



# PW7: Letter of Completion Request

(Must be typewritten)

## 1 LOCATION INFORMATION

|                   |                        |                              |
|-------------------|------------------------|------------------------------|
| House No(s) 32-40 | Street Name 211 STREET | Work Proposed on Floor No(s) |
| Borough QUEENS    | Block 6060 Lot 48      | BIN 4134870 CB No. 411       |

## 2 REQUESTOR INFORMATION

Individuals Relationship to Job (Example: Applicant, Owner Filing Representative)

|                                             |                                   |                       |
|---------------------------------------------|-----------------------------------|-----------------------|
| Last Name MAHANGU                           | First Name NARESH                 | Middle Initial        |
| Business Name NY BUILDING ASSOCIATES INC    | Business Telephone (929) 575-7500 |                       |
| Business Address 124-15 METROPOLITAN AVENUE | Business Fax (516) 210-0141       |                       |
| City QUEENS                                 | State NY                          | Zip 11415             |
| E-Mail info@nybuildingassociates.com        | Mobile Telephone                  | License Number 089068 |

## 3 TYPE OF REQUEST

☒ Letter of Completion (Directive 14 or Non-Directive 14)

## 4 STATEMENTS AND SIGNATURES

By signing below, I understand that all the information provided is true to the best of my knowledge and that falsification of any statement is a misdemeanor under § 26-124 of the NYC Administrative Building Code and 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.

Requestor Signature



Date 07/01/2021

### Disapproval Reasons Review request cannot be processed for the following reasons:

- |                                                                                                                                  |                                                    |                                         |                                                                 |
|----------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------|-----------------------------------------|-----------------------------------------------------------------|
| <input type="checkbox"/> Fees unpaid                                                                                             | <input type="checkbox"/> Open ECB/DOB Violation(s) | <input type="checkbox"/> Incomplete PAA | <input type="checkbox"/> Audit Conditions Pending / Job on Hold |
| <input type="checkbox"/> Missing inspection Sign-off(s): <input type="checkbox"/> Construction <input type="checkbox"/> Plumbing | <input type="checkbox"/> Electrical                | <input type="checkbox"/> Other: _____   |                                                                 |
| <input type="checkbox"/> Missing Required item(s): _____                                                                         | <input type="checkbox"/> TR-1 Error(s): _____      |                                         |                                                                 |
| <input type="checkbox"/> Form(s) missing/incomplete: Form(s) _____                                                               | Section(s)/Reason(s) _____                         |                                         |                                                                 |
| <input type="checkbox"/> Other: _____                                                                                            |                                                    |                                         |                                                                 |