



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.

DEPT BLDGS Job No. 421040821



Scan Code ESHS5191460

1 Permit No. <u>421040821</u>	Document No. <u>01</u>	Permit Type (check one only): ☒ PL ☐ SP ☐ SD ☐ LAA
Borough <u>Queens</u>	Block <u>673</u> Lot <u>12</u> House No <u>57-39</u>	Street Name <u>163 St</u>
2 Permit Applicant E-Mail: <u>DWPLUMBING@AOL.COM</u>	Business Phone <u>(718) 225-4803</u>	Fax No. <u>(718) 847-1516</u>
Last Name <u>ASENCIO, JR</u>	First Name <u>HECTOR</u>	M.I. <u>J</u>
Address <u>56-21 MARATHON PK</u>	City <u>DOUGLASTON</u>	State <u>NY</u> ZIP <u>11362</u>
License No. <u>2068</u>		☒ LMP ☐ LFSC
3 Inspection Data	Inspection/test scheduled for: <u>10/30/15</u> (mmddyy)	Time: ☐ 8:00am ☐ 8:30 ☐ 9:00 ☐ 9:30 ☐ 10:00 ☐ 10:30 ☐ 11:00 ☐ 11:30 ☐ 12:30pm
Apts and Floors: <u>3 Bsmf.</u>	☒ 100pm ☐ 1:30 ☐ 2:00 ☐ 2:30 ☐ 3:00	Meeting Location: <u>FRONT OF THE BUILDING</u>

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	Notice	Results	Notice	Results		Notice	Results	Notice	Results	Notice	Results		Notice	Results	Notice	Results	Notice	Results		Notice	Results	
Sprinkler - PL		Pass	Fail		Pass	Fail		Pass	Fail		Pass	Fail		Pass	Fail		Pass	Fail		Pass	Fail		Pass	Fail
Water/Sanitary - PL																								
Storm - PL																								
Gas - PL																								
Medical Gas - PL																								
Tests	Notice	Results					Tests	Notice	Results					Tests	Notice	Results								
Hydrostatic - PL		Pass	Fail				Hydrostatic - SP		Pass	Fail				Hydrostatic - SD		Pass	Fail							
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: 1 Location(s) (Floor/Apt.): BSMT. EX. No. of Risers: 1 Location(s) (Floor/Apt.): BSMT. - 1 ☐ 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: DWPLUMBING@AOL.COM Business Phone (718) 225-4803 Fax No. (718) 847-1516

Last Name ASENCIO, JR First Name HECTOR M.I. J Business Name THE PLUMBING & HEATING SPECIALIST INC

Address 56-21 MARATHON PK City DOUGLASTON State N ZIP 11362 License No. 2068 ☒ 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 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>HECTOR J ASENCIO, JR</u>	SEAL	Print Name of Permit Applicant or Alternative licensee from same firm (LMP/LFSC) <u>HECTOR J ASENCIO, JR</u>	SEAL
<u>H. J. Asencio</u>		<u>H. J. Asencio</u>	
Signature		Signature	
Date <u>10/30/15</u>		Date <u>10/30/15</u>	

Reviewed by: 6, Date: 11/24/15, Entered by: 11-24-15, R.S.O. by: 6, S/O by: 6