



DEPT OF BLDGS 321741914

Job Number

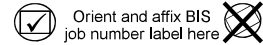


ES530423071

Scan Code

Application for Certificate of Compliance for Equipment

Form must be typewritten.



1 FILING STATUS

Job Number 321741914

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. 1437 Street Name BLAKE AVENUE Apt/Condo No.(s) Apt. 1

Borough BROOKLYN Block 4274 Lot 1 BIN 3426830 CB No. 305

Work on Floor 001

4 APPLICANT INFORMATION (required for all applications)

Last Name MADRIAGA First Name JONAR Middle Initial

Business Name MADRIAGA ENGINEERING P.C. Business Telephone (718) 380-2695

Business Address 77-16 164 STREET, SUITE 201 Business Fax

City Fresh Meadows State NY Zip 11366 Mobile Telephone (917) 463-7241

Email Address jonar@madriagaengineering.com

☒ P.E. ☐ R.A. ☐ Other License Number 100821

5 EQUIPMENT SPECIFICATIONS (Section Instructions - complete all)

Item: Manufacturer/Trade Name	Floor	No. of Items	Certification Number for Listing	Capacity	
				Value	Units
MITSUBISHI ELECTRIC / MSZ-FS18NA	2	1	1032756T	18000	1
MITSUBISHI ELECTRIC / MSZ-GL09NA	2	1	26E30166	9000	1
MITSUBISHI ELECTRIC / MSZ-GL09NA	2	1	26E30194	9000	1
MITSUBISHI ELECTRIC / MSZ-GL09NA	2	1	26E30196	9000	1

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 MANUEL VARGAS

Title OWNER

Signature *Manuel Vargas* Date 06-19-2024

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

Inspector's Signature Date Signed Off

Name (please print)

JONAR MADRIAGA

Signature

Date

06-19-2024

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

INTERNAL USE ONLY

Examined and Recommended for Approval: ☐ Yes ☐ NoApproved: ☐ Yes ☐ No

Examiner

Borough Commissioner

Signature

Date

Signature

Date

PW4: Application for Certificate of Compliance for Equipment

Form must be typewritten.

☒ Orient and affix BIS job number label here ☒

1 FILING STATUS

Job Number 321741914

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. 1437 Street Name BLAKE AVENUE Apt/Condo No.(s) Apt. 2

Borough BROOKLYN Block 4274 Lot 1 BIN 3426830 CB No. 305

Work on Floor 002

4 APPLICANT INFORMATION (required for all applications)

Last Name MADRIAGA First Name JONAR Middle Initial
Business Name MADRIAGA ENGINEERING P.C. Business Telephone (718) 380-2695
Business Address 77-16 164 STREET, SUITE 201 Business Fax
City Fresh Meadows State NY Zip 11366 Mobile Telephone (917) 463-7241
Email Address jonar@madriagaengineering.com
☒ P.E. ☐ R.A. ☐ Other License Number 100821

5 EQUIPMENT SPECIFICATIONS (Section Instructions - complete all)

Item: Manufacturer/Trade Name	Floor	No. of Items	Certification Number for Listing	Capacity	
				Value	Units
MITSUBISHI ELECTRIC / MSZ-FS18NA	2	1	1031426T	18000	1
MITSUBISHI ELECTRIC / MSZ-GL09NA	2	1	26E30166	9000	1
MITSUBISHI ELECTRIC / MSZ-GL09NA	2	1	26E30194	9000	1
MITSUBISHI ELECTRIC / MSZ-GL09NA	2	1	26E30196	9000	1

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 MANUEL VARGAS

Title OWNER

Signature *Manuel Vargas* Date 06-19-2024

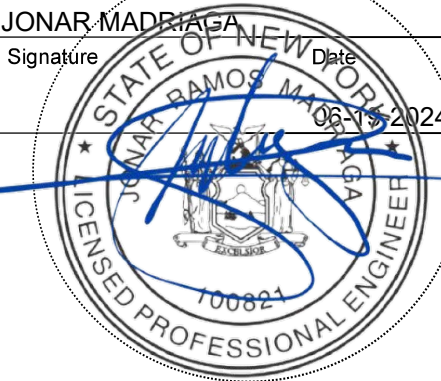
I hereby certify the work indicated above has been done in a manner required by the Rules & Regulations of the Department of Buildings except where reported adversely.

Inspector's Name

Inspector's Signature Date Signed Off

Name (please print) JONAR MADRIAGA

Signature *[Signature]* Date 06-19-2024



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	Signature
Date	Date

PW4: Application for Certificate of Compliance for Equipment

Form must be typewritten.

☒ Orient and affix BIS job number label here ☒

1 FILING STATUS

Job Number 321741914

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. 1437 Street Name BLAKE AVENUE Apt/Condo No.(s) Apt. 3
Borough BROOKLYN Block 4274 Lot 1 BIN 3426830 CB No. 305
Work on Floor 003

4 APPLICANT INFORMATION (required for all applications)

Last Name MADRIAGA First Name JONAR Middle Initial
Business Name MADRIAGA ENGINEERING P.C. Business Telephone (718) 380-2695
Business Address 77-16 164 STREET, SUITE 201 Business Fax
City Fresh Meadows State NY Zip 11366 Mobile Telephone (917) 463-7241
Email Address jonar@madriagaengineering.com
☒ P.E. ☐ R.A. ☐ Other License Number 100821

5 EQUIPMENT SPECIFICATIONS (Section Instructions - complete all)

Item: Manufacturer/Trade Name	Floor	No. of Items	Certification Number for Listing	Capacity	
				Value	Units
MITSUBISHI ELECTRIC / MSZ-FS18NA	2	1	1031588T	18000	1
MITSUBISHI ELECTRIC / MSZ-GL09NA	2	1	26E30066	9000	1
MITSUBISHI ELECTRIC / MSZ-GL09NA	2	1	26E30094	9000	1
MITSUBISHI ELECTRIC / MSZ-GL09NA	2	1	26E30096	9000	1

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 MANUEL VARGAS

Title OWNER

Signature *Manuel Vargas* Date 06-19-2024

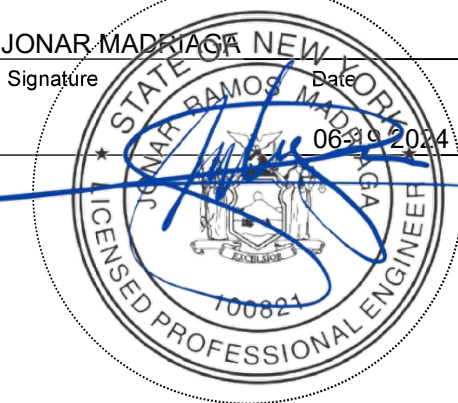
I hereby certify the work indicated above has been done in a manner required by the Rules & Regulations of the Department of Buildings except where reported adversely.

Inspector's Name

Inspector's Signature Date Signed Off

Name (please print) JONAR MADRIAGA

Signature *Jonar Ramos* Date 06-19-2024



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	Signature
Date	Date