



AI1: Additional Information Must be typewritten.

Job no. 340820062

Page number 1 of 1

BIS Document No. 02

1 Location and Job Information Required for all applications.

House No(s) 1750

Street Name EAST 53 STREET

Borough BROOKLYN

Block 8492

Lot 57

BIN 3239699

CB No. 318

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	T-001.00	T-001.01									
S	PV-001.00	PV-001.01									
S	PV-003.00	PV-003.01									
S	G-001.00	G-001.01									

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.

Post Approval Amendment: Job no. 340820062

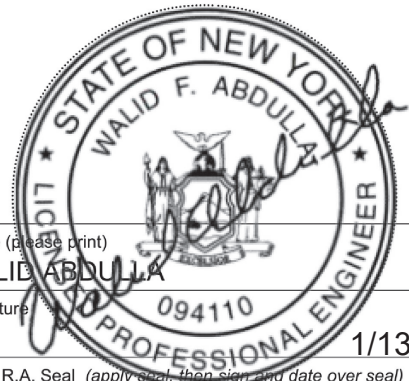
Electrical equipment moved from Southern exposure to Northern exposure.
All revisions have been marked and bubbled on the plans.

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)

WALID ABDULLA

Signature



Date

1/13/22

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