



PW-1: Plan / Work Application

Must be typewritten.

DEPT. BLDGS.	410049825	Job Number
SC080605623		Scan Code

1 Location Information Required for all applications.																			
House No(s) 120-03		Street Name Springfield Blvd																	
Borough Queens		Block 12799	Lot 26																
Work on Floor(s)		BIN 4275929	C.B. No. 413																
		Apt. / Condo No(s)																	
2 Applicant Information Required for all applications. Business Fax, Mobile Telephone, and E-Mail are optional.																			
Last Name Shin		First Name Jung	Middle Initial Y																
Business Name Jung Y Shin P.E		Business Telephone (718) 529-0437																	
Business Address 131-06 Liberty Avenue		Business Fax (718) 529-0472																	
City S, Richmond hill		State New York	Zip 11419																
E-Mail tato77@juno.com		License Number 50090																	
Choose one: ☒ P.E. ☐ R.A. ☐ Sign Hanger ☐ Other, please specify:																			
3 Filing Representative Complete only if different from applicant specified in section 2. Fax, Mobile Telephone, and E-Mail are optional.																			
Last Name MalagonSaboga/Alejandro		First Name Jorge/Cesar/Maria	Middle Initial																
Business Name Expert Designer Dig		Business Telephone (718) 529-0437																	
Business Address 131-06 Liberty Avenue		Business Fax (718) 529-0472																	
City S, Richmond hill		State New York	Zip 11419																
E-Mail tato77@juno.com		Registration Number 50090																	
4 Filing Status Required for all applications. In this section * means required for Alteration Type 2 jobs only.																			
☐ Initial Filing 5, 7, 11-12, 24-25 ☐ Prof. Certify Job/Plans PC-1, POC-1 ☐ Self Certify Objections Only AI-1		☐ Changes Prior to Approval 23-24 ☐ Add Work Types 6-7, 8A*, 11 ☐ Amend Existing Filing 4A ☒ PAA 4A, 23-24 PAA effect fees? ☐ Yes ☐ No																	
☐ New Applicant 4A, 24-25 ☐ Reinstatement 23-25 ☐ Withdrawal 24-25 ☐ Entire Job ☐ Specified in 4A		4A Doc. # / Work Type																	
		<table border="1"><tr><td>Doc</td><td>WT</td><td>Doc</td><td>WT</td></tr><tr><td>03</td><td>PL</td><td></td><td></td></tr><tr><td></td><td></td><td></td><td></td></tr><tr><td></td><td></td><td></td><td></td></tr></table>		Doc	WT	Doc	WT	03	PL										
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03	PL																		
5 Job Types Select one and provide specified associated information. Alteration Types 1, 2, and 3 require sections 5B, 9A-C and 10.																			
☐ Alteration Type 1 13-14, 18-20, PW-1A, PD-1 ☐ Partial Demolition ☐ Room Count / Dwelling Units ☐ Occupancy / Use ☐ Egress ☐ Alteration Type 1, OT: "No Work" ↳ 5B, 8C, 9A-C, 10, 13-14, 18-19, PW-1A		☐ Alteration Type 2 5A, 6A-D, 8A-B, 13, 14 (if enl.), 20 ☐ Alteration Type 3 5A, 6B-F, 8C ☐ Demolition 6B, 8D, 9A-B, 13-14, 21 ☐ New Building 5B-C, 6A-E, 8F, 9A-B, 10, 13-14, and 18-20, PW-1A, PD-1 ☐ Sign 5A, 6B-D, 9A, 22 ☐ Subdivision 5B, 9A ☐ Condominium ☐ Improved 17																	
Select all that apply (at least one), 6A-E, 8B-C		5A Directive 14 acceptance requested? ☐ Yes ☐ No 5B ☐ Check if filing includes lot merger / reapportionment 17 5C Total Construction Floor Area: sq. ft.																	
6 Work Types Select all that apply but no more than allowed by job and filing type. "OT" required on all NB and Alteration 1 initial applications.																			
6A ☐ BL - Boiler PW-1C ☐ IMH - Mechanical ☐ FA - Fire Alarm ☐ PL - Plumbing PW-1B ☐ FB - Fuel Burning PW-1C ☐ SD - Standpipe PW-1B ☐ FS - Fuel Storage PW-1C ☐ SP - Sprinkler PW-1B ☐ FP - Fire Suppression		6B ☐ EQ - Construction Equipment 15 6C ☐ OT/GC - General Construction 6D ☐ OT - Other provide description below: 6E ☐ CC - Curb Cut 16																	
		6F ☐ OT/ANT - Antennae ☐ OT/BPP - Builders Pvmt. Plan 8D ☐ OT/FPP - Fire Protection Plan ☐ OT/MAR - Marquee 8E, 25B																	
7 Plans Submitted Plans are required for most applications.																			
☐ NP - No Plans or ☐ AR - Architectural ☐ BP - BPP Checklist ☐ FO - Foundation ☐ ME - Mechanical ☐ OT - Other ☐ PL - Plumbing ☐ ST - Structural ☐ ZO - Zoning																			

