



PW1: Plan / Work Application

Must be typewritten.

☒ Orient and affix BIS job number label here ☒

1 Location Information Required for all applications.

House No(s) 15-30 Street Name HASSECK STREET

Borough QUEENS Block 15501 Lot 2 BIN 4449685 C.B. No. 414

Work on Floor(s) BAS, ROF Apt. / Condo No(s)

2 Applicant Information Required for all applications. Fax, mobile telephone and e-mail address are optional information.

Last Name SZERBATY First Name MICHAEL Middle Initial

Business Name MD SZERBATY ASSOCIATES Business Telephone (212) 352-3307

Business Address 307 7TH AVENUE Business Fax

City NEW YORK State NY Zip 10001 Mobile Telephone

E-Mail MSZERBATY@MDSNYC.COM License Number 017767

Choose one: ☐ P.E. ☒ R.A. ☐ Sign Hanger ☐ R.L.A. ☐ Other:

3 Filing Representative Complete only if different from applicant specified in section 2. Fax, mobile phone, and e-mail are optional info.

Last Name SHI/WANG/LU/LI/SAY First Name XIO/QIU/XIA/KOO/CHAND Middle Initial

Business Name BMB BUILDING CONSULTING INC Business Telephone (212) 966-0370

Business Address 53 ELIZABETH STREET, STE# 2C Business Fax (917) 591-6950

City NEW YORK State NY Zip 10013 Mobile Telephone

E-Mail INFO@BMBBUILDINGCONSULTING.COM Registration Number 004462

4 Filing Status Required for all applications. Choose one and provide specified associated information.

☐ Initial Filing 5, 7, 11, 12A, 25-26

Choose only one:

☐ Standard Plan Examination or Review

☐ Professional Certification PC1, POC1

☐ Professional Certification of Objections A11

☐ Prior to Approval Actions 25-26

☐ Amend Existing Filing 4A

☐ Subsequent Filing 6-7, 8A (Alt-2 only), 11

☒ Post Approval Amendment (PAA) 4A, 6, 24-25

Will PAA affect filing fees? ☐ Yes ☒ No

☐ New (Superseding) Applicant 4A, 25-26

☐ Reinstatement 24-26

☐ Withdrawal 26

☐ Specified in 4A and 6

☐ Entire Job

4A Indicate existing document number affected by filing: 01

5 Job/Project Types Choose one and provide specified associated information.

☐ Alteration Type 1 or Alteration Type 1 required to meet New Building requirements (28-101.4.5)

6A-E, 8B-C, 8F, 9-10, 12, 13C-F, 14, 18-20, 22 & PW1A, PD1

☐ Alteration Type 1, OT: "No Work" 8C, 8F, 9-10 & 12, 13C-F, 14, 18-19, 22, PW1A, PD1

☐ Alteration Type 2 5A, 6A-D, 8A-B, 9-10, 13C-E, & 14, 20, 22

☐ Alteration Type 3 5A, 6B-F, 8C, 9-10, 13C-E, 20, 22

☐ New Building 6A-E, 8F, 9A, 9C-K, 10, 12 & 13A-E, 14, 18-20, PW1A, PD1

☐ Sign 5A, 6B-D, 9A, 9D, 22-23

☐ Full Demolition 6B, 8D, 9A & 9C-D, 9K, 13D-E, 14, 21A, 22

☐ Subdivision 9A, 9D, 12A-B

☐ Condominium ☐ Improved 17
5A Directive 14 acceptance requested?

☐ Yes ☐ No

6 Work Types Select all that apply but no more than allowed by job and filing type. "OT" required on all NB and Alteration 1 initial applications.

6A ☐ BL - Boiler PW1C

☐ FA - Fire Alarm

☐ FB - Fuel Burning PW1C

6B ☐ EQ - Construction Equipment 15

☐ FS - Fuel Storage PW1C

☐ FP - Fire Suppression

☐ MH - Mechanical

6C ☒ OT/GC - General Construction

☐ PL - Plumbing PW1B

☐ SD - Standpipe PW1B

☐ SP - Sprinkler PW1B

6D ☐ OT - Other, describe:

