



PW1: Plan / Work Application  
Must be typewritten



**1 Location Information** Required for all applications.

House No(s) 410 Street Name HUNTER AVENUE

Borough STATEN ISLAND Block 03725 Lot 00003 BIN 5105891 C.B. No. 502

Work on Floor(s) Apt. / Condo No(s)

**2 Applicant Information** Required for all applications. Fax, mobile telephone and e-mail address are optional information.

Last Name BOYLAND First Name TIMOTHY Middle Initial

Business Name TB ARCHITECTURE PLLC Business Telephone (718) 710-0710

Business Address 152 STUYVESANT PLACE, SUITE 205 Business Fax

City STATEN ISLAND State NY Zip 10301 Mobile Telephone (718) 710-0710

E-Mail TB@VB-ARCHITECTS.COM License Number 025062

Choose one: ☐ P.E. ☒ R.A. ☐ Sign Hanger ☐ R.L.A. ☐ Other:

**3 Filing Representative** Complete only if different from applicant specified in section 2. Fax, mobile phone, and e-mail are optional info.

Last Name First Name Middle Initial

Business Name Business Telephone

Business Address Business Fax

City State Zip Mobile Telephone

E-Mail Registration Number

**4 Filing Status** Required for all applications. Choose one and provide specified associated information.

☒ Initial Filing 5, 7, 11, 12A, 25-26

Choose only one:

☒ Standard Plan Examination or Review

☐ Professional Certification PC1, POC1

☐ Professional Certification of Objections AI1

☐ Prior to Approval Actions 25-26

☐ Amend Existing Filing 4A

☐ Subsequent Filing 6-7, 8A (Alt-2 only), 11

☐ Post Approval Amendment (PAA) 4A, 6, 24-25

Will PAA affect filing fees? ☐ Yes ☐ No

☐ New (Superseding) Applicant 4A, 25-26

☐ Reinstatement 24-26

☐ Withdrawal 26

☐ Specified in 4A and 6

☐ Entire Job

4A Indicate existing document number affected by filing:

**5 Job/Project Types** Choose one and provide specified associated information.

☐ Alteration Type 1 or Alteration Type 1 required to meet New Building requirements (28-101.4.5) 6A-E, 8B-C, 8F, 9-10, 12, 13C-F, 14, 18-20, 22 & PW1A, PD1

☐ Alteration Type 1, OT: "No Work" 8C, 8F, 9-10 & 12, 13C-F, 14, 18-19, 22, PW1A, PD1

☐ Alteration Type 2 5A, 6A-D, 8A-B, 9-10, 13C-E, & 14, 20, 22

☐ Alteration Type 3 5A, 6B-F, 8C, 9-10, 13C-E, 20, 22

☐ New Building 6A-E, 8F, 9A, 9C-K, 9M, 10, 12 & 13A-E, 14, 18-20, PW1A, PD1

☐ Sign 5A, 6B-D, 9A, 9D, 22-23

☐ Full Demolition 6B, 8D, 9A & 9C-D, 9K, 9M, 13D-E, 14, 21A, 22

☒ Subdivision 9A, 9D, 12A-B

☐ Condominium ☒ Improved 17 5A Directive 14 acceptance requested?

☐ Yes ☒ No

**6 Work Types** Select all that apply but no more than allowed by job and filing type. "OT" required on all NB and Alteration 1 initial applications.

6A ☐ BL - Boiler PW1C

☐ FA - Fire Alarm

☐ FB - Fuel Burning PW1C

6B ☐ EQ - Construction Equipment 15

☐ FS - Fuel Storage PW1C

☐ FP - Fire Suppression

☐ MH - Mechanical

6C ☐ OT/GC - General Construction

☐ PL - Plumbing PW1B

☐ SD - Standpipe PW1B

☐ SP - Sprinkler PW1B

6D ☐ OT - Other, describe:

