



After-Hour Work Permit Application

Please File 4 Copies
Application Must Be Typewritten



1 Filing Status

Work Permit Number 510016974

First Variance

2 Location

Borough Staten Island Block 169 Lot(s) 1 BIN C.B. No. 501
House No.(s) 25 Street Name: Wayne Street Apt/Condo No(s).
Special Place Name NYCHA PROJECT Floor(s)

3 Contractor/Applicant

Last Name Arker First Name Alex M.I. Title
Business Name AD Diversified Business Phone (516) 374 3336
Address 930 Broadway City Woodmere State NY Zip 11598

4 Subcontractor

Last Name First Name M.I.
Business Name Business Phone ()
Address City State Zip

5 Owner

Last Name Papamichael First Name Chris M.I. Title
Business Name Markham Gardens LP Business Phone (718) 777-8212
Address 31-87 Steinway Street City Astoria State NY Zip. 11103

6 Variance Information

Residence Within 200 feet of Site
Date(s) Requested 12/20/08 Day(s) of Week SATURDAY Hours: From 10am to 4pm

7 Description of Work

Framing, Plumbing, insulating, sheet rocking and electrical work being performed

8 Reason for Variance

This project Markham gardens is a NYCHA Project in Staten Island. We are requesting Saturday Variance to do exterior Framing & Interior plumbing. Our Initiative is to accomodate NYCHA to the community and Variance will accomodate all needs necessary on this project. This project is not located within 200ft of residence. We will need this Variance until further notice.

9 Statements and Signatures

All information must be completed for review of this request.
The deadline to submit weekend variance requests is Tuesday at 3:00PM.
Incomplete submissions will be denied without review.

This permit must be posted visible to the public.

I hereby state that the above information is correct and complete to the best of my knowledge.

Falsification of any statement is a misdemeanor under Section 20-124 of the Administrative Code 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.

Applicant Name Alex Arker

Signature Date 12/10/08

Approvals

☒ Approved ☐ Denied ☐ Limited Approval

Limited To:

10 AM - 4 PM SAT

Examiner Name

MICHELLE JUBRAN, R.A.
Signature CHIEF PLAN EXAMINER

Date

Borough Superintendent Signature

Date

Michelle Jubran 12/17/08

Internal Use

Filing Fee

100.00

Permit Fee

80.00