6E ☐ CC - Curb Cut 16

☐ OT/LAN - Landscape

6F ☐ OT/ANT - Antenna

☐ OT/BPP - Builders Pavement Plan 8D

☐ OT/FPP - Fire Protection Plan

☐ OT/MAR - Marquee 8E, 26B

11 Job Description	11A Related DOB Job Numbers
11B Primary application job no. _____	

12 Zoning Characteristics																																																	
12A District(s) _____ Overlay(s) _____ Special Dist.(s) _____ Map Number _____	12B Street legal width: _____ ft. Street Status: ☐ Public ☐ Private <i>If the zoning lot includes multiple tax lots, list all tax lots here ►</i>																																																
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="width: 15%;">12C Proposed:</th> <th style="width: 15%;">Use*</th> <th style="width: 15%;">Zoning Floor Area</th> <th style="width: 15%;">District</th> <th style="width: 15%;">FAR</th> </tr> <tr> <td></td> <td></td> <td>sq. ft.</td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td>sq. ft.</td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td>sq. ft.</td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td>sq. ft.</td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td>sq. ft.</td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td>sq. ft.</td> <td></td> <td></td> </tr> <tr> <td colspan="2">Proposed Totals</td> <td>sq. ft.</td> <td style="background-color: #cccccc;"></td> <td></td> </tr> <tr> <td colspan="2">Existing Total</td> <td>sq. ft.</td> <td style="background-color: #cccccc;"></td> <td></td> </tr> </table>	12C Proposed:	Use*	Zoning Floor Area	District	FAR			sq. ft.					sq. ft.					sq. ft.					sq. ft.					sq. ft.					sq. ft.			Proposed Totals		sq. ft.			Existing Total		sq. ft.			Proposed Lot Details: Lot Type: ☐ Corner ☐ Interior ☐ Through Lot Coverage _____ % Lot Area _____ sq. ft. Lot Width _____ ft. Proposed Other Details: Enclosed Parking? ☐ Yes ☐ No <i>If yes, no. of parking spaces:</i> _____ Perimeter Wall Height _____ ft.			
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Proposed Yard Details: Check here if no yards: ☐ or Front Yard _____ ft. Rear Yard _____ ft. Rear Yard Equivalent _____ ft. Side Yard 1 _____ ft. Side Yard 2 _____ ft.																																																	
<i>*Use can be one of the following: residential, commercial, manufacturing, or community facility. List only one use per line.</i>																																																	

13 Building Characteristics *Main use/dominant occupancy per AC §28-101.5. **Use 2014 Code equivalents only. †Residential w/other use.				
13A Primary structural system, choose one: ☐ Masonry ☐ Concrete (CIP) ☐ Concrete (Precast) ☐ Wood ☐ Steel (Structural) ☐ Steel (Cold-Formed) ☐ Steel (Encased in Concrete)				
13B	Existing	Proposed	13D Building Type: ☐ 1, 2, or 3 Family ☐ Other Mixed use building?† ☐ Yes ☐ No	
	Structural Occupancy/Risk Cat.	2014 Code Designations?	13E	
	Seismic Design Cat.	2014 Code Designations?	Existing	Proposed
13C	Occupancy Classification*	☐ Yes ☐ No	Building Height	ft.
	Construction Classification	☐ Yes ☐ No	Building Stories	
	Multiple Dwelling Classification		Dwelling Units	
13F Building was originally erected pursuant to which Building Code: ☐ 2014 ☐ 2008 ☐ 1968 ☐ Prior to 1968 The earliest Code with which this building or any part of it is required to comply: ☐ 2014 ☐ 2008 ☐ 1968 ☐ Prior to 1968				

14 Fill Choose one.	☐ Not Applicable ☐ On-Site ☐ Off-Site ☐ Under 300 cubic yards
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15 Construction Equipment	16 Curb Cut Description
☐ Chute ☐ Sidewalk Shed Construction Material: _____ ☐ Fence Size: _____ linear ft. BSA/MEA Approval No. _____ ☐ Supported Scaffold ☐ Other: _____	Size of cut (with splays): _____ ft. Distance to nearest corner: _____ ft. to street: _____

17 Tax Lot Characteristics	18 Fire Protection Equipment																																																		
Original tax lots being merged or reapportioned (if applicable): <table border="1" style="width: 100%; border-collapse: collapse;"> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr> </table> Tentative tax lot numbers (new tax lots only): <table border="1" style="width: 100%; border-collapse: collapse;"> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr> </table>																					<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th></th> <th colspan="2">Existing</th> <th colspan="2">Proposed</th> </tr> <tr> <th></th> <th>Yes</th> <th>No</th> <th>Yes</th> <th>No</th> </tr> <tr> <td>Fire Alarm</td> <td>☐</td> <td>☐</td> <td>☐</td> <td>☐</td> </tr> <tr> <td>Fire Suppression</td> <td>☐</td> <td>☐</td> <td>☐</td> <td>☐</td> </tr> <tr> <td>Sprinkler</td> <td>☐</td> <td>☐</td> <td>☐</td> <td>☐</td> </tr> <tr> <td>Standpipe</td> <td>☐</td> <td>☐</td> <td>☐</td> <td>☐</td> </tr> </table>		Existing		Proposed			Yes	No	Yes	No	Fire Alarm	☐	☐	☐	☐	Fire Suppression	☐	☐	☐	☐	Sprinkler	☐	☐	☐	☐	Standpipe	☐	☐	☐	☐
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19 Open Spaces

