



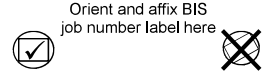
Job Number



ES471225512

Scan Code

Required if dwelling units will be occupied during construction. Owner must notify the Department at least 72 hours before commencing work in connection with the Tenant Protection Plan.



BIS JOB #: 4116544

1 LOCATION INFORMATION

House No(s)	Street Name	Number of dwelling units to remain occupied during construction:
137-46	Kalmia Ave.	1
Specific unit/apartment numbers to remain occupied:		
1		
Borough Queens	Block 5150	Lot 20
BIN 4116544		CB No. 407

2 TENANT PROTECTION PLAN

Required for **all** applications with occupied dwelling units (AC 28-120.1). Means and methods shall be described with particularity and in no case shall terms such as 'code compliant,' 'approved,' 'legal,' 'protected in accordance with law' or similar terms be used as a substitute for such description. The Tenant Protection Plan must be site specific. The elements of the Tenant Protection Plan may vary depending on the nature and scope of the work but at a minimum, must comply with all applicable laws and regulations, including the NYC Construction Codes, the NYC Housing Maintenance Code, the NYC Noise Control Code, and the NYC Health Code, and shall make detailed and specific provisions for:

EGRESS - REQUIRED EGRESS SHALL NOT BE OBSTRUCTED AT ANY TIME. EGRESS AT EXISTING CORRIDORS, FIRE STAIRS, ETC. MUST BE MAINTAINED AT ALL TIMES.

FIRE SAFETY - EXITING FIRE SAFETY FOR ALL OCCUPIED DWELLING UNITS SHALL BE MAINTAINED AND NOT DIMINISHED. ALL BUILDING MATERIALS STORED AT CONSTRUCTION AREA AND/OR IN ANY AREA OF THE BUILDING ARE TO BE SECURED IN A LOCKED AREA. ACCESS TO SUCH AREAS IS TO BE CONTROLLED BY THE BUILDING OWNER AND/OR GENERAL CONTRACTOR.

HEALTH REQUIREMENTS - THE GENERAL CONTRACTOR SHALL ENSURE THAT DUST IS CONTROLLED, AND THE DISPOSAL OF CONSTRUCTION DEBRIS IS PERFORMED IN SUCH A MANNER AS TO NOT INTERFERE WITH OCCUPIED DWELLING UNITS. DEBRIS, DIRT AND DUST ARE TO BE KEPT TO A MINIMUM AND BE CONFINED TO THE IMMEDIATE CONSTRUCTION AREA, AND BE CLEANED UP AND CLEARED FROM THE BUILDING PERIODICALLY TO AVOID ANY EXCESSIVE ACCUMULATION.

COMPLIANCE WITH HOUSING STANDARDS - THERE WILL BE NOBODY OCCUPYING THE PROPOSED CONSTRUCTION AREA TO BE RENOVATED DURING THE COURSE OF CONSTRUCTION WORK. ALL EXISTING MEANS OF EGRESS MAY NOT BE USED TO STORE MATERIAL, EQUIPMENT AND DEBRIS. TRANSPORTATION OF ALL MATERIALS, EQUIPMENT AND DEBRIS MUST BE COORDINATED WITH THE BUILDING SUPERINTENDENT.

STRUCTURAL SAFETY - NO STRUCTURE WORK IS PROPOSED THEREFORE STRUCTURAL SAFETY OF THE DWELLING UNITS WILL NOT BE AFFECTED.

NOISE RESTRICTIONS - THE GENERAL CONTRACTOR SHALL ENSURE THAT NOISE IS LIMITED TO ACCEPTABLE LEVELS IN ACCORDANCE WITH NEW YORK CITY NOISE CONTROL CODE.

TIME OF WORK - CONSTRUCTION OPERATIONS WILL BE CONFINED TO NORMAL WORKING HOURS 9AM TO 5PM, MONDAYS THRU FRIDAYS, EXCEPT LEGAL HOLIDAYS, UNLESS AN AFTER-HOURS WORK PERMIT IS ISSUED.