6E ☐ CC - Curb Cut 16

☐ OT/LAN - Landscape

6F ☐ OT/ANT - Antenna

☐ OT/BPP - Builders Pavement Plan 8D

☐ OT/FPP - Fire Protection Plan

☐ OT/MAR - Marquee 8E, 26B

**7 Plans/Construction Documents Submitted** *Plans are required for most applications.*Are plans being submitted with this PW1? ☒ Yes ☐ No If yes, do the plans include: ☐ FO — Foundation ☐ EN — Energy Analysis**8 Additional Information**

| 8A | WT | Cost | WT | Cost | WT | Cost | 8B                                                                                                                                                                                                                        | Is a building enlargement proposed?          | 8C                                | Estimated Job Cost \$ |
|----|----|------|----|------|----|------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------|-----------------------------------|-----------------------|
|    |    |      |    |      |    |      | <input type="checkbox"/> No enlargement is proposed<br><input type="checkbox"/> Yes 12, PD1<br><input type="checkbox"/> Horizontal <input type="checkbox"/> Vertical<br>Additional Construction Floor Area: _____ sq. ft. | 8D                                           | Street Frontage: _____ linear ft. |                       |
|    |    |      |    |      |    | 8E   |                                                                                                                                                                                                                           | Height: _____ ft. Width: _____ ft.           |                                   |                       |
|    |    |      |    |      |    | 8F   |                                                                                                                                                                                                                           | Total Building Square Footage: _____ sq. ft. |                                   |                       |
|    |    |      |    |      |    |      |                                                                                                                                                                                                                           |                                              |                                   |                       |

**9 Additional Considerations, Limitations or Restrictions**9A Review is requested under which building code? ☒ 2022 ☐ 2014 ☐ 2008 ☐ 1968 ☐ Prior to 1968

