



AI1: Additional Information Must be typewritten.

☒ Orient and affix BIS job number label here ☒

Page number 01 of 01 BIS Document No. 03

1 Location and Job Information Required for all applications.

House No(s) 86-15 Street Name 60 ROAD

Borough QUEENS Block 2874 Lot 35 BIN 4065247 CB No. 406

2 Revisions to Plans/Drawings Required whenever updating plans. All revisions for each page must be clearly described in section 3.

Submission is part of a Post Approval Amendment (PAA)? ☐ Yes PW1 required ☒ No Indicate all actions for this submission:

Action	Original/New/Omit Page ID	Superseding Page ID	Action	Original/New/Omit Page ID	Superseding Page ID	Action	Original/New/Omit Page ID	Superseding Page ID	Action	Original/New/Omit Page ID	Superseding Page ID
	FO-001.01										
S	FO-101.02	FO-101.03									
S	FO-102.02	FO-102.03									
	FO-103.01										

For "Action" use "N" for new page, "S" for superseding page, "O" for omitting page.

Is this section continued on additional AI1 forms? ☐ Yes ☒ No

3 Additional Information Required for all applications.

SUBMITTED AI1 TO AMEND FOUNDATION PLAN:

FO-001.01 - NO CHANGE

FO-101.03 - UPDATED FOUNDATION PLAN PER NEW ARCH AND FIELD CONDITIONS ALONG EXP #2..

FO-102.03 - UPDATED FOUNDATION SECTION TO MATCH NEW PLAN.

FO-103.01 - NO CHANGE

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. I understand that if I am found after hearing to have knowingly or negligently made a false statement or to have knowingly or negligently falsified or allowed to be falsified any certificate, form, signed statement, application, report or certification of the correction of a violation required under the provisions of this code or of a rule of any agency, I may be barred from filing further applications or documents with the Department.

Name (please print) JING WANG Date 8/1/08/2024

Signature _____

P.E. / R.A., Seal (apply seal, then sign and date over seal)

