



707391
OP98 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. 410093848 **Document No.** 01 **Permit Type (check one only):** ☒ PL ☐ SP ☐ SD ☐ ARA
Borough QUEENS **Block** 11325 **Lot** 6 **House No** 224-01 **Street Name** LINDEN BLVD

2 Permit Applicant E-Mail: Business Phone (718) 725-9622 Fax No. (718) 297-1074
Last Name DIAZ First Name DARIO M.I. Business Name FIRST CHOICE PLUMBING AND HEATING
Address 135-24 HILLSIDE AVE City RICHMOND HILL State NY ZIP 11418 License No. 1210 ☒ LMP ☐ LFSC

3 Inspection Data Inspection/test scheduled for: 01/26/09 (mmddyy) Time: ☐ 8:00am ☐ 8:30 ☐ 9:00 ☐ 9:30 ☐ 10:00 ☐ 10:30 ☐ 11:00 ☐ 11:30 ☐ 12:30pm
Apts/Floors: CEL-1ST FL ☐ 1:00pm ☒ 1:30 ☐ 2:00 ☐ 2:30 ☐ 3:00 Meeting Location: INFRONT OF BUILDING

4 Notice/Result (Select one: PL, SP, SD only)

Systems: Inspections	Plumbing (PL)						Systems: Inspections	Sprinkler (SP)						Systems: Inspections	Standpipe (SD)					
	Underground		Roughing		Finish			Underground		Roughing		Finish			Underground		Roughing		Finish	
	Notice	Results	Notice	Results	Notice	Results		Notice	Results	Notice	Results	Notice	Results		Notice	Results	Notice	Results		
Sprinkler - PL							Sprinkler - SP						Fire Standpipe - SD							
Water/Sanitary - PL																				
Storm - PL																				
Gas - PL																				
Medical Gas - PL																				
Tests							Tests						Tests							
Hydrostatic - PL							Hydrostatic - SP						Hydrostatic - SD							
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: 6 Location(s) (Floor/Apt. for this inspection): CEL, 3 EXISTING, 3 NEW No. of Risers: 6 Location(s) (Floor/Apt. for this inspection): CEL TO 1ST FL
Gas usage: ☐ Heat ☐ Boiler Pilot for oil burner ☐ Water Heater ☐ Dryer
☐ Cooking ☐ Tankless Coil ☐ HVAC ☐ Fire Place ☒ Other (describe): FURNACE

6 Certifying Applicant E-Mail: Business Phone (718) 725-9622 Fax No. (718) 297-1074
Last Name DIAZ First Name DARIO M.I. Business Name FIRST CHOICE PLUMBING AND HEATING
Address 135-24 HILLSIDE AVE City RICHMOND HILL State NY ZIP 11418 License No. 1210 ☒ 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 statement is a misdemeanor under §26-124 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 DARIO S DIAZ	SEAL	Print Name of Permit Applicant or Alternative licensee from same firm (LMP/LFSC) DARIO S. DIAZ	SEAL
Signature		Signature	
Date 01-27-09		Date 01-26-09	

FOR DOB USE ONLY
Reviewed by: Date: 1/27 Entered by: R.S.O. by: S/O by: