



Schedule B

Plumbing/Sprinkler/Standpi

For Plumbing, Sprinkler, & Standpipe Installations/

Please File 3 copies

Application Must Be Typewritten

(See Instructions)



1 Location					
Borough	Queens	Block	1087	Lot(s)	21
House No(s)	23-34	Street Name	94th Street	Floor(s)	1
BIN		4023638 C.B. No. 403			

2 Installation Costs		
Work type costs:	PL: \$ 1,000	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	☐ Combined Sewer	☐ Private Disposal		

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

6 Cap/remove/replace/relocate (components)	☐ Cap or remove	☐ Replace	☐ Relocate	Describe all below:

7 Gas and Gas Equipment Data				
Gas Piping Involved ☒ Yes ☐ No				
Describe Gas Fired Equipment: Gas Shut Off Valve.				
Gas meters/risers data (check off below all that apply. Check off types of gas usage for any listed meters /risers).				
☒	Total Meters: one	Location(s) (Floor/Apt. -- list all that apply for this application):		cellar
☒	Total Risers: one	Location(s) (Floor/Apt. -- list all that apply for this application):		cellar - first
☒	Gas usage:	☐ Heat	☐ Boiler Pilot for oil burner	☐ Water Heater
		☐ Cooking	☐ Tankless Coil	☐ HVAC
		☐ Other (describe):	Gas Valve	

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

9 Statements and Signatures		Sign-off FOR INTERNAL USE ONLY	
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.		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.	
Applicant Name: N.J. Katz pres for N.J. Katz and Associates, Inc.		☐ Sign off for _____ (define worktype/s)	
Signature: [Signature]		Inspector's Name (print)	
Date: _____		Badge #	
		Signature	
		Date	



10 Equipment Information (for new work only)		Floors - Indicate # of proposed components and/or X for piping															
System (work type)	Piping/Equipment/Fixture Components	UDG	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)																
	* P Water Piping																
	P Water Service Piping																
	E Sewer Ejection Pump																
	F Bathtubs/Whirlpools/Hot Tub/Sauna																
	F Bidet																
	F Chiller/Cooler																
	F Dishwasher																
	F Domestic Water Tank/Pump																
	F Drinking Fountain																
	F Floor Drain																
	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																
	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																
	F Roof Drain																
Gas (PL)	* P Gas Piping																
	E Emergency Shut-off Valve																
	* E Fire Suppression Shut-off Valve		1														
	E Gas Booster Pump																
	F Cooking Equipment (non-residential)																
	F Cooking Equipment (residential)																
	F Gas Boiler (<350K, non-comm, <6fam)																
	F Gas Burner																
	F Gas Dryer																
	F Gas Furnace																
	F Gas Meter																
Medical (PL)	* P Medical Gas Piping																
	E Assorted Medical Equipment																

" * " Indicates Test may be required.