



PW1B: Schedule B
Plumbing, Sprinkler, Standpipe
Must be typewritten.

☒ Orient and affix BIS job number label here ☒

Page 1 of 2

1 Location Information *Required for all applications.*

House No(s) 26-26 Street Name 14TH STREET

Borough QUEENS Block 902 Lot 36 BIN 4020612 CB No. 401

Work on Floor(s) CEL, 001, 002

2 Work Type Information *Required for all applications. Select all that apply.*

Filing components/fixtures? ☐ Yes ☐ No

☒ Plumbing - PL

☐ Sprinkler - SP

☐ Standpipe - SD

Cost: \$

Cost: \$

Cost: \$

Total sprinkler heads in 8B: _____

Total sprinkler heads in 8A: _____

To remove violation(s): 1) _____

To remove violation(s): 1) _____

To remove violation(s): 1) _____

2) _____

2) _____

2) _____

3 Drainage Information

Storm Drainage Discharges into: *select one.*

☐ Storm Sewer

☐ Combined Sewer

☐ Private Disposal

Sanitary Drainage Discharges into: *select one.*

☐ Sanitary Sewer

☐ Combined Sewer

☐ Private Disposal

4 Sewer Work *Select all that apply.*

☐ HCP-1/HCP-2

☐ Site Connection

☐ Septic Tank

5 Cap / Remove / Replace / Relocate Components *If this section is completed, components are required.*

☒ Cap or Remove *Describe all:*

CEL: REMOVE (1) TUB, (1) BOILER
 1ST FL: REMOVE (1) DRYER

☒ Replace or Relocate *Describe all:*

OSP: RELOCATE (1) GAS METER
 CEL: RELOCATE (1) LAVATORY, (1) W/C,
 (1) SHOWER
 1ST FL: RELOCATE (2) LAVATORIES, (2) W/C, (1)
 RES SINK, (1) WASHING MACHINE & (1) STOVE
 2ND FL: RELOCATE (1) LAVATORY, (1) W/C,
 (1) SHOWER

6 Gas and Gas Equipment Data

Gas piping involved? ☐ Yes ☐ No

Describe gas fired equipment:

Total Location(s), floor/apt. - list all that apply:

Meters total: _____

Risers total: _____

Gas Usage: ☐ Heat ☐ Dryer ☐ Water Heater ☐ Tankless Coil
☐ HVAC ☐ Cooking ☐ Fire Place ☐ Boiler Pilot for Oil Burner
☐ Other: _____

7 Applicant's Statements and Signatures *Required for all applications.*

Falsification of any statement is a misdemeanor and is 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.

Name (please print)	
KOSTA KAMBERIS	
10-1-2020	
Signature	Date
P.E. / R.A. Seal (apply seal, then sign and date over seal)	

8 Equipment Information <i>For new work only.</i>															
System (work type)	Components (Piping / Equipment / Fixture)	Floors indicate no. of proposed components and/or "X" for piping													
		CEL	OSP	001	002										
8A Sprinkler (SP) <i>Must not be off domestic.</i>	P* Sprinkler Piping - Dry														
	P* Sprinkler Piping - Wet														
	E* Dry Pipe Valve														
	E* Booster Pump - SP														
	F Floor/Riser Control Valve														
	F Siamese FDC														
	F Sprinkler Heads														
	F Sprinkler Heads over 999														
8B Sprinkler (PL)**	F Sprinkler Heads (thirty or less)														
8C Fire Standpipe (SD)	P* Standpipe Piping														
	E* Fire Pump														
	E* Special Service Fire Pump														
	F Floor/Riser Control Valve														
	F Hose Cabinet/Rack/Valve														
	F Siamese FDC														
8D Water/San. (PL)	P* Sanitary Piping (Soil & Venting)														
	P* Water Piping														
	P Water Service Piping														
	E Sewer Ejection Pump														
	E Submeters														
	F Bathtubs/Whirlpools/Hot Tub/Sauna														
	F Bidet														
	F Chiller/Cooler														
	F Dishwasher														
	F Domestic Water Tank/Pump														
	F Drinking Fountain														
	F Floor Drain														
	F Grease Trap/Oil Separator/GRD														
	F Ice Maker														
	F In-sink Garbage Disposal														
	F Lavatory (Common Wash Basin)			1	2										
	F Laundry - Standpipe														
	F Pool														
	F RPZ/Backflow Preventer (Primary)														
	F RPZ/Backflow Preventer (Secondary)														
	F Sink - Non Residential														
	F Sink - Residential														
	F Stall Shower			2											
	F Tankless Coil														
	F Toilet (Water Closet)			1	2										
	F Urinal														
	F Washing Machine														
	F Water Heater (Non-Gas)														
8E Storm (PL)	P* Storm Drainage Piping														
	E Sump Pump														
	F Area/Yard Drain														
	F Detention Tank														
	F Dry Well/Retention														
	F Roof Drain														
8F Gas (PL)	P* Gas Piping														
	E Emergency Shut-off Valve														
	E* Fire Suppression Shut-off Valve														
	E Gas Booster Pump														
	F Cooking Equipment (non-residential)														
	F Cooking Equipment (residential)														
	F Gas Boiler (<350K, non-comm, <6 family)														
	F Gas Burner														
	F Gas Dryer														
	F Gas Furnace														
	F Gas Meter		1												
	F Gas Water Heater														
8G Medical (PL)	P* Medical Gas Piping														
	E Assorted Medical Equipment														

** Must be off domestic.

* Indicates test *may* be required.