



AI1: Additional Information Must be typewritten.

☒ Orient and affix BIS job number label here ☒

Page number 1 of 1

BIS Document No. 3

1 Location and Job Information Required for all applications.

House No(s) 148

Street Name REID AVENUE

Borough QUEENS

Block 16350

Lot 400

BIN 4466114

CB No. 414

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	A-001.02	A-001.03									
S	A-005.01	A-005.02									
S	A-007.01	A-007.02									
S	A-009.01	A-009.02									

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.

Page A-001.03 - Revision 5
- Page key revised.
- Page number updated.

Page A-005.02 - Revision 5
- Utility shaft relocated.
- Flood vent updated
- Page number updated.

Page A-007.02 - Revision 5
- Elevation revised to show new utility shaft.
- Page number updated.

Page A-009.02 - Revision 5
- Utility shaft detail, 2/A9 updated.
- Page number updated.

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)

James M. Bouler

Signature

5/21/18

Date

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