8 Additional Information								
8A	WT	Cost	WT	Cost	WT	Cost	8B Enlargement proposed? <i>If yes, PD-1</i> ☐ No enlargement proposed ☐ Yes: ☐ Horizontal ☐ Vertical Additional area: _____ sq. ft. 8C Estimated Job Cost \$ _____	8D Street Frontage: _____ linear ft. 8E Height: _____ ft. Width: _____ ft. 8F Name of cluster or development below: _____ Project lead job no. _____

9 Additional Considerations, Limitations or Restrictions			
9A ☐ ☐ Filed to Comply with Local Law <i>If yes, 9G</i> ☐ ☐ Other, specify: _____ ☐ ☐ Restrictive Declaration / Easement <i>If yes, 9D</i> ☐ ☐ Zoning Exhibit (I, II, III, etc.) <i>If yes, 9E</i>	Yes No ☐ ☐ Landmark ☐ ☐ Legalization (1/1/89+) ☐ ☐ "Little E" Hazmat Site ☐ ☐ Unmapped Street	9D CRFN 9E CRFN 9F HRT Lead No. 9G Local Law No. _____ Year _____ 9H BSA Calendar No(s) _____ 9I CPC Calendar No(s) _____	9B ☐ ☐ Adult Establishment <i>If yes, PD-1 (except DM jobs)</i> ☐ ☐ Compensated Development (Inclusionary Housing) ☐ ☐ Low Income Housing (Inclusionary Housing) ☐ ☐ Single Room Occupancy (SRO) Multiple Dwelling 9C ☐ ☐ Old Code Review Requested ☐ ☐ Structural Stability affected by proposed work

10 ECCCNYS Compliance <i>Energy Conservation Construction Code of NYS</i>	10A Specific Reason for ECCCNYS Exemption
☐ To the best of my knowledge, belief and professional judgment, this application is in compliance with the ECCCNYS.* ☐ The work proposed in this application is exempt from the ECCCNYS because per Chapter 1 of the ECCCNYS it is: ☐ An alteration but not a substantial alteration ☐ Work in a historic building ☐ Work in an exempt building (<i>specify category/reasons in 10A</i>)	<i>*I understand the Department may require supporting analyses and documentation.</i>

11 Job Description	11A Related DOB Job Numbers

12 Zoning Lot Characteristics <i>A complete set of zoning information is required for all initial applications.</i>									
District(s) _____ Overlay(s) _____ Special Dist (s) _____	Map No. _____ Street legal width: _____ ft. Street Status: ☐ Public ☐ Private Zoning lot includes the following tax lots: <table style="width: 100%; border-collapse: collapse;"> <tr><td style="width: 25%; height: 20px;"></td><td style="width: 25%; height: 20px;"></td><td style="width: 25%; height: 20px;"></td><td style="width: 25%; height: 20px;"></td></tr> <tr><td style="height: 20px;"></td><td style="height: 20px;"></td><td style="height: 20px;"></td><td style="height: 20px;"></td></tr> </table>								