| Yes |                                     | No                                  |                                                                                                                                                                                                                                                 | Yes                      |                                     | No                                                           |                                                       |
|-----|-------------------------------------|-------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|-------------------------------------|--------------------------------------------------------------|-------------------------------------------------------|
| 9B  | <input type="checkbox"/>            | <input type="checkbox"/>            | Alteration required to meet New Building requirements (28-101.4.5) If yes, 13A-B                                                                                                                                                                | <input type="checkbox"/> | <input type="checkbox"/>            | Change in number of dwelling units                           |                                                       |
|     | <input type="checkbox"/>            | <input type="checkbox"/>            | Alteration is a major change to exits                                                                                                                                                                                                           | <input type="checkbox"/> | <input type="checkbox"/>            | Change in occupancy / use                                    |                                                       |
|     | <input type="checkbox"/>            | <input type="checkbox"/>            |                                                                                                                                                                                                                                                 | <input type="checkbox"/> | <input type="checkbox"/>            | Change is inconsistent with current certificate of occupancy |                                                       |
| 9C  | <input type="checkbox"/>            | <input type="checkbox"/>            | Facade Alteration                                                                                                                                                                                                                               | <input type="checkbox"/> | <input type="checkbox"/>            | Change in number of stories                                  |                                                       |
|     | <input type="checkbox"/>            | <input type="checkbox"/>            | Adult Establishment If yes, plot diagram (except DM)                                                                                                                                                                                            | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Infill Zoning                                                |                                                       |
|     | <input type="checkbox"/>            | <input type="checkbox"/>            | Compensated Development (Inclusionary Housing)                                                                                                                                                                                                  | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Loft Board                                                   | Yes No Work Includes:                                 |
|     | <input type="checkbox"/>            | <input type="checkbox"/>            | Low Income Housing (Inclusionary Housing)                                                                                                                                                                                                       | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Quality Housing                                              | <input type="checkbox"/> Prefab wood I-joists         |
|     | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | Single Room Occupancy (SRO) Multiple Dwelling                                                                                                                                                                                                   | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Site Safety Job/Project                                      | <input type="checkbox"/> Structural cold-formed steel |
|     | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | Filing includes Lot Merger / Reapportionment If yes, 17                                                                                                                                                                                         | <input type="checkbox"/> | <input type="checkbox"/>            | Included in LMCCC                                            | <input type="checkbox"/> Open-web steel joists        |
| 9D  | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | Landmark                                                                                                                                                                                                                                        | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Filing to address violations (list #s—max. 5):               |                                                       |
|     | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | Little "E" or RD Site                                                                                                                                                                                                                           |                          |                                     |                                                              |                                                       |
|     | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | Unmapped/CCO Street                                                                                                                                                                                                                             |                          |                                     |                                                              |                                                       |
|     | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | Requesting legalization of work where no work without a permit violations have been issued                                                                                                                                                      |                          |                                     |                                                              |                                                       |
|     | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | Other (please specify on line provided below):                                                                                                                                                                                                  | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Filing to comply with Local Laws (list #s—max. 2)            |                                                       |
|     | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | CRFN(s) Restrictive Declaration / Easement (max. 4):                                                                                                                                                                                            |                          |                                     |                                                              |                                                       |
|     | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | CRFN(s) Zoning Exhibit (I, II, III, etc. - max. 4):                                                                                                                                                                                             |                          |                                     |                                                              |                                                       |
| 9E  | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | BSA Calendar Numbers (max. 5):                                                                                                                                                                                                                  |                          |                                     |                                                              |                                                       |
| 9F  | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | CPC Calendar Numbers (max. 5):                                                                                                                                                                                                                  |                          |                                     |                                                              |                                                       |
| 9G  | <input type="checkbox"/>            | <input type="checkbox"/>            | Work includes lighting fixture and/or controls, installation or replacement. [ECC §404 and §505]                                                                                                                                                |                          |                                     |                                                              |                                                       |
| 9H  | <input type="checkbox"/>            | <input type="checkbox"/>            | Work includes modular construction under New York State jurisdiction                                                                                                                                                                            |                          |                                     |                                                              | 9I High Rise Team tracking #:                         |
|     | <input type="checkbox"/>            | <input type="checkbox"/>            | Work includes modular construction under New York City jurisdiction                                                                                                                                                                             |                          |                                     |                                                              |                                                       |
| 9J  | <input type="checkbox"/>            | <input type="checkbox"/>            | Structural peer review required per BC 16. If yes, provide NYS P.E. license number:                                                                                                                                                             |                          |                                     |                                                              |                                                       |
| 9K  | <input type="checkbox"/>            | <input type="checkbox"/>            | Work includes permanent removal of standpipe, sprinkler or fire suppression related systems                                                                                                                                                     |                          |                                     |                                                              |                                                       |
| 9L  | <input type="checkbox"/>            | <input type="checkbox"/>            | Work includes partial demolition as defined in AC §28-101.5, or the raising/moving of a building If yes, 21B                                                                                                                                    |                          |                                     |                                                              |                                                       |
|     | <input type="checkbox"/>            | <input type="checkbox"/>            | Structural stability affected by proposed work                                                                                                                                                                                                  |                          |                                     |                                                              |                                                       |
| 9M  | <input type="checkbox"/>            | <input type="checkbox"/>            | Work involves or will result in 1) an amount of soil disturbance greater than or equal to 20,000 square feet or 2) the creation of 5,000 square feet or more of impervious surface.                                                             |                          |                                     |                                                              |                                                       |
|     | <input type="checkbox"/>            | <input type="checkbox"/>            | Work is part of a larger common plan or development or sale that involves or will result in 1) an amount of soil disturbance greater than or equal to 20,000 square feet or 2) the creation of 5,000 square feet or more of impervious surface. |                          |                                     |                                                              |                                                       |

**10 NYCECC Compliance** *New York City Energy Conservation Code*☐ To the best of my knowledge, belief and professional judgment, all work under this application is in compliance with the NYCECC\*Code Compliance Path (choose one): ☐ NYCECC ☐ ASHRAEEnergy Analysis (choose one): ☐ Tabular Analysis ☐ REScheck ☐ COMcheck ☐ Energy Modeling (EN1)☐ To the best of my knowledge, belief and professional judgment, all work under this application is exempt from the NYCECC\* in accordance with one of the following (choose one):☐ The work is an alteration of a State or National historic building.☐ The scope of the work is entirely in a "low-energy building" and is limited to the building envelope.☐ The entire scope of work involves a temporary structure and/or one or more of the following work types:

FA, FP, SD, SP, FS, EQ, CC, OT/BPP, OT/FPP. Other work types are not exempt.

☐ This is a post-approval amendment and exempt under a prior edition of the energy code. See statement of exemption on attached drawings.

|    |                 |     |                         |
|----|-----------------|-----|-------------------------|
| 11 | Job Description | 11A | Related DOB Job Numbers |
|----|-----------------|-----|-------------------------|

SUBDIVISION OF IMPROVED PROPERTY: MERGER OF SEVEN EXISTING TAX LOTS TO A SINGLE TENTATIVE TAX LOT #6. NO CHANGE TO METES & BOUNDS OF THE ZONING LOT. NO CHANGES TO EXISTING STRUCTURE(S).

