



AI1: Additional Information Must be typewritten.

☒ Orient and affix BIS job number label here ☒

Page number 1 of 1

BIS Document No. 1

340503351

1 Location and Job Information Required for all applications.

House No(s) 2245

Street Name WEST 1 STREET

Borough BROOKLYN

Block 7151

Lot 117

BIN 3193673

CB No. 315

2 Revisions to Plans/Drawings Required whenever updating plans. All revisions for each page must be clearly described in section 3.

Submission is part of a Post Approval Amendment (PAA)?

☒ Yes PW1 required

☐ No

Indicate all actions for this submission:

Action	Original/New/ Omit Page ID	Superseding Page ID	Action	Original/New/ Omit Page ID	Superseding Page ID	Action	Original/New/ Omit Page ID	Superseding Page ID	Action	Original/New/ Omit Page ID	Superseding Page ID
S	A-100.00	A-100.01									
S	A-200.00	A-200.01									
S	P-101.00	P-101.01									

For "Action" use "N" for new page, "S" for superseding page, "O" for omitting page.

Is this section continued on additional AI1 forms? ☐ Yes ☒ No

3 Additional Information Required for all applications.

THROUGH THIS AI 1, I AM AMENDING THE PLAN IN ACCORDANCE WITH THE GIVEN OBJECTIONS.
PAGE # A-100.00 TO PAGE # A-100.01
PAGE # A-200.00 TO PAGE # A-200.01
PAGE # P-101.00 TO PAGE # P-101.01

RESPECTIVELY TO APPLICATION # 340503351
SINCERELY YOURS

BRIAN T. O'CONNOR

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. I understand that if I am found after hearing to have knowingly or negligently made a false statement or to have knowingly or negligently falsified or allowed to be falsified any certificate, form, signed statement, application, report or certification of the correction of a violation required under the provisions of this code or of a rule of any agency, I may be barred from filing further applications or documents with the Department.

Name (please print)

BRIAN T O'CONNOR

Signature

Date

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

