



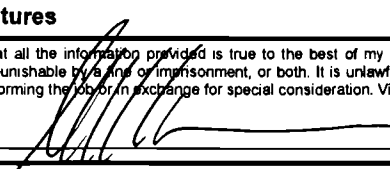
PW7: Certificate of Occupancy /
Letter of Completion Folder
Review Request

Must be typewritten

DEPT BLDGS Job No. 321439065



Scan Code ESHS9173878

1	Location Information	
House No(s) 667 Street Name Putnam Avenue Work Proposed on Floor No(s) Cel,Bas, 001Thur 003		
Borough Brooklyn Block 1645 Lot 67 BIN 3045180 CB No. 303		
2	Requestor Information	
Individuals Relationship to Job (example: applicant, owner filing representative)		
Last Name CHAN First Name EVAN Middle Initial C		
Business Name EVAN CHAN ARCHITECT, PC Business Telephone (917) 659-8195		
Business Address 765 Marcy Ave Business Fax		
City Brooklyn State NY Zip 11216 Mobile Telephone		
E-Mail License Number		
3	Type of Request Choose one.	
☐ Letter of Completion (Directive 14 or Non-Directive 14)		
☐ TCO - Temporary Certificate of Occupancy (Borough Commissioner's Office may be required. All requirements must be fulfilled before a TCO will be issued) 3A		
☐ Renewal of TCO - Temporary Certificate of Occupancy (Borough Commissioner's Office approval may be required. All requirements must be fulfilled before a TCO will be issued) 3A		
☒ Final Certificate of Occupancy 3A		
3A ☐ Change of address, block/lot, metes and bounds only (28-118.16.2)		
4	Comments If additional space is required, write "see A1-1" here and submit a completed A1-1 form with this request.	
5	Statements and Signatures	
By signing below, I understand that all the information provided is true to the best of my knowledge and that falsification of any statement is a misdemeanor under § 26-124 of the NYC Administrative Building Code and 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.		
Requestor Signature 		Date 12/26/10
Borough Commissioner's Office TCO Authorization Do not write in this section.		
Comments:		
Authorized Name (please print) ☐ Approved ☐ Disapproved		
Authorization Signature (if approved only) Date		
Disapproval Reasons Review request cannot be processed for the following reasons:		
☐ Fees unpaid ☐ Open ECB/DOB Violation(s) ☐ Incomplete PAA ☐ Audit Conditions Pending / Job on Hold		
☐ Missing inspection Sign-off(s): ☐ Construction ☐ Plumbing ☐ Electrical ☐ Other: _____		
☐ Missing Required item(s): _____ ☐ TR-1 Error(s): _____		
☐ Form(s) missing/incomplete: Form(s) _____ Section(s)/Reason(s) _____		
☐ Other: _____		