



PW1B: Schedule B
Plumbing, Sprinkler, Standpipe
Must be typewritten.

☒ Orient and affix BIS job number label here ☒

Page 1 of 2

1 Location Information *Required for all applications.*

House No(s) **405** Street Name **BAYSIDE AVENUE**

Borough **QUEENS** Block **16340** Lot **50** BIN **4464473** CB No. **414**

Work on Floor(s) **001, 002, 003**

2 Work Type Information *Required for all applications. Select all that apply.* Filing components/fixtures? ☒ Yes ☐ No

☒ Plumbing - PL	☐ Sprinkler - SP	☐ Standpipe - SD
Cost: \$ <u>1</u>	Cost: \$ _____	Cost: \$ _____
Total sprinkler heads in 8B: <u>17</u>	Total sprinkler heads in 8A: _____	
To remove violation(s): 1) _____	To remove violation(s): 1) _____	To remove violation(s): 1) _____
2) _____	2) _____	2) _____

3 Drainage Information

Storm Drainage Discharges into: *select one.* Sanitary Drainage Discharges into: *select one.*

☐ Storm Sewer ☐ Combined Sewer ☒ Private Disposal ☒ Sanitary Sewer ☐ Combined Sewer ☐ Private Disposal

4 Sewer Work *Select all that apply.*

☐ HCP-1/HCP-2 ☐ Site Connection ☐ Septic Tank

5 Cap / Remove / Replace / Relocate Components *If this section is completed, components are required.*

☒ Cap or Remove <i>Describe all:</i>	☒ Replace or Relocate <i>Describe all:</i>
PL - NONE	PL - NONE

6 Gas and Gas Equipment Data

Gas piping involved? ☐ Yes ☐ No *Describe gas fired equipment:*

RECONNECT TO EXISTING GAS EQUIPMENT

Total Location(s), floor/apt. - list all that apply:

Meters total: 1 001 OUTSIDE

Risers total: 1 001 THROUGH 002

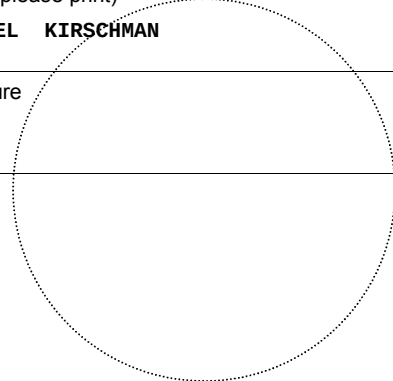
Gas Usage: ☒ Heat ☐ Dryer ☒ Water Heater ☐ Tankless Coil

☐ HVAC ☒ Cooking ☐ Fire Place ☒ Boiler Pilot for Oil Burner

☐ Other:

7 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.

Name (please print)	
MICHAEL KIRSCHMAN	
Signature	Date
	
P.E. / R.A. Seal (apply seal, then sign and date over seal)	

8 Equipment Information *For new work only.*

System (work type)	Components (Piping / Equipment / Fixture)	Floors indicate no. of proposed components and/or "X" for piping															
		1	2	3													
8A Sprinkler (SP) <i>Must not be off domestic.</i>	P* Sprinkler Piping - Dry																
	P* Sprinkler Piping - Wet																
	E* Dry Pipe Valve																
	E* Booster Pump - SP																
	F Floor/Riser Control Valve																
	F Siamese FDC																
	F Sprinkler Heads																
8B Sprinkler (PL)**	F Sprinkler Heads over 999																
	F Sprinkler Heads (thirty or less)	6	11														
8C Fire Standpipe (SD)	P* Standpipe Piping																
	E* Fire Pump																
	E* Special Service Fire Pump																
	F Floor/Riser Control Valve																
	F Hose Cabinet/Rack/Valve																
8D Water/San. (PL)	F Siamese FDC																
	P* Sanitary Piping (Soil & Venting)	1	1	1													
	P* Water Piping	1	1														
	P Water Service Piping	1															
	E Sewer Ejection Pump																
	E Submeters																
	F Bathtubs/Whirlpools/Hot Tub/Sauna																
	F Bidet																
	F Chiller/Cooler																
	F Dishwasher																
	F Domestic Water Tank/Pump																
	F Drinking Fountain																
	F Floor Drain	1															
	F Grease Trap/Oil Separator/GRD																
	F Ice Maker																
	F In-sink Garbage Disposal																
	F Lavatory (Common Wash Basin)																
	F Laundry - Standpipe		1														
	F Pool																
	F RPZ/Backflow Preventer (Primary)	1															
	F RPZ/Backflow Preventer (Secondary)																
	F Sink - Non Residential																
	F Sink - Residential																
	F Stall Shower																
	F Tankless Coil																
	F Toilet (Water Closet)																
	F Urinal																
	F Washing Machine																
	F Water Heater (Non-Gas)																
8E Storm (PL)	P* Storm Drainage Piping																
	E Sump Pump																
	F Area/Yard Drain																
	F Detention Tank																
	F Dry Well/Retention																
8F Gas (PL)	F Roof Drain																
	P* Gas Piping	1	1	1													
	E Emergency Shut-off Valve																
	E* Fire Suppression Shut-off Valve																
	E Gas Booster Pump																
	F Cooking Equipment (non-residential)																
	F Cooking Equipment (residential)																
	F Gas Boiler (<350K, non-comm,<6 family)																
	F Gas Burner																
	F Gas Dryer																
	F Gas Furnace																
	F Gas Meter																
8G Medical (PL)	F Gas Water Heater																
	P* Medical Gas Piping																
	E Assorted Medical Equipment																

** Must be off domestic.

* Indicates test *may* be required.