



PW7: Certificate of Occupancy/Letter of Completion Folder Review Request

(Must be typewritten)

1 LOCATION INFORMATION

House No(s) 124 Street Name FORREST STREET Work Proposed on Floor No(s) CELL,001
Borough Brooklyn Block 3148 Lot 21 BIN 3071848 CB No. 304

2 REQUESTOR INFORMATION

Individuals Relationship to Job (Example: Applicant, Owner Filing Representative) <Select>

Last Name CHEEDIE

First Name CHRIS

Middle Initial

Business Name KM ASSOCIATES OF NY, INC.

Business Telephone (212) 563-6760

Business Address 158 WEST 29TH STREET 7TH FLOOR

Business Fax (212) 563-6753

City NEW YORK

State NY

Zip 10001

Mobile Telephone () -

E-Mail CCHEEDIE@KMAOFNY.COM

License Number

3 TYPE OF REQUEST (Choose one)

- ☒ Letter of Completion (Directive 14 or Non-Directive 14)
- ☐ TCO - Temporary Certificate of Occupancy. Must complete the TCO Worksheet on pages 2 and 3 of the PW7. All applicable requirements checked on TCO Worksheet must be fulfilled before a TCO will be issued. (Borough Commissioner's Office approval is required).
- ☐ TCO - Temporary Certificate of Occupancy with Change. Must complete the TCO Worksheet on pages 2 and 3 of the PW7. All applicable requirements checked on TCO Worksheet must be fulfilled before a TCO will be issued. (Borough Commissioner's Office approval is required).
- ☐ Renewal of TCO - Temporary Certificate of Occupancy. All applicable requirements must be fulfilled before a TCO is issued. (Borough Commissioner's Office approval may be required) 3A
- ☐ Final Certificate of Occupancy 3A
3A ☐ Change of address, block/lot, metes and bounds only (28-118.16.2)

4 COMMENTS (If additional space is required, write see A1 1 here and submit a completed A1 1 form with this request)

5 STATEMENTS AND SIGNATURES

By signing below, I understand that all the information provided is true to the best of my knowledge and that falsification of any statement is a misdemeanor under § 26-124 of the NYC Administrative Building Code and 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.

Requestor Signature

Christopher Cheedie

Date 12/10/2020

Borough Commissioner's Office TCO Authorization Do not write in this section.

Comments:

Authorized Name (please print)

☐ Approved

☐ Disapproved

Authorization Signature (if approved only)

Date

Disapproval Reasons Review request cannot be processed for the following reasons:

- ☐ Fees unpaid ☐ Open ECB/DOB Violation(s) ☐ Incomplete PAA ☐ Audit Conditions Pending / Job on Hold
- ☐ Missing inspection Sign-off(s): ☐ Construction ☐ Plumbing ☐ Electrical ☐ Other: _____
- ☐ Missing Required item(s): _____ ☐ TR-1 Error(s): _____
- ☐ Form(s) missing/incomplete: Form(s) _____ Section(s)/Reason(s) _____
- ☐ Other: _____

TCO Worksheet

page 2

Application No.	Application Type:
Address:	BIN:
No. of Floors:	Use:
Complete this worksheet ONLY for a TCO-Initial or TCO-Renewal with Change (select one): ☐ TCO-Initial OR ☐ TCO Renewal with Change	

If *submit a copy* is indicated, copies of the documents must be assembled as a single submission package and uploaded in eFiling as **one document**, selecting Document Name **TCO - Supporting Documents**.

☐ TCO-Supporting Documents attached	Date uploaded:
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The below Inspection signoffs/TRs are required for ALL applications.

A. Required Items		B. Required for initial TCO	C. Enter required information
Inspections			
Final/Temp. Const. signoff	☐ Inspection signoff is entered in Required Items . (must be within 18 months of the request date)		Date of last action:
Final/Temp. Plumbing signoff	☐ Inspection signoff is entered in Required Items		Date of last action:
Final/Temp. Elevator signoff	☐ Inspection signoff is entered in Required Items (No CAT-5 violations received after signoff)		Date of last action:
Technical Inspection Report Requirements			
TR(s) for Special/Progress Inspections	☐ TR(s) received in Required Items ; OR (Phased projects only): ☐ Partial TR(s) or temporary deferral of TR(s) request, signed and sealed by a Registered Design Professional AND approved by BC/DBC (<i>submit a copy</i>)	☐ Partial TR(s) submitted ☐ Copy submitted Date of action:	
Related Boiler/Water Heater/Emergency Generators/Fuel Storage	☐ Signed off ; OR ☐ TR(s) received in Required Items ;	Date of last action: Application No(s):	

The below requirements are project specific.

Indicate **Y** (Yes) or **N** (No) for each applicable requirement in Column A. This field cannot be left empty.

If **Y** is indicated, you must **check the applicable item in Column C**.

If the selected item in Column C indicates *submit a copy*, it must be included in the *TCO-Supporting Documents* package.

