

ZD1

Sheet _____ of _____

1	Applicant Information <i>Required for all applications.</i>					
	Last Name OKTAW EC		First Name WOJCIECH		Middle initial	
	Business Name PATH ARCHITECTURE PC		Business Telephone 718-381-5835			
	Business Address 59-20 69TH AVENUE				Business Fax	
	City RIDGEWOOD		State NY	Zip 11385	Mobile Telephone	
	E-Mail				License Number 025217	
2	Additional Zoning Characteristics <i>Required as applicable.</i>					
	Dwelling Units 2	Parking area 178	sq. ft.	Parking Spaces: Total 1	Enclosed 1	
3	BSA and/or CPC Approval for Subject Application <i>Required as applicable.</i>					

Board of Standards & Appeals (BSA)

☐ Variance	Cal. No. _____	Authorizing Zoning Section <u>72-21</u>
☐ Special Permit	Cal. No. _____	Authorizing Zoning Section _____
☐ General City Law Waiver	Cal. No. _____	General City Law Section _____
☐ Other	Cal. No. _____	

City Planning Commission (CPC)

☐ Special Permit	ULURP No. _____	Authorizing Zoning Section _____
☐ Authorization	App. No. _____	Authorizing Zoning Section _____
☐ Certification	App. No. _____	Authorizing Zoning Section _____
☐ Other	App. No. _____	

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