



PGL1: Project Specific General
Liability Insurance Summary
and Affirmation

Generated by the online DOB tool



This document must be submitted with an ACORD Certificate summarizing the General Liability Insurance coverage for this project.

1 Location Information Required for all applications.

House No(s) 194 Street Name Buffalo ave

Borough Brooklyn

Block 1368

Lot 50

BIN 3036311

CB No.

2 Project Specific Insurance Requirement The required insurance is calculated based on information provided by the applicant.

Yes No

- ☐ ☒ 1 or 2 family home?
☐ ☒ Depth of Excavation < 12'?
☒ ☐ Proposed Height < 35'?
☒ ☐ Proposed construction on lot line with an existing structure?
☐ ☒ Is a Tower Crane to be used?

Height of proposed construction

Number of stories of proposed construction

Height of tallest adjacent building 20 ft

Number of stories of tallest adjacent building 2

Permit Type Full Demo

Calculated Project Specific GL Insurance Required 5M

3 Applicant Statement and Signatures Required for all applications.

The information in this application is correct and complete to the best of my knowledge and I assume responsibility for all statements on this form. I understand that if I am found after hearing to have knowingly or negligently made a false statement on this form or any other document submitted to the Department, I may be subject to fine, imprisonment, and/or barred from filing further documents with the Department. I also understand 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.

Name Ted contracting corp

Registration/Tracking Number 619722

Signature

Date

Notarization (required if not licensee)
State of New York, County of On

Sworn to or affirmed under penalty of perjury

26 day of

August 2020

Notary Signature

Notary Seal: STATE OF NEW YORK, NOTARY PUBLIC, Qualified in Queens County, 01AK6269011, COMMISSION EXPIRES 09/17/2024

4 Brokers Certification Required for all applications.

The undersigned insurance broker or agent represents to the City of New York that the attached Certificate of Insurance is accurate in all material respects. With regard to the commercial general liability insurance (including primary, excess, umbrella, or wrap-up policies) described in the Certificate of Insurance, the undersigned further represents that:

- The total per occurrence limit is \$ 5 million and the total general aggregate limit, which applies per project, is \$ 5 million; and
- The City of New York, together with its officials and employees, is an additional insured with coverage at least as broad as set forth in the most recent edition of ISO Forms CG 2012 or CG 2026.

Name of broker or agent

Address of broker or agent

Email address of broker or agent

Signature of authorized official, broker or agent

Name and title of authorized official, broker, or agent
DEBBIE L.

Notarization (required)

State of NY, County of

Sworn to or affirmed before me this

26 day of

August 2020

Notary Signature

Notary Public for the State of NY

