



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.



918976 A2

1 Permit No. 420208992 Document No. 01 Permit Type (check one only): ☒ PL ☐ SP ☐ SD ☐ LAA

Borough Queens Block 2967 Lot 39 House No 6272 Street Name 81 Street

2 Permit Applicant E-Mail: Business Phone (800) 413-5601 Fax No. (718) 641-4626

Last Name LIPTAK First Name DAVID M.I. Business Name NEW YORK PLBG & HTG CORP

Address 5772 MOSHOLU AVE City BRONX State NY ZIP 10471 License No. 1926 ☒ LMP ☐ LFSC

3 Inspection Data Inspection/test scheduled for: 4/7/11 (m/d/y) Time ☒ 8:00am ☐ 8:30 ☐ 9:00 ☐ 9:30 ☐ 10:00 ☐ 10:30 ☐ 11:00 ☐ 11:30 ☐ 12:30pm

Apts and Floors: 5th Floor ☐ 100pm ☐ 1:30 ☐ 2:00 ☐ 2:30 ☐ 3:00 Meeting Location: Fob

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	Pass	Fail	Pass	Fail	Pass	Fail	Pass	Fail	Notice	Results	Pass	Fail	Pass	Fail	Pass	Fail	Notice	Results	Pass	Fail	Pass	Fail	Notice	Results	Pass	Fail	Pass	Fail	Pass	Fail				
Sprinkler - PL										Sprinkler - SP								Fire Standpipe - SD																	
Water/Sanitary - PL																																			
Storm - PL																																			
Gas - PL																																			
Medical Gas - PL																																			
Tests	Notice	Results	Pass	Fail						Tests	Notice	Results	Pass	Fail						Tests	Notice	Results	Pass	Fail											
Hydrostatic - PL										Hydrostatic - SP										Hydrostatic - SD															
Water - Sanitary										Dry Pipe Valve										Fire Pump															
Pressure - Water										Booster Pump																									
Water Storm																																			
Gas																																			
Medical Gas																																			

Gas Tested at psi
☐ 3 psi ☐ 50 psi
☐ 90 psi ☐ 100 psi

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. for this inspection): No. of Risers: Location(s) (Floor/Apt. for this inspection):

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 (800) 413-5601 Fax No. (718) 641-4626

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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 §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 <u>DAVID LIPTAK</u>	SEAL	Print Name of Permit Applicant or Alternative licensee from same firm (LMP/LFSC) <u>DAVID LIPTAK</u>	SEAL
Signature		Signature	
Date <u>4-7-11</u>		Date <u>4-7-11</u>	

FOR DOB USE ONLY

Reviewed by: MT, Date: 4/11, Entered by: MT, R.S.O. by: D. G., S/O by: D. C.

Revised 09-23-2009 OP-98

4/19/11