



PW1B: Schedule B
Plumbing, Sprinkler, Standpipe
Must be typewritten.



Page 1 of 2

1 Location Information Required for all applications.

House No(s) 42-18 Street Name ASTORIA BOULEVARD
Borough QUEENS Block 688 Lot 22 BIN 4011569 CB No. 401
Work on Floor(s) CEL

2 Work Type Information Required for all applications. Select all that apply.

Filing components/fixtures? ☒ Yes ☐ No

☒ Plumbing - PL ☐ Sprinkler - SP ☐ Standpipe - SD
Cost: \$ 4000 Cost: \$ Cost: \$
Total sprinkler heads in 8B: 0 Total sprinkler heads in 8A:
To remove violation(s): 1) To remove violation(s): 1) To remove violation(s): 1)
2) 2) 2)

3 Drainage Information

Storm Drainage Discharges into: select one. Sanitary Drainage Discharges into: select one.
☐ Storm Sewer ☐ Combined Sewer ☐ Private Disposal ☐ Sanitary Sewer ☐ Combined Sewer ☐ Private Disposal

4 Sewer Work Select all that apply.

☐ SD-1, SD-2, SD-3 ☐ Site Connection ☐ Septic Tank

5 Cap / Remove / Replace / Relocate Components If this section is completed, components are required.

☐ Cap or Remove Describe all: ☐ Replace or Relocate Describe all:

6 Gas and Gas Equipment Data

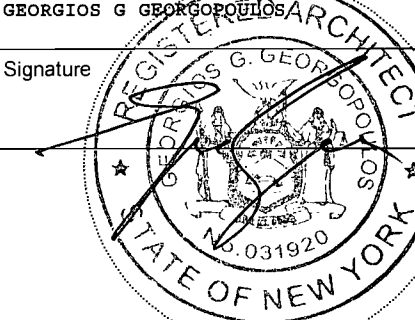
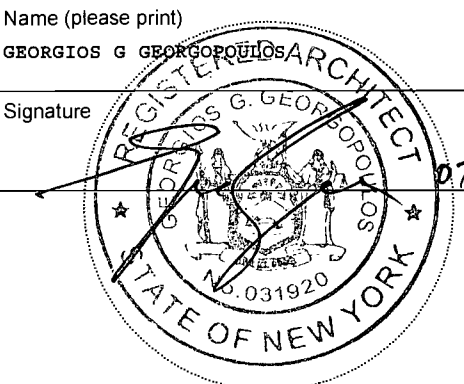
Gas piping involved? ☒ Yes ☐ No Describe gas fired equipment:

1-STEAM BOILER GAS FIRED WEILMCLAIN MODEL # EG45 & MEA # 159-75-E AND 1-HOT WATER HEATER 75 GAL. , A. O. SMITH, MODEL # CG75 & MEA # 346-06-E

Total Location(s), floor/apt. - list all that apply:
Meters total: 3 2-EXISTING AND 1-NEW
Risers total: 3 2-EXISTING AT CELLAR , FIRST &
SECOND FL. & 1-NEW AT CELLAR
Gas Usage: ☒ Heat ☐ Dryer ☒ Water Heater ☐ Tankless Coil
☐ HVAC ☒ Cooking ☐ Fire Place ☐ Boiler Pilot for Oil Burner
☐ Other:

7 Applicant's Statements and Signatures Required for all applications.

Falsification of any statement is a misdemeanor 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.

Name (please print) GEORGIOS G. GEORGIOPOULOS	
Signature 	Date 07/02/12
P.E. / R.A. Seal (apply seal, then sign and date over seal) 	

DOB Reference Number: T00000625682-000179
User Ref ID: ALMIROUDI

8 Equipment Information *For new work only.*

System (work type)	Components (Piping / Equipment / Fixture)	Floors indicate no. of proposed components and/or "X" for piping															
		CEL															
8A Sprinkler (SP) <i>Must not be off domestic.</i>	P* Sprinkler Piping - Dry																
	P* Sprinkler Piping - Wet																
	E* Dry Pipe Valve																
	E* Booster Pump - SP																
	F Floor/Riser Control Valve																
	F Siamese FDC																
	F Sprinkler Heads																
	F Sprinkler Heads over 999																
8B Sprinkler (PL)**	F Sprinkler Heads (thirty or less)																
8C Fire Standpipe (SD)	P* Standpipe Piping																
	E* Fire Pump																
	E* Special Service Fire Pump																
	F Floor/Riser Control Valve																
	F Hose Cabinet/Rack/Valve																
	F Siamese FDC																
8D Water/San. (PL)	P* Sanitary Piping (Soil & Venting)																
	P* Water Piping																
	P Water Service Piping																
	E Sewer Ejection Pump																
	F Bathtubs/Whirlpools/Hot Tub/Sauna																
	F Bidet																
	F Chiller/Cooler																
	F Dishwasher																
	F Domestic Water Tank/Pump																
	F Drinking Fountain																
	F Floor Drain																
	F Grease Trap/Oil Separator																
	F Ice Maker																
	F In-sink Garbage Disposal																
	F Lavatory (Common Wash Basin)																
	F Laundry - Standpipe																
	F Pool																
	F RPZ/Backflow Preventer (Primary)																
	F RPZ/Backflow Preventer (Secondary)																
	F Sink - Non Residential																
	F Sink - Residential																
	F Stall Shower																
	F Tankless Coil																
	F Toilet (Water Closet)																
	F Urinal																
	F Washing Machine																
	F Water Heater (Non-Gas)																
8E Storm (PL)	P* Storm Drainage Piping																
	E Sump Pump																
	F Area/Yard Drain																
	F Detention Tank																
	F Dry Well/Retention																
	F Roof Drain																
8F Gas (PL)	P* Gas Piping	1															
	E Emergency Shut-off Valve																
	E* Fire Suppression Shut-off Valve																
	E Gas Booster Pump																
	F Cooking Equipment (non-residential)																
	F Cooking Equipment (residential)																
	F Gas Boiler (<350K, non-comm.<6 family)	1															
	F Gas Burner																
	F Gas Dryer																
	F Gas Furnace																
	F Gas Meter	1															
	F Gas Water Heater	1															
8G Medical (PL)	P* Medical Gas Piping																
	E Assorted Medical Equipment																

** Must be off domestic.

* Indicates test *may* be required.

DOB Reference Number: T00000625682-000179

User Ref ID: ALMIROUDI

7/08