



AI1: Additional Information Must be typewritten.

☒ Orient and affix BIS job number label here ☒

421918802

Page number 1 of 1

BIS Document No. 03

1 Location and Job Information Required for all applications.

House No(s) 155-12

Street Name 134TH AVENUE

Borough QUEENS

Block 12294

Lot 5

BIN 4266441

CB No. 412

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
S	Z-401.01	Z-401.02									
S	A-401.01	A-401.02									
S	A-403.01	A-403.02									

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.

AMEND FOLLOWING:

1. AMEND SH(1/9) - Z-401.02: AMEND PLOT PLAN TO SHOW POOL.
2. AMEND SH(2/9) - A-401.02: AMEND CELLAR, FIRST & SECOND FLOOR TO REFLECT AS-BUILT CONDITION.
3. AMEND SH(4/9) - A-403.02: AMEND ALL ELEVATIONS TO SHOW AS BUILT CONDITIONS.

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)

HANSA PERSAUD

07-22-2024

Signature

Date

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

