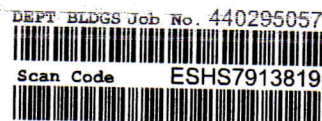




AI1: Additional Information
Must be typewritten.



Page number 1 of 1

BIS Document No. 02

1 Location and Job Information Required for all applications.

House No(s) 132-10 Street Name 14 AVENUE

Borough QUEENS

Block 04100

Lot 00001

BIN 4098565

CB No. 407

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-001.00	A-001.01									
S	A-010.00	A-010.01									
S	A-020.00	A-020.01									

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 REQUEST TO AMEND THE FOLLOWING PLAN:

A-001: REMOVE EXISTING NON LOAD BEARING PARTITION.

A-010: REVISED PER AS-BUILT CONDITION.

A-020: ENLARGE EXISTING EXHAUST HOOD SIZE PER AS-BUILT CONDITION.

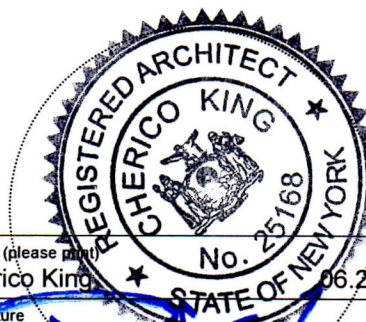
Falsification of any statement is a misdemeanor and is punishable by a fine or imprisonment, or both. It is unlawful to give to a city employee, or for a city employee to accept, any benefit, monetary or otherwise, either as a gratuity for properly performing the job or in exchange for special consideration. 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)

Cherico King

Signature

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



06.27.2016

Date