11B Primary application job no.

|    |                        |
|----|------------------------|
| 12 | Zoning Characteristics |
|----|------------------------|

|     |                  |                   |                                                                                            |       |                                                                                                              |                                                     |       |
|-----|------------------|-------------------|--------------------------------------------------------------------------------------------|-------|--------------------------------------------------------------------------------------------------------------|-----------------------------------------------------|-------|
| 12A | District(s) R3-1 | 12B               | Street legal width: 30 ft.                                                                 | 00003 | 00005                                                                                                        | 00006                                               | 00024 |
|     | Overlay(s)       |                   | Street Status: <input checked="" type="checkbox"/> Public <input type="checkbox"/> Private | 00025 | 00026                                                                                                        | 00027                                               |       |
|     | Special Dist.(s) |                   | If the zoning lot includes multiple tax lots, list all tax lots here ►                     |       |                                                                                                              |                                                     |       |
|     | Map Number 27B   |                   |                                                                                            |       |                                                                                                              |                                                     |       |
| 12C | Proposed: Use*   | Zoning Floor Area | District                                                                                   | FAR   | Proposed Lot Details:                                                                                        | Proposed Yard Details:                              |       |
|     |                  | sq. ft.           |                                                                                            |       | Lot Type: <input type="checkbox"/> Corner <input type="checkbox"/> Interior <input type="checkbox"/> Through | Check here if no yards: <input type="checkbox"/> or |       |
|     |                  | sq. ft.           |                                                                                            |       | Lot Coverage %                                                                                               | Front Yard ft.                                      |       |
|     |                  | sq. ft.           |                                                                                            |       | Lot Area sq. ft.                                                                                             | Rear Yard ft.                                       |       |
|     |                  | sq. ft.           |                                                                                            |       | Lot Width ft.                                                                                                | Rear Yard Equivalent ft.                            |       |
|     |                  | sq. ft.           |                                                                                            |       | Proposed Other Details:                                                                                      | Side Yard 1 ft.                                     |       |
|     |                  | sq. ft.           |                                                                                            |       | Enclosed Parking? <input type="checkbox"/> Yes <input type="checkbox"/> No                                   | Side Yard 2 ft.                                     |       |
|     | Proposed Totals  | sq. ft.           |                                                                                            |       | If yes, no. of parking spaces:                                                                               |                                                     |       |
|     | Existing Total   | sq. ft.           |                                                                                            |       | Perimeter Wall Height ft.                                                                                    |                                                     |       |

\*Use can be one of the following: residential, commercial, manufacturing, or community facility. List only one use per line.

|    |                                                                                                                                |
|----|--------------------------------------------------------------------------------------------------------------------------------|
| 13 | Building Characteristics *Main use/dominant occupancy per AC §28-101.5. **Use 2022 Code equivalents. †Residential w/other use. |
|----|--------------------------------------------------------------------------------------------------------------------------------|