	Existing	Proposed		Existing	Proposed
Plaza Area	sq. ft.	sq. ft.	Arcade Area	sq. ft.	sq. ft.
Parking Area	sq. ft.	sq. ft.	Parking Spaces		
Loading Berths	sq. ft.	sq. ft.	Loading Berths		

20 Site Characteristics

Yes No

- ☐ ☐ Tidal Wetlands
☐ ☐ Coastal Erosion Hazard Area
☐ ☐ Fire District

Yes No

- ☐ ☐ Freshwater Wetlands
☐ ☐ Urban Renewal
☐ ☐ Flood Hazard Area *If yes, 20A*

20A Flood Hazard Area Information

Yes No

- ☐ ☐ Substantial improvement?
☐ ☐ Substantially damaged?
☐ ☐ Floodshields part of proposed work?

21 Demolition Details **Mechanical equipment other than handheld devices to be used for demolition or removal of debris (BC §3306.4).*

Yes No

- 21A ☐ ☐ Demo. filing is for a secondary structure? *If yes, specify structure being demolished:*
☐ ☐ Mechanical means* from out of building? *If yes, mechanical means will demolish:* ☐ entire structure or ☐ part of structure
☐ ☐ Mechanical means* from within building? *If yes, describe equipment proposed:*
 21B ☐ ☐ Demolition work affects the exterior building envelope
☐ ☐ The scope of work involves raising/moving of a building

22 Asbestos Abatement Compliance *Choose one.*

- ☐ The scope of work requires related asbestos abatement as defined in the regulations of the NYC Department of Environmental Protection (DEP).
☐ The scope of the work is **not** an asbestos project as defined in the regulations of the NYC DEP. *DEP Control # is required.*
 DEP ACP-5 Control No. _____
☐ The scope of work is exempt from the asbestos requirement as defined in the regulations promulgated by the NYC DEP (15 RCNY 1-23(b)) or is an alteration to a building constructed pursuant to plans submitted for approval on or after April 1, 1987, in accordance with § 28-106.1.

23 Sign

Purpose:

☐ Advertising☐ Non-Advertising

Type:

☐ Illuminated 23A☐ Non-Illuminated

Estimated Cost: \$

Total Square Feet:

Height above Curb:

ft. in.

Height above Roof:

ft. in.

Yes No

- ☐ ☐ Is sign inside building line? *If no, sign projects by:* _____ ft. in.
☐ ☐ Designed for changeable copy? *If no, 23C*
☐ ☐ Does an OAC have an interest in this sign or location? *If yes, 23G*
☐ ☐ Within 900' and within view of an arterial highway? *If yes, 23D*
☐ ☐ Within 200' and within view of a park 1/2 acre or more? *If yes, 23E*

.....► *If answer is "yes" to either of the above two questions and this is an advertising sign, OAC sign number is required in section 23F*

23A Illuminated type: ☐ Direct ☐ Flashing ☐ Indirect

Yes No

- ☐ ☐ If sign projects beyond building line, is owner billed for annual permit? *If no, specify in 26B*

23B ☐ ☐ Is roof sign tight, closed or solid?23C Sign wording. *If extensive, provide only key wording.*

23D Distance from Arterial Highway: _____ ft.

23E Distance from Park 1/2 acre or more: _____ ft.

23F OAC Sign Number: _____

23G OAC Registration Number: _____

24 Comments *Place additional comments on an AI-1 form. See Guide for proper incorporation of professional certification statements.*

HEREWITH SUBMIT PAA TO UPDATE PW1 SECTION# 3, AND TO ADD & TO RECEIVE "DOB - ZONING DIAGRAM (ZD1)" ITEM INTO THE ITEMS REQUIRED LIST.

25 Applicant's Statements and Signatures *Required for all applications.*

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. I prepared or supervised the preparation of the construction documents and specifications herewith submitted and to the best of my knowledge and belief, the construction documents and work shown thereon comply with the provisions of the NYC Administrative Code and other applicable laws and rules. ☐ (←check here if) except as set forth in the accompanying documents. I acknowledge that I have read and complied with all instructions pertaining to this application and supplementary schedules submitted. **Cluster Development Statement** (if applicable): I hereby state that all specifications relating to this job are identical to those previously filed under the group lead job number, except as specified herein.

