



PW-1: Plan / Work Application

Must be typewritten.

DEPT. OF BLDGS.	410120872	Job Number
SC080127042		Scan Code

1 Location Information Required for all applications.

House No(s) 154-46	Street Name POWELLS COVE BLVD			
Borough QUEENS	Block 04544	Lot 00058	BIN 4103287	C.B. No. 407
Work on Floor(s) OSP	Apt. / Condo No(s)			

2 Applicant Information Required for all applications. Business Fax, Mobile Telephone, and E-Mail are optional.

Last Name LONGO	First Name GINO	Middle Initial O		
Business Name GINO LONGO	Business Telephone (718) 445-5663			
Business Address 129-20 20AVE, BLDG	Business Fax (718) 445-7506			
City COLLEGE POINT	State NY	Zip 11356	Mobile Telephone	
E-Mail LONGOAI@AOL.COM	License Number 024104			
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 ANGLADA/VENT	First Name KELLY/LEIDY	Middle Initial	
Business Name GINO LONGO ARCHITECT	Business Telephone (718) 445-5663		
Business Address 129-20 20 AVE	Business Fax (718) 445-7506		
City COLLEGE POINT	State NY	Zip 11356	Mobile Telephone
E-Mail LONGOAI@AOL.COM	Registration Number A88105		

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	☐ Changes Prior to Approval 23-24	☐ New Applicant 4A, 24-25
☐ Prof. Certify Job/Plans PC-1, POC-1	☐ Add Work Types 6-7, 8A*, 11	☐ Reinstatement 23-25
☐ Self Certify Objections Only AI-1	☐ Amend Existing Filing 4A	☐ Withdrawal 24-25
☐ PAA 4A, 23-24	☐ Entire Job	
PAA effect fees? ☐ Yes ☐ No	☐ Specified in 4A	

4A Doc. # / Work Type

Doc	WT	Doc	WT

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	☐ Alteration Type 2 5A, 6A-D, 8A-B, 13, 14 (if enl.), 20 5A	Directive 14 acceptance requested? ☒ Yes ☐ No
☐ Partial Demolition	☒ Alteration Type 3 5A, 6B-F, 8C	5B ☐ Check if filing includes lot merger / reapportionment 17
☐ Room Count / Dwelling Units	☐ Demolition 6B, 8D, 9A-B, 13-14, 21	5C Total Construction Floor Area: sq. ft.
☐ Occupancy / Use	☐ New Building 5B-C, 6A-E, 8F, 9A-B, 10, 13-14, and 18-20, PW-1A, PD-1	
☐ Egress	☐ Sign 5A, 6B-D, 9A, 22	
☐ Alteration Type 1, OT: "No Work"	☐ Subdivision 5B, 9A	
↳ 5B, 8C, 9A-C, 10, 13-14, 18-19, PW-1A	☐ Condominium ☐ Improved 17	

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	☐ MH - Mechanical	6B ☐ EQ - Construction Equipment 15	6F ☐ OT/ANT - Antennae
☐ FA - Fire Alarm	☐ PL - Plumbing PW-1B	6C ☒ OT/GC - General Construction	☐ OT/BPP - Builders Pvmt. Plan 8D
☐ FB - Fuel Burning PW-1C	☐ SD - Standpipe PW-1B	6D ☐ OT - Other provide description below:	☐ OT/FPP - Fire Protection Plan
☐ FS - Fuel Storage PW-1C	☐ SP - Sprinkler PW-1B	6E ☐ CC - Curb Cut 16	☐ OT/MAR - Marquee 8E, 25B
☐ FP - Fire Suppression			

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

DOB Reference Number: T00000047853-000343

User Ref ID: 18-027

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.	8D Street Frontage: linear ft.	8E Height: ft. Width: ft.
								8F Name of cluster or development below:	
							8C Estimated Job Cost \$ 20	Project lead job no.	

9 Additional Considerations, Limitations or Restrictions											
Yes No 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.	
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					☐ ☒ Included in LMCCC ☐ ☒ Infill Zoning ☐ ☒ Loft Board ☐ ☒ Quality Housing ☐ ☒ Site Safety Job					9G Local Law No. Year _____	
9C ☐ ☒ Old Code Review Requested ☐ ☒ Structural Stability affected by proposed work										9H BSA Calendar No(s) _____	
										9I CPC Calendar No(s) _____	

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
PROPOSED 6'-0" HIGH MASONARY FENCE ALONG EAST PROPERTY LINE.	