|     |                                                                                     |                                                          |                                             |                                                                                          |                                                      |                                        |
|-----|-------------------------------------------------------------------------------------|----------------------------------------------------------|---------------------------------------------|------------------------------------------------------------------------------------------|------------------------------------------------------|----------------------------------------|
| 13A | Primary structural system, choose one:                                              | <input type="checkbox"/> Masonry                         | <input type="checkbox"/> Concrete (CIP)     | <input type="checkbox"/> Concrete (Precast)                                              |                                                      |                                        |
|     |                                                                                     | <input type="checkbox"/> Wood                            | <input type="checkbox"/> Steel (Structural) | <input type="checkbox"/> Steel (Cold-Formed)                                             | <input type="checkbox"/> Steel (Encased in Concrete) |                                        |
| 13B | Existing                                                                            | Proposed                                                 | 13D                                         | Building Type: <input type="checkbox"/> 1, 2, or 3 Family <input type="checkbox"/> Other |                                                      |                                        |
|     | Structural Occupancy/Risk Cat.                                                      | 2022 Code Designations?                                  |                                             | Mixed use building?† <input type="checkbox"/> Yes <input type="checkbox"/> No            |                                                      |                                        |
|     | Seismic Design Cat.                                                                 |                                                          |                                             |                                                                                          |                                                      |                                        |
| 13C | Occupancy Classification*                                                           | <input type="checkbox"/> Yes <input type="checkbox"/> No |                                             | 13E                                                                                      | Existing                                             | Proposed                               |
|     | Construction Classification                                                         | <input type="checkbox"/> Yes <input type="checkbox"/> No |                                             |                                                                                          | Building Height ft.                                  | ft.                                    |
|     | Multiple Dwelling Classification                                                    |                                                          |                                             |                                                                                          | Building Stories                                     |                                        |
|     |                                                                                     |                                                          |                                             |                                                                                          | Dwelling Units                                       |                                        |
| 13F | Building was originally erected pursuant to which Building Code:                    | <input type="checkbox"/> 2022                            | <input type="checkbox"/> 2014               | <input type="checkbox"/> 2008                                                            | <input type="checkbox"/> 1968                        | <input type="checkbox"/> Prior to 1968 |
|     | The earliest Code with which this building or any part of it is required to comply: | <input type="checkbox"/> 2022                            | <input type="checkbox"/> 2014               | <input type="checkbox"/> 2008                                                            | <input type="checkbox"/> 1968                        | <input type="checkbox"/> Prior to 1968 |

|    |                  |
|----|------------------|
| 14 | Fill Choose one. |
|----|------------------|

☐ Not Applicable. ☐ On-Site ☐ Off-Site ☐ Under 300 cubic yards

|    |                        |    |                      |
|----|------------------------|----|----------------------|
| 15 | Construction Equipment | 16 | Curb Cut Description |
|----|------------------------|----|----------------------|

☐ Chute ☐ Sidewalk Shed Construction Material: \_\_\_\_\_  
☐ Fence Size: \_\_\_\_\_ linear ft. BSA/MEA Approval No. \_\_\_\_\_  
☐ Supported Scaffold ☐ Other: \_\_\_\_\_

Size of cut (with splays): \_\_\_\_\_ ft.  
Distance to nearest corner: \_\_\_\_\_ ft.  
to street: \_\_\_\_\_

|    |                         |    |                           |
|----|-------------------------|----|---------------------------|
| 17 | Tax Lot Characteristics | 18 | Fire Protection Equipment |
|----|-------------------------|----|---------------------------|

Original tax lots being merged or reapportioned (if applicable):

00003 00005 00024 00025 00026 00027 00006

Tentative tax lot numbers (new tax lots only):

00006

|                  | Existing                 | Proposed                 |                          |                          |
|------------------|--------------------------|--------------------------|--------------------------|--------------------------|
|                  | Yes                      | No                       | Yes                      | No                       |
| Fire Alarm       | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Fire Suppression | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Sprinkler        | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Standpipe        | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

**19 Open Spaces**

|                | Existing | Proposed |                | Existing | Proposed |
|----------------|----------|----------|----------------|----------|----------|
| Plaza Area     | sq. ft.  | sq. ft.  | Arcade Area    | sq. ft.  | sq. ft.  |
| Parking Area   | sq. ft.  | sq. ft.  | Parking Spaces |          |          |
| Loading Berths | sq. ft.  | sq. ft.  | Loading Berths |          |          |

**20 Site Characteristics**

Yes No

- ☐ ☐ Tidal Wetlands  
☐ ☐ Coastal Erosion Hazard Area  
☐ ☐ Fire District

Yes No

- ☐ ☐ Freshwater Wetlands  
☐ ☐ Urban Renewal  
☐ ☐ Flood Hazard Area If yes, 20A

**20A Flood Hazard Area Information**

Yes No

- ☐ ☐ Substantial improvement?  
☐ ☐ Substantially damaged?  
☐ ☐ Floodshields part of proposed work?

**21 Demolition Details** \*Mechanical equipment other than handheld devices to be used for demolition or removal of debris (BC §3306.4).

