



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.



1 Permit No. 420865601		Document No. 01		Permit Type (check one only): ☒ PL ☐ SP ☐ SD ☐ LAA	
Borough QUEENS		Block 5065 Lot 3 House No 42-23		Street Name HAIGHT STREET	
2 Permit Applicant E-Mail: Triboroplumbing@Verizon.net				Business Phone (718) 345-7270 Fax No. (718) 345-9303	
Last Name Passalacqua		First Name michael		M.I. J Business Name triboro plumbing and heating	
Address 777 E. 96 street		City brooklyn		State NY ZIP 11236 License No. 1943 ☒ LMP ☐ LFSC	
3 Inspection Data Inspection/test scheduled for: 07/31/13 (mm/dd/yy) Time: ☒ 8:00am ☐ 8:30 ☐ 9:00 ☐ 9:30 ☐ 10:00 ☐ 10:30 ☐ 11:00 ☐ 11:30 ☐ 12:30pm					
Apts and Floors: OSP ☐ 100pm ☐ 1:30 ☐ 2:00 ☐ 2:30 ☐ 3:00 Meeting Location: front of building					

4 Notice/Result (Select one: PL, SP, SD only)																								
Systems: Inspections		Plumbing (PL)						Systems: Inspections		Sprinkler (SP)						Systems: Inspections		Standpipe (SD)						
		Underground		Roughing		Finish				Underground		Roughing		Finish				Underground		Roughing		Finish		
		Notice	Results	Notice	Results	Notice	Results			Notice	Results	Notice	Results	Notice	Results			Notice	Results	Notice	Results	Notice	Results	
			Pass	Fail		Pass	Fail				Pass	Fail		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						Tests		Notice	Results						Tests		Notice	Results			
			Pass	Fail								Pass	Fail								Pass	Fail		
Hydrostatic - PL									Hydrostatic - SP									Hydrostatic - SD						
Water - Sanitary									Dry Pipe Valve									Fire Pump						
Pressure - Water									Booster Pump															
Water Storm																								
Gas																								
Medical Gas																								

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.):		No. of Risers: Location(s) (Floor/Apt.):		☐ Welded Gas Piping	
Gas usage: ☐ Heat ☐ Boiler Pilot for oil burner ☐ Water Heater ☐ Dryer					
☐ Cooking ☐ Tankless Coil ☐ HVAC ☐ Fire Place ☐ Other (describe):					

6 Certifying Applicant E-Mail: Triboroplumbing@Verizon.net		Business Phone (718) 345-7270		Fax No. (718) 345-9303	
Last Name Passalacqua		First Name Michael		M.I. J Business Name Triboro Plumbing and heating corp	
Address 777 E. 96 street		City Brooklyn		State NY ZIP 11236 License No. 1943 ☒ LMP ☐ LFSC ☐ P.E. ☐ R.A.	

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 statements 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 Passalacqua J. Michael		SEAL	
Signature 		Signature 	
Date 08/02/13		Date 08/02/13	

FOR DOB USE ONLY			
Reviewed by:		S/O by:	
Date: 8/2/13		R.S.O. by:	