12 Zoning Lot Characteristics <i>A complete set of zoning information is required for all initial applications.</i>			
District(s) R2	Map No. 7D	Zoning lot includes the following tax lots:	
Overlay(s)	Street legal width: 80 ft.		
Special Dist.(s)	Street Status: ☒ Public ☐ Private		

13 Building Characteristics <i>*For occupancy classification, use main use or dominant occupancy per BC §27-239</i>				14 Fill	
	Existing	Proposed		Existing	Proposed
Occupancy Classification*	J-3		Building Height	12 ft.	ft.
Construction Classification	2-D		Building Stories	2	
Multiple Dwelling Classification			Dwelling Units	1	
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.	

15 Construction Equipment <i>Choose one.</i> ☐ 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): <table border="1" style="width: 100%; height: 20px; border-collapse: collapse;"></table> Tentative tax lot numbers (new tax lots only): <table border="1" style="width: 100%; height: 20px; border-collapse: collapse;"></table>	18 Fire Protection Equipment <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th></th> <th colspan="2">Existing</th> <th colspan="2">Proposed</th> </tr> <tr> <th></th> <th>Yes</th> <th>No</th> <th>Yes</th> <th>No</th> </tr> </thead> <tbody> <tr> <td>Fire Alarm</td> <td>☐</td> <td>☐</td> <td>☐</td> <td>☐</td> </tr> <tr> <td>Fire Suppression</td> <td>☐</td> <td>☐</td> <td>☐</td> <td>☐</td> </tr> <tr> <td>Sprinkler</td> <td>☐</td> <td>☐</td> <td>☐</td> <td>☐</td> </tr> <tr> <td>Standpipe</td> <td>☐</td> <td>☐</td> <td>☐</td> <td>☐</td> </tr> </tbody> </table>		Existing		Proposed			Yes	No	Yes	No	Fire Alarm	☐	☐	☐	☐	Fire Suppression	☐	☐	☐	☐	Sprinkler	☐	☐	☐	☐	Standpipe	☐	☐	☐	☐
	Existing		Proposed																												
	Yes	No	Yes	No																											
Fire Alarm	☐	☐	☐	☐																											
Fire Suppression	☐	☐	☐	☐																											
Sprinkler	☐	☐	☐	☐																											
Standpipe	☐	☐	☐	☐																											
19 Open Spaces <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th></th> <th>Existing</th> <th>Proposed</th> <th></th> <th>Existing</th> <th>Proposed</th> </tr> <tr> <th></th> <th>sq. ft.</th> <th>sq. ft.</th> <th></th> <th>sq. ft.</th> <th>sq. ft.</th> </tr> </thead> <tbody> <tr> <td>Plaza Area</td> <td></td> <td></td> <td>Arcade Area</td> <td></td> <td></td> </tr> <tr> <td>Parking Area</td> <td></td> <td></td> <td>Parking Spaces</td> <td></td> <td></td> </tr> <tr> <td>Loading Berths</td> <td></td> <td></td> <td>Loading Berths</td> <td></td> <td></td> </tr> </tbody> </table>		Existing	Proposed		Existing	Proposed		sq. ft.	sq. ft.		sq. ft.	sq. ft.	Plaza Area			Arcade Area			Parking Area			Parking Spaces			Loading Berths			Loading Berths			20 Site Characteristics Yes No ☐ ☒ Tidal / Fresh Water Wetlands ☐ ☒ Urban Renewal ☐ ☒ Fire District ☐ ☒ Flood Hazard Area
	Existing	Proposed		Existing	Proposed																										
	sq. ft.	sq. ft.		sq. ft.	sq. ft.																										
Plaza Area			Arcade Area																												
Parking Area			Parking Spaces																												
Loading Berths			Loading Berths																												
21 Demolition Yes No ☐ ☐ Demolishing a secondary structure? <i>If yes, specify structure being demolished:</i> _____ ☐ ☐ Will demolition use mechanical means? <i>If yes, mechanical means will demolish:</i> ☐ entire structure or ☐ part of structure																															
22 Signs <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 30%;"> Purpose: ☐ Advertising ☐ Accessory Location: ☐ Ground ☐ Roof 22B ☐ Wall </td> <td style="width: 30%;"> Type: ☐ Illuminated 22A ☐ Non-Illuminated </td> <td style="width: 20%;"> Estimated Cost: \$ _____ Total Square Feet: _____ Height above Curb: _____ ft. in. Height above Roof: _____ ft. in. </td> <td style="width: 20%;"> 22A Illuminated type: ☐ Direct ☐ Flashing ☐ Indirect <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th>Yes</th> <th>No</th> </tr> <tr> <td>☐</td> <td>☐</td> </tr> </table> If sign projects beyond building line, is owner billed for annual permit? <i>If no, specify in 25B</i> 22B ☐ ☐ Is roof sign tight, closed or solid? 22C Sign wording. <i>If extensive, provide only key wording.</i> 22D Distance from Arterial Highway: _____ ft. 22E Distance from Park 1/2 acre or more: _____ ft. 22F OAC Sign Number: _____ 22G OAC Registration Number: _____ </td> </tr> </table> Yes No ☐ ☐ Is sign inside building line? <i>If no, sign projects by:</i> _____ ft. in. ☐ ☐ Designed for changeable copy? <i>If no, 22C</i> ☐ ☐ Does an OAC have an interest in this sign or location? <i>If yes, 22G</i> ☐ ☐ Within 900' and within view of an arterial highway? <i>If yes, 22D</i> ☐ ☐ Within 200' and within view of a park 1/2 acre or more? <i>If yes, 22E</i> → <i>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</i>		Purpose: ☐ Advertising ☐ Accessory Location: ☐ Ground ☐ Roof 22B ☐ Wall	Type: ☐ Illuminated 22A ☐ Non-Illuminated	Estimated Cost: \$ _____ Total Square Feet: _____ Height above Curb: _____ ft. in. Height above Roof: _____ ft. in.	22A Illuminated type: ☐ Direct ☐ Flashing ☐ Indirect <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th>Yes</th> <th>No</th> </tr> <tr> <td>☐</td> <td>☐</td> </tr> </table> If sign projects beyond building line, is owner billed for annual permit? <i>If no, specify in 25B</i> 22B ☐ ☐ Is roof sign tight, closed or solid? 22C Sign wording. <i>If extensive, provide only key wording.</i> 22D Distance from Arterial Highway: _____ ft. 22E Distance from Park 1/2 acre or more: _____ ft. 22F OAC Sign Number: _____ 22G OAC Registration Number: _____	Yes	No	☐	☐																						
Purpose: ☐ Advertising ☐ Accessory Location: ☐ Ground ☐ Roof 22B ☐ Wall	Type: ☐ Illuminated 22A ☐ Non-Illuminated	Estimated Cost: \$ _____ Total Square Feet: _____ Height above Curb: _____ ft. in. Height above Roof: _____ ft. in.	22A Illuminated type: ☐ Direct ☐ Flashing ☐ Indirect <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th>Yes</th> <th>No</th> </tr> <tr> <td>☐</td> <td>☐</td> </tr> </table> If sign projects beyond building line, is owner billed for annual permit? <i>If no, specify in 25B</i> 22B ☐ ☐ Is roof sign tight, closed or solid? 22C Sign wording. <i>If extensive, provide only key wording.</i> 22D Distance from Arterial Highway: _____ ft. 22E Distance from Park 1/2 acre or more: _____ ft. 22F OAC Sign Number: _____ 22G OAC Registration Number: _____	Yes	No	☐	☐																								
Yes	No																														
☐	☐																														
23 Comments <i>Additional comments may be placed on an AI-1 form.</i>																															

