



865542

Buildings

OP-98 Notice/Results—Self-Certification of Plumbing, Sprinkler, Standpipe Inspection(s) & Test(s)

A copy of this completed notice must be retained for re-submission with results.



1 Permit No. 4100 39 015 Document No. 01		Permit Type (check one only): ☐ PL ☒ SP ☐ SD ☐ LAA	
Borough Queens Block 16092 Lot 82 House No 163		Street Name Commodore Circle	
2 Permit Applicant E-Mail:		Business Phone (718) 707 - 9361 Fax No. (718) 576 - 1189	
Last Name Ercolano First Name John M.I.		Business Name JME Enterprises Inc.	
Address 44-16 Purvis Street City Long Island City State NY ZIP 11101 License No. 895 ☐ LMP ☒ LFSC			
3 Inspection Data Inspection/test scheduled for: 9/20/10 (mmddyy) Time: ☒ 8:00am ☐ 8:30 ☐ 9:00 ☐ 9:30 ☐ 10:00 ☐ 10:30 ☐ 11:00 ☐ 11:30 ☐ 12:30pm			
Apts and Floors: 1, 2 & 3rd Floors ☐ 100pm ☐ 1:30 ☐ 2:00 ☐ 2:30 ☐ 3:00 Meeting Location: In front of building.			

4 Notice/Result (Select one: PL, SP, SD only)																								
Systems: Plumbing (PL)						Systems: Sprinkler (SP)						Systems: Standpipe (SD)												
Inspections		Underground		Roughing		Finish		Inspections		Underground		Roughing		Finish		Inspections		Underground		Roughing		Finish		
	Notice	Results	Notice	Results	Notice	Results		Notice	Results	Notice	Results	Notice	Results		Notice	Results	Notice	Results	Notice	Results		Notice	Results	
Sprinkler - PL		Pass	Fail		Pass	Fail		Pass	Fail		Pass	Fail		Pass	Fail		Pass	Fail		Pass	Fail		Pass	Fail
Water/Sanitary - PL																								
Storm - PL																								
Gas - PL																								
Medical Gas - PL																								
Tests						Tests						Tests												
Hydrostatic - PL		Pass	Fail				Hydrostatic - SP		Pass	Fail				Hydrostatic - SD		Pass	Fail							
Water - Sanitary							Dry Pipe Valve							Fire Pump										
Pressure - Water							Booster Pump																	
Water Storm																								
Gas																								
Medical Gas																								

Additional Information/Comments:

☐ Submitted with minor variations, described here:

☐ Legalization ☐ Gas to Gas Appliance Direct Replacement ☐ Remove/Cap ☐ Detention ☐ Drywell/Retention

5 Gas Meters/Risers Data (Check all applicable to this inspection. Include gas usages for each listed meter(s)/riser(s)) ☐ Gas requested for listed meters and risers

No. of Meters: Location(s) (Floor/Apt.): No. of Risers: Location(s) (Floor/Apt.): ☐ Welded Gas Piping

Gas usage: ☐ Heat ☐ Boiler Pilot for oil burner ☐ Water Heater ☐ Dryer

☐ Cooking ☐ Tankless Coil ☐ HVAC ☐ Fire Place ☐ Other (describe):

6 Certifying Applicant E-Mail: Business Phone (718) 707 - 9361 Fax No. (718) 576 - 1189

Last Name Ercolano First Name John M.I. Business Name JME Enterprises Inc.

Address 44-16 Purvis Street City Long Island City State NY ZIP 11101 License No. 895 ☐ LMP ☒ LFSC ☐ P.E. ☐ R.A.

7 Applicant Statements and Signatures ☒ All Comments resolved, review for sign-off ☒ All required back-up documents attached

I certify the statements herein are correct and comply with the NYC Building code. I meet the requirements of the NYC Building code as they relate to the experience requirements set forth for gas tests. I realize falsification of any statements is a misdemeanor under §28-211.1 of the Administrative code punishable by a fine or imprisonment or both and may result in removal from participation in the self-certification program and/or disciplinary action by the Licensed Master Plumber or Licensed Fire Suppression Piping Contractor License Board.

Print Name of Certifying Applicant John Ercolano	SEAL	Print Name of Permit Applicant or Alternative licensee from same firm (LMP/LFSC) John Ercolano	SEAL
Signature 		Signature 	
Date 9/20/10		Date 9/20/10	

Reviewed by: _____, **Date:** 9/28, **Entered by:** mt, **R.S.O. by:** D R, **S/O by:** D B

9/28/10