

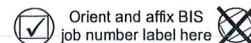
CO-557/16
Buildings

DEPT OF BLDGS 340399946 Job Number

PW1-C: Schedule C

Heating & Combustion Equipment

ES443127870 Scan Code



Application Must be Typewritten.

1 Filing Status Required for *all* applications.

Filing purpose, choose one: ☐ New Installation ☒ Replacement/Modification ☐ Removal/ Discontinuation ☐ Change Grade of Oil Used
Type of work: ☒ Boiler ☐ Burner ☐ Fuel Storage ☐ Mobile Boiler or FS Tank

2 Location Information Required for *all* applications.

Borough Brooklyn House No(s) 970 Street Name 42ND STREET

BIN 3135793 Block 5595 Lot 34 Apt. / Condo No(s).

Occupancy Type choose one: ☐ Commercial ☐ Mixed Use ☐ 1 to 5 families ☒ 6 or more families ☐ Other:**3 Owner of Boiler**

Last Name First Name Middle Initial

Business Name Business Telephone Business Fax

Address Mobile Telephone E-Mail

City State New York Zip

4 Boiler Specifications Required for *all* applications. Additional Schedule C is required for more than three types of boiler make/modelIf Existing Boiler, Yes ☐ Location of Equip CEL If Modular, Number of Units N/ABoiler Type: ☐ High Pressure or ☒ Low Pressure Pressure Settings of Relief Valves: 75 PSIG☐ Steam or ☒ Hot Water Fuel Used: ☐ Oil or ☒ Gas or ☐ Electric

Boiler Manufacturer	Model Number	UL / CSA / ETL / Other Number	Qty. Boilers	Input Capacity (btu/hr)
LAARS (REPLACEMENT)	PNCH-1500	CSA# 1502-01	ONE	1,500,000

5 Plan Requirements for Fuel Burning Equipment & Fuel Oil Storage Plans required if any of the below are checked.

- ☐ Capacity of Equipment exceeds 350,000 BTU ☐ Tanks are in a building adjacent to the line of a subway
☐ Capacity of each of the oil storage tanks exceeds 330 gallons ☐ Fuel Burning/Tanks are located above the lowest story of a building
☐ Tanks are buried or vaulted or enclosed

6 Burner Specifications If Existing Burner, Yes ☐

Burner Manufacturer	Model Number	UL / CSA / ETL / Other Number	BTU#/GPH Rate of Burner MBTU or GPH
LAARS (REPLACEMENT)	INTEGRAL	CSA# 1502-01	1.5

7 Fuel Storage Specifications

	Tank 1	Tank 2	Tank 3	Tank 4
Grade of Oil: Bio or 2 or 4	☐ Bio or ☐ #2 or ☐ #4	☐ Bio or ☐ #2 or ☐ #4	☐ Bio or ☐ #2 or ☐ #4	☐ Bio or ☐ #2 or ☐ #4
Capacity (gal.):				
Location				
If Existing, indicate FDNY Permit #				

Instructions: Check Bio if the oil blend contains greater than 20% bio fuel.

Revised 12/14

PW1-C

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8 Chimney Information

Masonry Chimney Statement: I attest that I have inspected the chimney at the location listed in Section 2 herein, and I find the chimney to be in good condition and furthermore (check only one)

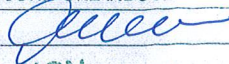
☐ the chimney does not require lining; OR

☒ the chimney is lined with (fill in) TERRACOTTA and such lining is in good condition.

License Number: 1002

(check one) ☐ Design Professional

Full Name JOHN ORLANDO JR

☒ Licensed InstallerSignature ☐ Special InspectorPLUMBER SIGN
AND SEAL →**9 Registered Architect or Professional Engineer Seal and Affirmation**

Full Name: JOSEPH D. BAZINI

Address: 514 MEACHAM AVENUE

City: ELMONT

State NY

Zip 11003

E-Mail:

Telephone: (516)502-4837

Fax:

License No. 087678

Type: ☐ Professional Engineer ☐ Registered Architect

The installation described above, complies with the NYCECC Table C403.2.3 (5) efficiency/test procedures and the sizing requirements in ECC 403.6 as applicable.

I affirm that the above information is true and complete to the best of my knowledge. I understand that falsification of any statement is a misdemeanor under the NYC Administrative Code 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.

Signature

Date

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

10 Oil Burner Installer/Master Plumber This section required after work is completed

Full Name: JOHN ORLANDO JR

Address: 354 HUMBOLDT STREET

City: BROOKLYN

State NY

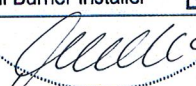
Zip 11211

E-Mail:

Telephone: 718-387-0851

Fax:

License No. 1002

Type: ☐ Oil Burner Installer ☒ Master PlumberSignature 

Date

Oil Burner Installer / Master Plumber Seal (apply seal, then sign and date over seal)

Verified Statement of Readiness: This statement is hereby affirmed under the installer's professional seal as proof that the conditions as stated have been met prior to requesting an appointment. Failed tests resulting from false or incorrect statements of readiness may result in referrals for disciplinary investigation.

I hereby affirm the device installed matches the device described in this application.

I further affirm that I have inspected the device and the positioning of the device within the premises, and I confirm that the installation is in conformance with New York State and City Code, Rules, and Regulations requirements and the ASME standards.

No boiler is to be placed in operation until a certification is issued by a Department of Buildings boiler inspector.

A satisfactory inspection by the department shall not be construed to be an approval by the department of a violation of the provisions of NYC Admin Code or of any other provision of law.

Falsification of any statement is a misdemeanor under the NYC Administrative Code and is punishable by a fine or imprisonment, or both.

The owner of a boiler that is removed or discontinued from use shall file a written notice of such removal or discontinuance with the Commissioner within 30 days of the date of the removal or discontinuance as per NYC Administrative Code §28-303.9. 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.

Department of Buildings Sign Off For internal use only.

I hereby certify that the work indicated above has been completed in conformance to the Codes, Rules, and Regulations enforced by the New York City Department of Buildings.

Inspector's Full Name (please print):

Examined and Recommended for Approval on: Month Day Year

Inspector's Signature:

Date:

Department of Buildings Boiler No(s).