



AI1: Additional Information
Must be typewritten.

DEPT BLDGS Job No. 421742047
Scan Code ESHS7640254

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BIS Document No. 01

1 Location and Job Information Required for all applications.

House No(s) 87-87 Street Name FRANCIS LEWIS BLVD.

Borough QUEENS Block 10589 Lot 1 BIN 4225976 CB No. 408

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

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.

RESPECTFULLY REQUESTING CHANGES MADE TO PREVIOUS APPROVED PLAN;
1- MINOR CHANGE IN LEASE PLAN; SHOWING THE CORRECT LOCATION OF EXISTING HAND SINK, FRYER, & GRILL.
2- MINOR CHANGE IN LEASE PLAN; SHOWING THE EXISTING FPSC DOOR THAT WAS NOT SHOWN IN PREVIOUS APPROVED PLANS.

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)

HEGIN LEE

Signature

Date

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

