



PW7: Certificate of Occupancy /
Letter of Completion Folder
Review Request

Must be typewritten.

DEPT.BLDGS	410220755	Job Number
SC090318900		Scan Code

Affix BIS job number label here.

1 Location Information

House No(s)	75-11	Street Name	186 ST	Work Proposed on Floor No(s)	CEL,1,2,ATT
Borough	QUEENS	Block	7203	Lot	74
BIN	4155013	CB No.	408		

2 Requestor Information

Individuals Relationship to Job (example: applicant, owner, filing representative)

Last Name	BLOK	First Name	SAM	Middle Initial	
Business Name	BLOK ASSOCIATES	Business Telephone	718-275-9666		
Business Address	66-70 SELFRIDGE STREET	Business Fax	718-275-8505		
City	QUEENS	State	NY	Zip	11375
E-Mail				Mobile Telephone	
			License Number	B43769	

3 Type of Request Choose one.

- ☐ Letter of Completion (Directive 14 or Non-Directive 14)
- ☐ TCO - Temporary Certificate of Occupancy (Borough Commissioner's Office approval may be required. All requirements must be fulfilled before a TCO will be issued)
- ☐ Renewal of TCO - Temporary Certificate of Occupancy (Borough Commissioner's Office approval may be required. All requirements must be fulfilled before a TCO will be issued)
- ☒ Final Certificate of Occupancy

4 Comments If additional space is required, write "see AI-1" here and submit a completed AI-1 form with this request.

5 Statements and Signatures

By signing below, I understand that all the information provided is true to the best of my knowledge and that falsification of any statement is a misdemeanor under § 26-124 of the NYC Administrative Building 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.

Requestor Signature

[Signature]

Date

10-19-10

Borough Commissioner's Office TCO Authorization Do not write in this section.

Comments:

Authorized Name (please print)

☐ Approved

☐ Disapproved

Authorized Signature (if approved only)

Date

Disapproval Reasons Review request cannot be processed for the following reasons:

- ☐ Fees unpaid ☐ Open ECB/DOB Violation(s) ☐ Incomplete PAA ☐ Audit Conditions Pending / Job on Hold
- ☐ Missing Inspection Sign-off(s): ☐ Construction ☐ Plumbing ☐ Electrical ☐ Other: _____
- ☐ Missing Required Item(s): _____ ☐ TR-1 Error(s): _____
- ☐ Form(s) missing/incomplete: Form(s) _____ Section(s)/Reason(s) _____
- ☐ Other: _____