



PW7: Letter of Completion Request

(Must be typewritten)

1 LOCATION INFORMATION

House No(s) 212-40	Street Name Hillside Avenue	Work Proposed on Floor No(s) OSP
Borough Queens	Block 10670 Lot 35	BIN 4228614 CB No. 413

2 REQUESTOR INFORMATION

Individuals Relationship to Job (Example: Applicant, Owner Filing Representative)

Last Name Klein/Leyderman	First Name Ruth/Feliks	Middle Initial
Business Name MEP Designs, Inc.	Business Telephone (718) 339-9116	
Business Address 1839 Ocean Parkway	Business Fax	
City Brooklyn	State NY	Zip 11223
E-Mail rklein@mepdesigns.net	Mobile Telephone (917) 533-4249	
	License Number 004547	

3 TYPE OF REQUEST

☒ Letter of Completion (Directive 14 or Non-Directive 14)

4 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

Ruth Klein

Date

6/25/21

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 |
| ☐ Missing Required item(s): | ☐ Other _____ | | |
| ☐ Form(s) missing/incomplete: Form(s) _____ | ☐ TR-1 Error(s): _____ | | |
| ☐ Other: _____ | ☐ Section(s)/Reason(s) _____ | | |


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NYC Department of Buildings
Document Overview

Page: 1 of 1

Premises: 88-01 212 PLACE QUEENS

Job No: 421740085BIN: 4228614 Block: 10670 Lot: 35

Num. of Documents: 1

Job Type: A2 - ALTERATION TYPE 2

DOC NO

WORK TYPE(S) / STATUS / JOB DESCRIPTION

01

INSTALLATION OF EMERGENCY GENERATOR AT OSP.

Status: R - PERMIT ISSUED - ENTIRE JOB/WORK

Status Date: 09/19/2019

Plans Page Count: 4

Directive 14: Y

Applicant Name: RUDITSER OLEG

Pre-Filing Date: 08/29/2019

TYPE

STATUS DATE STATUS

A2 - ALTERATION TYPE 2

08/29/2019

P: PLAN EXAM - APPROVED

FS - FUEL STORAGE

06/10/2020

X: SIGNED OFF

BTU: 0 Fuel Type: OIL Box 5: YES

OT - GENERATOR, PAD

08/29/2019

R: PERMIT ISSUED - ENTIRE JOB/WORK

If you have any questions please review these [Frequently Asked Questions](#), the [Glossary](#), or call the 311 Citizen Service Center by dialing 311 or (212) NEW YORK outside of New York City.