



A11: Additional Information

Must be typewritten.

☒ Orient and affix BIS
job number label here ☒

440327308

Page number 1 of 1

BIS Document No. _____

1 Location and Job Information *Required for all applications.*

House No(s) 116

Street Name NOEL ROAD

Borough Queens

Block 15456

Lot 17

BIN 4297408

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

For "Action" use "N" for new page, "S" for superseding page, "O" for omitting page.

Is this section continued on additional A11 forms? ☐ Yes ☒ No

3 Additional Information *Required for all applications.*

OBJ. there is no page A-412. Verify and coordinate.

- Reference to A-412 is removed from sheet A-301.01.

OBJ. See other comment.

- Masonry inspection is provided. See revised G-101.01, TR and A11.

OBJ. Verify special inspection "Masonry" required BC 1704.5 and coordinate. If required submit updated TR1

- Masonry inspection is provided. See revised G-101.01, TR and A11.

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)

MICHAEL KIRSCHMAN

Signature

Date

2/5/18

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

