

PW7: Letter of Completion Request

(Must be typewritten)

1 LOCATION INFORMATION

House No(s) 111-23 Street Name FRANCIS LEWIS BOULEV Work Proposed on Floor No(s)
Borough QUEENS Block 10965 Lot 273 BIN 4234954 CB No. 413

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 Mobile Telephone
E-Mail info@nybuildingassociates.com 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 07/28/2022

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

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