A. Y/N	B. Required Items	C. Required for initial TCO	D. Enter required information
Fire Safety Systems			
No	Fire Protection Plan (FPP)	☐ FDNY Letter of Approval (LOA) (<i>submit a copy</i>); OR ☐ Receipt from FDNY that FPP has been filed AND Temporary Waiver Letter request, signed and sealed by a Registered Design Professional AND approved by BC/DBC (<i>submit a copy</i>)	☐ Copy submitted Date of action:
No	Fire Alarm (FA)	☐ Signed off , OR ☐ FDNY Letter of Approval (LOA) (<i>submit a copy</i>), OR ☐ FDNY Letter of Recommendation (LOR) (<i>submit a copy</i>), OR ☐ FDNY Letter of Defect (LOD) AND an Affidavit of Correction, signed and sealed by a Registered Design Professional AND approved by BC/DBC (<i>submit a copy</i>)	☐ Copy submitted Date of action: Application No:
No	Fire Alarm FA-ARC)	☐ Signed off , OR ☐ FDNY Letter of Approval (LOA) (<i>submit a copy</i>), OR ☐ FDNY Letter of Recommendation (LOR) (<i>submit a copy</i>), OR ☐ FDNY Letter of Defect (LOD) AND an Affidavit of Correction, signed and sealed by a Registered Design Professional AND approved by BC/DBC (<i>submit a copy</i>)	☐ Copy submitted Date of action: Application No:
No	Fire Suppression (FS) system(s)	☐ Signed off , OR ☐ FDNY Letter of Approval (LOA) (<i>submit a copy</i>)	☐ Copy submitted Date of action: Application No:
No	CO/Smoke Detector	☐ Received in Required Items ; OR ☐ Affidavit of Installation and testing, signed and sealed by a licensed electrician (<i>submit a copy</i>)	☐ Copy submitted Date of action: Application No:
Administrative Requirements			
No	Builders Pavement Plan (BPP)	☐ Signed off , OR ☐ Permitted status AND DOB inspection report (<i>submit a copy</i>); OR ☐ Permitted status AND Affidavit with photos, signed and sealed by a Registered Design Professional (<i>submit a copy</i>)	☐ Copy submitted Date of action: Application No:
No	Place of Assembly (PA)	☐ Inspection status Final-Passed <i>Until a PA has passed the inspection, occupancy may be restricted to 74 persons</i>	Date of action: Application No:

A. Y/N	B. Required Items	C. Required for initial TCO	D. Enter required information
Administrative Requirements (continued)			
No	Equipment Use Permit(s) (EUP) (aka Certificates of Compliance)	☐ Received in Required items ; OR (Phased projects only): ☐ Affidavit signed and sealed by a Registered Design Professional that the space(s) are adequately heated and ventilated (<i>submit a copy</i>)	☐ Copy submitted Date of action: Application No:
Violations:			
No	DOB Civil Penalties Payment	☐ Civil Penalties must be paid prior to TCO	
No	Local Law violations ¹	☐ Plan of action and a timeline for correcting the violation(s), signed and sealed by a Registered Design Professional. Plan of action is subject to technical review and approval by BC/DBC/PA (<i>submit a copy</i>)	☐ Copy submitted
¹ violations that directly affect the spaces covered by the application or compromise life-safety systems of the entire building			

Other City/State Agencies Requirements:			
No	Loft Board Loft Board Certifications	☐ Received in Required Items : Loft Board Certificate (LBC), OR ☐ Received in Required Items : Loft Board Letter of No Objection (LONO)	Date of last action:
No	Department of Environmental Protection (DEP) : Little E/OER Notice of Satisfaction	☐ Received in Required items : DEP Notice of Satisfaction	Date of last action:
No	Landmarks Preservation Commission (LPC) Certificates	☐ Received in Required Items : Certificate of 'No Effect' (CNE), OR ☐ 'Certificate of Appropriateness' (COA) AND demonstrate that COA requirements are satisfied - if inspection and sign-off by LPC are required, they must be completed prior to TCO (<i>submit a copy</i>)	☐ Copy submitted Date of action:
No	Design Commission City owned property Design Commission Approval	☐ Received in Required Items : Design Commission Certificate of Approval (COA)	Date of last action:
No	HPD : Special Districts ² Certificate of No Harassment	☐ Received in Required Items : HPD #Special District# Certificate of No Harassment (CONH) (aka Anti-Harassment checklist)	Date of last action:
No	HPD : Special Districts ² (HY, GD, WCh only) Certificate of "No Effect"	☐ Received in Required Items : HPD Certificate of 'No Effect' (CONE) OR ☐ Received in Required Items : Cure Agreement	Date of last action:
² #Special Districts#: MN – Clinton District (CD), Garment District (GD), Hudson Yards (HY), West Chelsea (WCh); BK – Greenpoint – Williamsburg (GpW)			
No	HPD : SRO MD Certificate of No Harassment	☐ Received in Required Items : HPD SRO MD Certificate of No Harassment (aka Anti-Harassment checklist) <i>HPD SRO MD CONH is valid only for 36 months</i>	Date of last action:
No	HPD : Completion Notice	☐ Received in Required Items : Completion Notice ☐ If partial TCO requested : proof of passed inspection for all affordable units on each story for which Partial TCO is requested (<i>submit a copy</i>)	☐ Copy submitted Date of action:
No	CPC : POPS	☐ Received in Required Items : CPC Letter of Approval (LOA) (<i>submit a copy</i>), AND (if applicable) ☐ Listed in Section 9 of PW1 : CRFN No. for any documents recorded against property	☐ Copy submitted Date of action:
No	CPC : Special Permits ³		
No	CPC : ULURP		
³ Special permits are decided on a case-by-case basis and will have individual requirements. Generally, CPC LOA is issued, but other documents may be required.			
No	BSA : Variance	☐ Received in Required Items : BSA Variance; AND (if applicable) ☐ Listed in Section 9 of PW1 : BSA Calendar No. / Zoning Exhibit CRFN No. ☐ Recorded on Schedule A : (when required) BSA Calendar No. and Special Permit conditions	☐ Copy submitted Date of action: