

Schedule B

Plumbing/Sprinkler/Standpipe

or Plumbing, Sprinkler, & Standpipe Installations/5

Please File 3 copies

Application Must Be Typewritten
(See Instructions)



DEPT.BLDGS

410028081

Job Number



SC071010018

Scan Code

1 Location				
Borough QUEENS	Block 1770	Lot(s) 53	BIN	C.B. No.
House No(s) 102-03	Street Name ROOSEVELT AVE.		Floor(s) C, 1	

2 Installation Costs			
Work type costs:	PL: \$ 10,300.00	SP: \$	SD: \$

3 Additional Considerations		Check this box if no components are typed in section 10 of this form	
Made to Remove Violation	Violation Number(s)	Complete revision	Changes/additional components

4 Drainage Information (required for all New Buildings)							
Storm Drainage Discharges into:				Sanitary Drainage Discharges into:			
Storm Sewer		Combined Sewer		Private Disposal		Sanitary Sewer	

5 Sewer Work (check all that apply)			
SD1, 2, 3		Site Connection	Septic Tank

[illegible]

7 Gas and Gas Equipment Data

Gas Piping Involved ☒ Yes ☐ No *Remove*

Describe Gas Fired Equipment: 2 GAS BOILER, COMMERCIAL STOVE, DEEP FRYER, 3 PIZZA OVENS, A GRILL AND A RICE COOKER

Gas meters/risers data (check off below all that apply. Check off types of gas usage for any listed meters/risers).

☒ Total Meters: 3 Location(s) (Floor/Apt. -- list all that apply for this application): CELLAR

☒ Total Risers: 1 Location(s) (Floor/Apt. -- list all that apply for this application): CELLAR, 1

☒ Gas usage:

☒ Heat <i>Remove</i>	☐ Boiler Pilot for oil burner	☐ Water Heater	☐ Dryer
☐ Cooking	☐ Tankless Coil	☐ HVAC	☐ Fire Place
☐ Other (describe):			

8 Sprinkler Totals			Total number of sprinkler heads typed on back of form:		
Water not off the domestic water supply		Water of the domestic water supply	Related PL job # of domestic water connection:		

9 Statements and Signatures I hereby state that the information on this form is correct and complete to the best of my knowledge. Falsification of any statement is a misdemeanor under §26-124 of the 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.		SEAL 	Sign-off FOR INTERNAL USE ONLY I hereby certify that the work indicated above has been done in a manner required by the Rules and Regulations of the New York City Department of Buildings. ☐ Sign off for _____ (define worktype/s) Inspector's Name (print) Badge # Signature Date
Applicant Name: ISSA KHORASANCHI Signature:  Date: 11/7/07			

10 Equipment Information (for new work only)		Floors - Indicate # of proposed components and/or X for piping	
System (work type)	Piping/Equipment/Plumbing Components	Floor C 1	
Sprinkler (SP)	* P Sprinkler Piping - Dry		
	* P Sprinkler Piping - Wet		
	* E Dry Pipe Valve		
	* E Booster Pump - SP		
	F Floor/Riser Control Valve		
	F Siamese FDC		
	F Sprinkler Heads		
Sprinkler (PL)	* P Sprinkler Piping Wet		
	F Sprinkler Heads (thirty or less)		
Fire Standpipe (SD)	* P Standpipe Piping		
	* E Fire Pump		
	* E Booster Pump - SD		
	F Floor/Riser Control Valve		
	F Hose Cabinet/Rack/Valve		
	F Siamese FDC		
Water/San (PL)	* P Sanitary Piping (Soil & Venting)	X X	
	* P Water Piping	X X	
	F Water Service Piping		
	E Sewer Ejection Pump	1	
	F Bathtubs/Whirlpools/Hot Tub/Sauna		
	F Bidet		
	F Chiller/Cooler		
	F Dishwasher		
	F Domestic Water Tank/Pump		
	F Drinking Fountain		
	F Floor Drain	4 2	
	F Grease Trap/Oil Separator		
	F Ice Maker		
	F In-sink Garbage Disposal		
	F Lavatory (Common Wash Basin)		
	F Laundry - Standpipe		
	F Pool		
	F RPZ/Backflow Preventer		
	F Sink - Non Residential	2 4	
	F Sink - Residential		
	F Stall Shower		
	F Tankless Coil		
	F Toilet (Water Closet)		
	F Urinal		
	F Washing Machine		
	F Water Heater (Non-Gas)		
	Storm (PL)	* P Storm Drainage Piping	
		E Sump Pump	
F Area/Yard Drain			
F Detention Tank			
F Dry Well/Retention			
Gas (PL)	F Roof Drain		
	* P Gas Piping	X X	
	E Emergency Shut-off Valve	1	
	* E Fire Suppression Shut-off Valve	1	
	E Gas Booster Pump		
	F Cooking Equipment (non-residential)	3 5	
	F Cooking Equipment (residential)		
	F Gas Boiler (<350K, non comm <8fam)	0	
	F Gas Burner		
	F Gas Dryer		
	F Gas Furnace		
	F Gas Meter		
	F Gas Water Heater		
Medical (PL)	* P Medical Gas Piping		
	F Assorted Medical Equipment		

* Indicates Test may be required