



PW-7: Certificate of Occupancy /
Letter of Completion Folder
Review Request
Must be typewritten.

DEPT. BLDGS	410015380	Job Number
SC070928053		Scan Code

1 Location Information

House No(s)	35-18	Street Name	157 STREET	Work Proposed on Floor No(s)	
Borough	QUEENS	Block	5272	Lot	37
BIN	4119292	CB No.	407		

2 Requestor Information

Individuals Relationship to Job (example: applicant, owner, filing representative)

Last Name	LEE	First Name	KENNY	Middle Initial	
Business Name	KENNY LEE ARCHITECT			Business Telephone	(718)463-2406
Business Address	164-05 NORTHERN BLVD. #2FL			Business Fax	(718)463-2301
City	FLUSHING	State	NY	Zip	11358
E-Mail	KENNYLEEARCHITECT@GMAIL.COM			Mobile Telephone	
				License Number	024793

3 Type of Request *Choose one.*

- ☒ Letter of Completion (Directive 14 or Non-Directive 14)
☐ TCO - Temporary Certificate of Occupancy (Borough Commissioner's Office approval may be required. All requirements must be fulfilled before a TCO will be issued)
☐ Renewal of TCO - Temporary Certificate of Occupancy (Borough Commissioner's Office approval may be required. All requirements must be fulfilled before a TCO will be issued)
☐ Final Certificate of Occupancy

4 Comments *If additional space is required, write "see AI-1" here and submit a completed AI-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 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.

Requestor Signature

Date 10/01/2008

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

Comments:

Authorized Name (please print)

☐ Approved

☐ Disapproved

Authorized 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: _____