13 Building Characteristics <i>*For occupancy classification, use main use or dominant occupancy per BC §27-239</i>	14 Fill																														
<table style="width: 100%; border-collapse: collapse;"> <tr> <th style="width: 30%;"></th> <th style="width: 10%;">Existing</th> <th style="width: 10%;">Proposed</th> <th style="width: 30%;"></th> <th style="width: 10%;">Existing</th> <th style="width: 10%;">Proposed</th> </tr> <tr> <td>Occupancy Classification*</td> <td></td> <td></td> <td>Building Height</td> <td>ft.</td> <td>ft.</td> </tr> <tr> <td>Construction Classification</td> <td></td> <td></td> <td>Building Stories</td> <td></td> <td></td> </tr> <tr> <td>Multiple Dwelling Classification</td> <td></td> <td></td> <td>Dwelling Units</td> <td></td> <td></td> </tr> <tr> <td>Building Type: ☐ 1, 2, or 3 Family ☐ Other</td> <td></td> <td></td> <td>Zoning Floor Area</td> <td>sq. ft.</td> <td>sq. ft.</td> </tr> </table>		Existing	Proposed		Existing	Proposed	Occupancy Classification*			Building Height	ft.	ft.	Construction Classification			Building Stories			Multiple Dwelling Classification			Dwelling Units			Building Type: ☐ 1, 2, or 3 Family ☐ Other			Zoning Floor Area	sq. ft.	sq. ft.	Choose one: ☐ Not Applicable ☐ Off-Site ☐ On-Site ☐ Under 300 cu. yd.
	Existing	Proposed		Existing	Proposed																										
Occupancy Classification*			Building Height	ft.	ft.																										
Construction Classification			Building Stories																												
Multiple Dwelling Classification			Dwelling Units																												
Building Type: ☐ 1, 2, or 3 Family ☐ Other			Zoning Floor Area	sq. ft.	sq. ft.																										

15 Construction Equipment Choose one.

- ☐ Chute ☐ Sidewalk Shed Const. Material: _____
☐ Fence Size: _____ linear ft. BSA/MEA No. _____
☐ Supported Scaffold ☐ Other: _____

16 Curb Cut Description

Size of cut (with splays): _____ ft.
 Distance to nearest corner: _____ ft.
 on street: _____

17 Tax Lot Characteristics

Original tax lots being merged or reapportioned (if applicable):

--	--	--	--	--	--	--	--	--	--

Tentative tax lot numbers (new tax lots only):

--	--	--	--	--	--	--	--	--	--

18 Fire Protection Equipment

	Existing		Proposed	
	Yes	No	Yes	No
Fire Alarm	☐	☐	☐	☐
Fire Suppression	☐	☐	☐	☐
Sprinkler	☐	☐	☐	☐
Standpipe	☐	☐	☐	☐

19 Open Spaces

	Existing	Proposed		Existing	Proposed
Plaza Area	sq. ft.	sq. ft.	Arcade Area	sq. ft.	sq. ft.
Parking Area	sq. ft.	sq. ft.	Parking Spaces		
Loading Berths	sq. ft.	sq. ft.	Loading Berths		

20 Site Characteristics

Yes No
☐ ☐ Tidal / Fresh Water Wetlands
☐ ☐ Urban Renewal
☐ ☐ Fire District
☐ ☐ Flood Hazard Area

21 Demolition

Yes No

- ☐ ☐ Demolishing a secondary structure? If yes, specify structure being demolished: _____
☐ ☐ Will demolition use mechanical means? If yes, mechanical means will demolish: ☐ entire structure or ☐ part of structure

22 Signs

Purpose: Type: Estimated Cost: \$ _____
☐ Advertising ☐ Illuminated 22A Total Square Feet: _____
☐ Accessory ☐ Non-Illuminated Height above Curb: _____ ft. in.
 Location: Height above Roof: _____ ft. in.
☐ Ground ☐ Roof 22B ☐ Wall

Yes No
☐ ☐ Is sign inside building line? If no, sign projects by: _____ ft. in.
☐ ☐ Designed for changeable copy? If no, 22C
☐ ☐ Does an OAC have an interest in this sign or location? If yes, 22G
☐ ☐ Within 900' and within view of an arterial highway? If yes, 22D
☐ ☐ Within 200' and within view of a park 1/2 acre or more? If yes, 22E

If answer is "yes" to either of the above two questions and this is an advertising sign, OAC sign number is required in section 22F

22A Illuminated type: ☐ Direct ☐ Flashing ☐ Indirect

Yes No

☐ ☐ If sign projects beyond building line, is owner billed for annual permit? If no, specify in 25B

22B ☐ ☐ Is roof sign tight, closed or solid?