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)

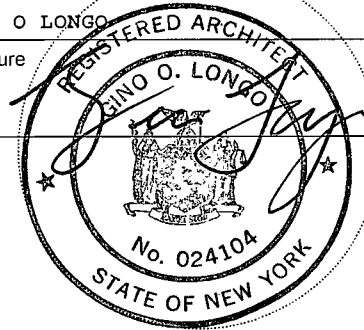
I hereby state that all specifications relating to this job are identical to those previously filed under the group lead job number, except as specified herein.

Name (please print)

GINO O LONGO

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 (ECCCNYS).

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.

Internal Use Only

Pre-Filer Name: _____

Pre-Filer Signature: _____

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

Amount due: \$ 100

Date

JUN 06 2008

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): ENES BALSAMO

Relationship to Owner: OWNER

Business Name/Agency: N/A

Street Address: 154-46 POWELLS COVE BLVD

City: QUEENS

State: NY Zip: 11357

Telephone Number: (718) 445-5663

Fax: _____

E-Mail Address: _____

Signature and Date

Enes Balsamo 6/5/08

25A Condo/Co-Op or Corporation Second Officer

Name (please print): _____

Title: _____

Street Address: _____

City: _____

State: _____

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: _____

Zip: _____

Telephone Number: _____

Fax: _____

E-Mail Address: _____

DOB Reference Number: T00000047853

User Ref ID: 18-027

2/08