



DOC 02

Job no. 440713131

AI1: Additional Information
Must be typewritten.

☒ Orient and affix BIS job number label here ☒

Page number 1 of 1

BIS Document No. 02

1 Location and Job Information Required for all applications.

House No(s) 217-30

Street Name **106 AVENUE**

Borough Queens

Block 11104

Lot 274

BIN 4542649

CB No. 413

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
	T-001.00	T-001.01		G-001.00	G-001.01						
	PV-001.00	PV-001.01									
	PV-002.00	PV-002.01									
	E-001.00	E-001.01									

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.

Post Approval Amendment - Job no. 440713131

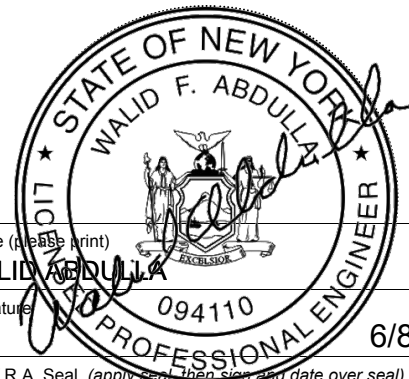
There was a minor change in module layout.
All revisions marked and bubbled on the plans.

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)

WALID ABDULLA

Signature



Date

6/8/22

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