22C Sign wording. If extensive, provide only key wording.

22D Distance from Arterial Highway: _____ ft.

22E Distance from Park 1/2 acre or more: _____ ft.

22F OAC Sign Number: _____

22G OAC Registration Number: _____

23 Comments Additional comments may be placed on an AI-1 form.

Revised changes on Schedule (B)

24 Applicant's Statements and Signatures *Required for all applications.*

Falsification of any statement is a misdemeanor under § 26-124 of the NYC 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 prepared or supervised the preparation of the plans and specifications herewith submitted and to best of my knowledge and belief, the plans and work shown thereon comply with the provisions of the NYC Administrative Code and other applicable laws and regulations,
- ☐ except as set forth in the accompanying documents.
- I acknowledge that I have read and complied with all instructions pertaining to this application and supplementary schedules submitted.
- **Cluster Development Statement** (if applicable)
I hereby state that all specifications relating to this job are identical to those previously filed under the group lead job number, except as specified herein.

Name (please print)

Jung Y Shin P.E. 05/18/08

Signature

Date

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

25 Owner's Statements and Signatures *Fax and E-Mail are optional.*

Falsification of any statement is a misdemeanor under § 26-124 of the NYC 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 have authorized the applicant to file this application for the work specified herein and all future amendments.
- I will not knowingly authorize any work that is not in compliance with the Energy Conservation Construction Code of NYS (ECCCNY).

Yes No

- ☐ ☐ **Energy Conservation Construction Code of NYS**
Does the proposed work constitute a replacement of 50% or more of a system or subsystem at this location in any consecutive 12 month period?

- ☐ ☐ **Fee Deferred Request Statement**
I hereby request a fee deferral for the work proposed on this application and understand that **all fees must be paid before issuance of any Certificate of Occupancy or job sign off.**

- ☐ ☐ **Fee Exemption Request Statement**
In accordance with § 26-210 of the NYC Administrative Code I hereby state that the proposed work involves a building or property used exclusively for the purposes indicated in such section.

- ☐ ☐ **Owner's Certification Regarding Occupied Housing**
The building to be altered, or the site of the new building, or the dwelling to be demolished or removed, as the case may be, contains occupied housing accommodations subject to rent control under Chapter 3 of Title 26 of the NYC Administrative Code.

- ☐ ☐ The owner has notified the Division of Housing and Community Renewal (DHCR) of his intention to file such plans/apply for such permit and has complied with all requirements imposed by the regulations of such agency as preconditions for such [filing/application].

► If yes, provide date DHCR notified: _____

- ☐ ☐ **Owner's Certification for Adult Establishments**
I authorize and intend to create, enlarge, or extend an establishment with adult activity and/or adult material as defined in ZR 12-10 "adult establishment" or related sign at the subject premises.

Owner type: ☐ Condo/Co-Op } 25A ☐ Partnership ☐ HHC ☐ NYCHA
☐ Corporation ☐ DCAS ☐ HPD ☐ NYS
☐ Individual ☐ DOE ☐ Other Government

Is the owner a non-profit organization? ☐ Yes ☐ No

Name (please print): _____

Relationship to Owner: _____

Business Name/Agency: _____

Street Address: _____

City: _____

State: New York Zip: _____

Telephone Number: _____

Fax: _____

E-Mail Address: _____

Signature and Date ► _____

25A Condo/Co-Op or Corporation Second Officer

Name (please print): _____

Title: _____

Street Address: _____

City: _____

State: New York Zip: _____

Telephone Number: _____

Fax: _____

E-Mail Address: _____

25B Lessee Responsible for Annual Sign or Marquee Permit

Name (please print): _____

Relationship to Owner: _____

Business Name/Agency: _____

Street Address: _____

City: _____

State: New York Zip: _____

Telephone Number: _____

Fax: _____

E-Mail Address: _____

Internal Use Only

Pre-Filer Name: _____ Date: _____

Pre-Filer Signature: _____

Cost Estimate (if different from applicant): \$ _____

Amount due: \$ _____