For initial New Building and Alteration 1 applications filed under the 2008 or 2014 NYC Building Code only: does this building qualify for high-rise designation? ☐ Yes ☐ No

Directive 14 initial applications only: I certify that the construction documents submitted and all construction documents related to this application do not require a new or amended Certificate of Occupancy as there is no change in use, exits, or occupancy. ☐ Yes ☐ No

Name (print): **MICHAEL SZERBARY**

Sign and Date: **7/1/19**

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

26 Property Owner's Statements and Signatures

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. Furthermore, I understand that I am responsible for insuring that a final inspection be performed when the permitted work is complete, and that a satisfactory report of final inspection be submitted, along with all required submittal documents, so that the NYC Department of Buildings may issue a letter of completion or certificate of occupancy within the time prescribed by law.

I have authorized the applicant to file this application for the work specified herein and all future amendments. I will not knowingly authorize any work that is not in compliance with all applicable laws, rules, and regulations.

Yes No

☐ ☐ **Fee Exemption Request (Non-Profit Owned and Operated)**
In accordance with Administrative Code §28-112.1, Exception 1, I certify that the deed holder is a corporation or association organized and operated exclusively for the purposes indicated in such section, and that the property is used exclusively by such entity for such purposes. ★

☐ ☐ **Fee Exemption Request (NYCHA/HHC, NYC Agency, or Other Government Owned and Operated)** The building or any part thereof to be constructed, renovated, altered or demolished is owned and operated exclusively for the purposes of the NYC Agency, NYC Authority, NYS Agency, Federal Government or any other government entity. ★

☐ ☐ **Owner's Certifications Regarding Occupied Housing**
The site of the building to be altered or demolished, or the site of the new building to be constructed, contains one or more occupied dwelling units that will remain occupied during construction. These occupied dwelling units have been clearly identified on the submitted construction documents.

☐ ☐ The site of the building to be altered or demolished, or the site of the new building to be constructed, contains occupied housing accommodations subject to rent control or rent stabilization under Chapters 3 and 4 of Title 26 of the New York City Administrative Code. If yes, select one of the following:

☐ The owner is not required to notify the New York State Homes and Community Renewal (NYSR) of the owner's intention to file because the nature and scope of the work proposed, pursuant to NYSR regulations, does not require notification.

☐ The owner has notified the New York State Homes and Community Renewal (NYSR) of its intention to file such construction documents/apply for such permit and has complied with all requirements imposed by the regulations of such agency as preconditions for such [filing/application].

Provide date NYSR notified: _____

☐ ☐ **Owner's Certification for Directive 14 Applications (if applicable)**
I have read and am fully aware of the applicant's statement that the construction documents submitted and all construction documents related to this application will not require a new or amended Certificate of Occupancy as there is no change in use, exits, or occupancy and the work is not inconsistent with the current certificate of occupancy. Furthermore, I understand that I am responsible for retaining a qualified design professional to perform a final inspection when the permitted work is complete and this professional must submit a satisfactory final inspection report to the NYC Department of Buildings within the time following inspection prescribed by Department rule.

Notes for Section 26A: Section required if unit owner signed Section 26. Signature required for authorized representative of Condo or Co-Op board.

★ For fee waivers, please see the PW1 User Guide

Owner ☐ Individual ☐ Partnership ☐ NYCHA / HHC
Type: ☐ Corporation ☐ Other Government ☐ NYC Agency
☐ Condo Unit Owner or Co-Op Tenant-shareholder 26A

Is the deed holder a non-profit organization? ☐ Yes ☐ No

Name (please print): _____

Relationship to Owner: _____

Business Name/Agency: _____

Street Address: _____

City: _____

State: _____

Zip: _____

Telephone Number: _____

Fax: _____

E-Mail Address: _____

Signature and Date ►

26A Condo/Co-Op Board *See note in bottom left corner of page.*

Name (please print): _____

Title: _____

Street Address: _____

City: _____

State: _____

Zip: _____

Telephone Number: _____

Fax: _____

E-Mail Address: _____

Signature and Date ►

26B Lessee Responsible for Annual Sign or Marquee Permit

Name (please print): _____

Relationship to Owner: _____

Business Name/Agency: _____

Street Address: _____

City: _____

State: _____

Zip: _____

Telephone Number: _____

Fax: _____

E-Mail Address: _____