



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

Must be typewritten

DEPT BLDGS Job No. 421400932



Scan Code ESHS4635144

1	Location Information																		
<table style="width: 100%;"><tr><td style="width: 25%;">House No(s) 213</td><td style="width: 25%;">Street Name Beach 88th Street</td><td style="width: 50%;">Work Proposed on Floor No(s) 001,002</td></tr><tr><td>Borough Queens</td><td>Block 16123 Lot 79</td><td>BIN 4303494 CB No. 414</td></tr></table>		House No(s) 213	Street Name Beach 88th Street	Work Proposed on Floor No(s) 001,002	Borough Queens	Block 16123 Lot 79	BIN 4303494 CB No. 414												
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2	Requestor Information																		
Individuals Relationship to Job (example: applicant, owner filing representative)																			
<table style="width: 100%;"><tr><td style="width: 33%;">Last Name Whitley</td><td style="width: 33%;">First Name Kathy</td><td style="width: 34%;">Middle Initial</td></tr><tr><td colspan="2">Business Name New York Design Architects LLP</td><td>Business Telephone 212-680-0140</td></tr><tr><td colspan="2">Business Address 175 West Broadway</td><td>Business Fax 212-658-9548</td></tr><tr><td>City New York</td><td>State NY</td><td>Zip 10013</td></tr><tr><td colspan="2">E-Mail kwhitley@newyorkdesign.com</td><td>Mobile Telephone</td></tr><tr><td colspan="2"></td><td>License Number 1889</td></tr></table>		Last Name Whitley	First Name Kathy	Middle Initial	Business Name New York Design Architects LLP		Business Telephone 212-680-0140	Business Address 175 West Broadway		Business Fax 212-658-9548	City New York	State NY	Zip 10013	E-Mail kwhitley@newyorkdesign.com		Mobile Telephone			License Number 1889
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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.																		
Respectfully request to sign off application # 421400932																			
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 § 26-124 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:																			
Authorized Name (please print) ☐ Approved ☐ Disapproved																			
Authorization Signature (if approved only) Date																			
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: _____																			

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