



PW7: Certificate of Occupancy /
Letter of Completion Folder
Review Request

Must be typewritten.

DEPT. OF BLDGS. 510066018 Job Number
SC080127017 Scan Code

1 Location Information

House No(s) 138

Street Name Robert Lane

Work Proposed on Floor No(s) 1st

Borough Staten Island

Block 96

Lot 158

BIN

CB No. 01

2 Requestor Information

Individuals Relationship to Job (example: applicant, owner, filing representative)

Last Name Turner

First Name George

Middle Initial F

Business Name The Network Architecture Group

Business Telephone 718-442-2851

Business Address 38 Bayview Place

Business Fax

City S.I.

State NY

Zip 10304

Mobile Telephone 917-912-5087

E-Mail netarc@att.net

License Number 019756

3 Type of Request Choose one.

- ☒ Letter of Completion (Directive 14 or Non-Directive 14)
☐ TCO - Temporary Certificate of Occupancy (Borough Commissioner's Office approval may be required. All requirements must be fulfilled before a TCO will be issued)
☐ Renewal of TCO - Temporary Certificate of Occupancy (Borough Commissioner's Office approval may be required. All requirements must be fulfilled before a TCO will be issued)
☐ Final Certificate of Occupancy

4 Comments If additional space is required, write "see A1-1" here and submit a completed A1-1 form with this request.

5 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 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.

Requestor Signature

Date

8.12.09

Borough Commissioner's Office TCO Authorization Do not write in this section.

Comments:

Authorized Name (please print)

☐ Approved

☐ Disapproved

Authorized Signature (if approved only)

Date

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: Missing site survey - final
(Architect statement & seal)

8/12/2009
MK