



PW7: Certificate of Occupancy /
Letter of Completion Folder
Review Request

Must be typewritten

DEPT BLDGS Job No. 421299954



Scan Code ESHS0545402

1 Location Information

House No(s) 150-79 Street Name VILLAGE ROAD Work Proposed on Floor No(s) FIRST,SECOND,OSP
Borough QUEENS Block 3715 Lot 02 BIN 4530616 CB No. 408

2 Requestor Information

Individuals Relationship to Job (example: applicant, owner filing representative)

Last Name ZAPATA

First Name GIOVANNI

Middle Initial

Business Name GRUPO DESIGN

Business Telephone 914 374 5721

Business Address 21 HARRISON DRIVE

Business Fax

City LARCHMONT

State NY

Zip 10538

Mobile Telephone 914 834 2825

E-Mail GZAPATA04@JUNO.COM

License Number 034135

3 Type of Request Choose one.

- ☒ Letter of Completion (Directive 14 or Non-Directive 14)
- ☐ TCO - Temporary Certificate of Occupancy (Borough Commissioner's Office may be required. All requirements must be fulfilled before a TCO will be issued) 3A
- ☐ Renewal of TCO - Temporary Certificate of Occupancy (Borough Commissioner's Office approval may be required. All requirements must be fulfilled before a TCO will be issued) 3A
- ☐ Final Certificate of Occupancy 3A
- 3A ☐ Change of address, block/lot, metes and bounds only (28-118.16.2)

4 Comments If additional space is required, write "see A1-1" here and submit a completed A1-1 form with this request.

5 Statements and Signatures

By signing below, I understand that all the information provided is true to the best of my knowledge and that falsification of any statement is a misdemeanor under § 28-124 of the NYC Administrative Building Code and 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.

Requestor Signature

Date 1-19-18

Borough Commissioner's Office TCO Authorization Do not write in this section.

Comments:

W. C. H.
JAN 26 2018
SK 7610
Chief Inspector

Authorized Name (please print)

☐ Approved

☐ Disapproved

Authorization Signature (if approved only)

Date

Special Audits & Inspections Unit

Disapproval Reasons Review request cannot be processed for the following reasons:

- ☐ Fees unpaid ☐ Open ECB/DOB Violation(s) ☐ Incomplete PAA ☐ Audit Conditions Pending / Job on Hold
- ☐ Missing inspection Sign-off(s): ☐ Construction ☐ Plumbing ☐ Electrical ☐ Other: _____
- ☐ Missing Required item(s): _____ ☐ TR-1 Error(s): _____
- ☐ Form(s) missing/incomplete: Form(s) _____ Section(s)/Reason(s) _____
- ☒ Other: Sent to SEP.

01/22/18