



PW1B: Schedule B
Plumbing, Sprinkler, Standpipe

Must be typewritten.

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DEPT BLDGS Job No. 340279567



Scan Code ESHS9598415

1 Location Information Required for all applications.

House No(s) 1010 Street Name PUTNAM AVENUE
Borough BROOKLYN Block 1485 Lot 29 BIN 3039762 CB No. 303
Work on Floor(s) CEL,BAS,001,002

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

Filing components/fixtures? ☒ Yes ☐ No

☒ Plumbing - PL Cost: \$ 10,000 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) _____
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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:
HVAC, HOT WATER HEATER, STOVE, GAS DRYER

Total Meters total: 2 Location(s), floor/apt. - list all that apply:
CELLAR (2 EXISTING)

Risers total: 2 CEL TO CEL, BAS, 1ST AND 2ND FLOOR.

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)
PIROOZ SOLTANIZADEH

Signature _____ Date _____

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

8 Equipment Information <i>For new work only.</i>													
System (work type)	Components (Piping / Equipment / Fixture)	Floors <i>indicate no. of proposed components and/or "X" for piping</i>											
		BAS	CEL	001	002								
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												
	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												
	F Hose Cabinet/Rack/Valve												
	F Siamese FDC												
8D Water/San. (PL)	P* Sanitary Piping (Soil & Venting)												
	P* Water Piping												
	P Water Service Piping												
	E Sewer Ejection Pump												
	E Submeters												
	F Bathtubs/Whirlpools/Hot Tub/Sauna	1			2								
	F Bidet												
	F Chiller/Cooler												
	F Dishwasher												
	F Domestic Water Tank/Pump												
	F Drinking Fountain												
	F Floor Drain		1										
	F Grease Trap/Oil Separator/GRD												
	F Ice Maker												
	F In-sink Garbage Disposal												
	F Lavatory (Common Wash Basin)	2			2								
	F Laundry - Standpipe												
	F Pool												
	F RPZ/Backflow Preventer (Primary)												
	F RPZ/Backflow Preventer (Secondary)												
	F Sink - Non Residential												
	F Sink - Residential	1		1									
	F Stall Shower												
	F Tankless Coil												
	F Toilet (Water Closet)	2											
	F Urinal												
	F Washing Machine		1										
	F Water Heater (Non-Gas)												
8E Storm (PL)	P* Storm Drainage Piping												
	E Sump Pump												
	F Area/Yard Drain												
	F Detention Tank												
	F Dry Well/Retention												
	F Roof Drain												
8F Gas (PL)	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)	1	0	1									
	F Gas Boiler (<350K, non-comm, <6 family)												
	F Gas Burner												
	F Gas Dryer		1										
	F Gas Furnace	0	1	1	1								
	F Gas Meter												
8G Medical (PL)	F Gas Water Heater		2										
	P* Medical Gas Piping												
	E Assorted Medical Equipment												

** Must be off domestic.

* Indicates test *may* be required.