



Equipment Use Application/Per

Please File 3 Copies
Application Must Be Typewritten

DEPT. BLDGS	420617256	Job Number
SC443357331		Scan Code

1 Filing Status

Job Number 420617256

2 Type of Equipment

Heating	Ventilation	☒ Air Conditioning	Refrigation
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3 Location

Borough Queens	Block 461	Lot(s) 16	BIN
House No.(s) 42-11	Street Name: 9th Street	Apt/Condo No(s).	
Special Place Name	Floor(s) roof		

4 Applicant

Last Name Wald	First Name Stanley	M.I.
Business Name Stanley Wald, P.E.	Business Phone (718) 763-2596	
Address 2316 East 64th Street	City Brooklyn	State NY Zip 11234
☒ P.E.	☐ R.A.	Other: Lic. No. 36068

5 Equipment Specifications

Item - Manufacturer/Trade Name	Floor	No. of Items	MEA Number or Serial Number	Capacity: BTU's/CFM
ICP A.C. #RJS120	roof	1	493-91E	114,000 BTU

6 Statements and Signatures

The owner certifies that he authorizes the applicant to perform the proposed work in accordance with plans and specifications approved under said application.

Falsification of any statement is a misdemeanor under Section 26-124 of the 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 both.

Applicant Name Stanley Wald

Title P.E.

Signature

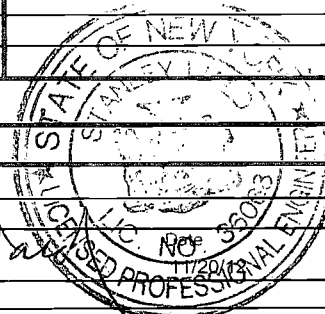
Owner Name Edward Escobar

Title Pres.

Signature

Date

11/20/12



Approvals

Examined and Recommended for Approval	Approved
Examiner Name	Borough Commissioner Signature Date
Signature Date	

Sign Off

I hereby certify that the work indicated above has been done in a manner required by the Rules and Regulations of the Department of Buildings except where reported adversely.

Name

Inspector's Signature

Date Signed Off