpipe																
	F Pool																
	F RPZ/Backflow Preventer (Primary)	2															
	F RPZ/Backflow Preventer (Secondary)																
	F Sink - Non Residential																
	F Sink - Residential					2	2	2	2								
	F Stall Shower						6	0	0								
	F Tankless Coil																
	F Toilet (Water Closet)	2				2	2	2	2								
	F Urinal																
	F Washing Machine						0	0	0								
	F Water Heater (Non-Gas)	8															
8E Storm (PL)	P* Storm Drainage Piping	1		1	1	1	1	1	1								
	E Sump Pump																
	F Area/Yard Drain		2														
	F Detention Tank																
	F Dry Well/Retention																
8F Gas (PL)	F Roof Drain				4												
	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																
	P* Medical Gas Piping																
	E Assorted Medical Equipment																
8G Medical (PL)																	

** Must be off domestic.

* Indicates test may be required.

12/14

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