



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

Must be typewritten

DEPT BLDGS Job No. 421626235



Scan Code ESHS1562706

1 Location Information

House No(s) 19-44

Street Name **STEINWAY STREET** Work Proposed on Floor No(s) OSP, 001, MEZ, ROOF

Borough QUEENS

Block 811

Lot 16

BIN 4544655

CB No. 401

2 Requestor Information

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

Last Name RESTREPO

First Name DIGNA

Middle Initial

Business Name METROPOLIS GROUP INC

Business Telephone (212) 233-6344

Business Address 22 CORTLANDT STREET, 10TH FLOOR

Business Fax (212) 233-6333

City NEW YORK State NY Zip 10007

Mobile Telephone (646) 712-3695

E-Mail DIGNAR@METROPOLISNY.COM

License Number 002632

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.*

REQUESTING 90 DAY TCO RENEWAL AS PREVIOUSLY APPROVED BY ANTHONY POLLICINO ON 2/3/20.
THE TCO RENEWAL FEE WAS PAID 5/14/2020 - INVOICE #90251654.

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 05/14/2020

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: _____