If additional space is required, please complete and submit an A11 form.

3 TENANT PROTECTION PLAN ATTACHMENTS/DRAWINGS

Required for **all** applications where separate Tenant Protection Plan attachments/drawings are included. Please append legible 11" x 17" attachments/drawings to this document.

1. Do attachments/drawings accompany this TPP1? ☐ YES ☒ NO
2. If YES, how many pages?

4 OWNER'S STATEMENTS AND SIGNATURE

I hereby certify that I have reviewed the information provided herein and, to the best of my knowledge and belief, attest to its accuracy. Falsification of any statement is a misdemeanor under §§28-211.1, 28-201.2.1(2), and 28-203.1(1) of the NYC Administrative Code and is punishable by a fine or imprisonment, 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 the New York City Administrative Code or of a rule of any agency, I may be barred from filing further applications or documents with the Department. 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 (print): Nil Patel

Relationship to Owner: Owner

Business Name/Agency: Nil Patel

Street Address: 137-46 Kalmia Ave.

City: Queens

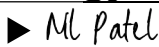
State: NY

Zip: 11355

Telephone Number: 718-360-6486

Fax:

Email Address: nil.k.patel93@gmail.com

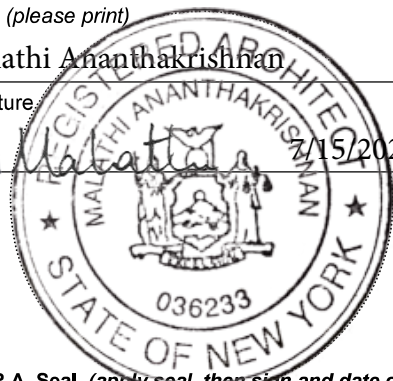
Signature and Date  7/15/2021

5 APPLICANT'S STATEMENTS AND SIGNATURE

I hereby certify that:

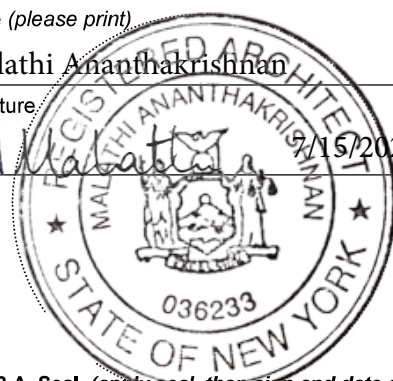
If applicable, I have been retained by the general contractor performing the alteration, construction, or partial demolition work.

I have reviewed the information provided herein and, to the best of my knowledge and belief, attest to its accuracy. Falsification of any statement is a misdemeanor under §§28-211.1, 28-201.2.1(2), and 28-203.1(1) of the NYC Administrative Code and is punishable by a fine or imprisonment, 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 the New York City Administrative Code or of a rule of any agency, I may be barred from filing further applications or documents with the Department. 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)	
Malathi Ananthakrishnan	
Signature	Date
	7/15/2021
	
P.E./R.A. Seal (apply seal, then sign and date over seal)	

6 PROFESSIONAL CERTIFICATION STATEMENT AND SIGNATURE

I hereby state that I have exercised a professional standard of care in certifying that this Tenant Protection Plan is complete and in accordance with applicable laws, including the rules of the Department of Buildings, as of this date. I am aware the Commissioner will rely upon the truth and accuracy of this statement. I have notified the owner that this document has been professionally certified. If an audit or other exam discloses non-compliance, I agree to notify the owner of the remedial measures that must be taken to meet legal requirements. I further realize that any misrepresentation or falsification of facts made knowingly or negligently by me, my agents or employees, or by others with my knowledge, will render me liable for legal and disciplinary action by the Department of Buildings and other appropriate authorities, including termination of participation in the professional certification procedures at the Department of Buildings.

Name (please print)	
Malathi Ananthakrishnan	
Signature	Date
	7/15/2021
	
P.E./R.A. Seal (apply seal, then sign and date over seal)	