Yes No

- 21A ☐ ☐ Demo. filing is for a secondary structure? If yes, specify structure being demolished:  
☐ ☐ Mechanical means\* from out of building? If yes, mechanical means will demolish: ☐ entire structure or ☐ part of structure  
☐ ☐ Mechanical means\* from within building? If yes, describe equipment proposed:  
21B ☐ ☐ Demolition work affects the exterior building envelope  
☐ ☐ The scope of work involves raising/moving of a building

**22 Asbestos Abatement Compliance** Choose one.

- ☐ The scope of work requires related asbestos abatement as defined in the regulations of the NYC Department of Environmental Protection (DEP).  
☐ The scope of the work is not an asbestos project as defined in the regulations of the NYC DEP. DEP Control # is required.  
DEP ACP-5 Control No. \_\_\_\_\_  
☐ The scope of work is exempt from the asbestos requirement as defined in the regulations promulgated by the NYC DEP (15 RCNY 1-23(b)) or is an alteration to a building constructed pursuant to plans submitted for approval on or after April 1, 1987, in accordance with § 28-106.1.

**23 Sign**

|                                                                                                                        |                                          |                                  |                                                                                                                                                   |
|------------------------------------------------------------------------------------------------------------------------|------------------------------------------|----------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------|
| Purpose:                                                                                                               | Type:                                    | Estimated Cost: \$               | 23A Illuminated type: <input type="checkbox"/> Direct <input type="checkbox"/> Flashing <input type="checkbox"/> Indirect                         |
| <input type="checkbox"/> Advertising                                                                                   | <input type="checkbox"/> Illuminated 23A | Total Square Feet: _____         | Yes No                                                                                                                                            |
| <input type="checkbox"/> Non-Advertising                                                                               | <input type="checkbox"/> Non-Illuminated | Height above Curb: _____ ft. in. | <input type="checkbox"/> <input type="checkbox"/> If sign projects beyond building line, is owner billed for annual permit? If no, specify in 26B |
| Location: <input type="checkbox"/> Ground <input type="checkbox"/> Roof 23B <input type="checkbox"/> Wall              | Height above Roof: _____ ft. in.         |                                  | 23B <input type="checkbox"/> <input type="checkbox"/> Is roof sign tight, closed or solid?                                                        |
| Yes No                                                                                                                 |                                          |                                  | 23C Sign wording. If extensive, provide only key wording.                                                                                         |
| <input type="checkbox"/> <input type="checkbox"/> Is sign inside building line? If no, sign projects by: _____ ft. in. |                                          |                                  | 23D Distance from Arterial Highway: _____ ft.                                                                                                     |
| <input type="checkbox"/> <input type="checkbox"/> Designed for changeable copy? If no, 23C                             |                                          |                                  | 23E Distance from Park 1/2 acre or more: _____ ft.                                                                                                |
| <input type="checkbox"/> <input type="checkbox"/> Does an OAC have an interest in this sign or location? If yes, 23G   |                                          |                                  | 23F OAC Sign Number: _____                                                                                                                        |
| <input type="checkbox"/> <input type="checkbox"/> Within 900' and within view of an arterial highway? If yes, 23D      |                                          |                                  | 23G OAC Registration Number: _____                                                                                                                |
| <input type="checkbox"/> <input type="checkbox"/> Within 200' and within view of a park 1/2 acre or more? If yes, 23E  |                                          |                                  |                                                                                                                                                   |

→ If answer is "yes" to either of the above two questions and this is an advertising sign, OAC sign number is required in section 23F

**24 Comments** Place additional comments on an AI-1 form. See Guide for proper incorporation of professional certification statements.

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**25 Applicant's Statements and Signatures** *Required for all applications*

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 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. I prepared or supervised the preparation of the construction documents and work shown thereon comply with the provisions of the NYC Administrative Code and other applicable laws and rules, (check here if) except as set forth in the accompanying documents. I acknowledge that I have read and complied with all regulations pertaining to this application and supplementary schedules submitted. Cluster Development Statement (if applicable). I hereby state that all specifications relating to this job are identical to those previously filed under the group lead job number, except as specified herein.

For Initial New Building and Alteration 1 applications filed under the 2022 NYC Building Code only: does this building qualify for high-rise designation? ☐ Yes ☐ No

Directive 14 Initial applications only: I certify that the construction documents submitted and all construction documents related to this application do not require a new or amended Certificate of Occupancy as there is no change in use, exits, or occupancy. ☐ Yes ☐ No

Name (print): PAUL LIOTTASign and Date: 11-20-25

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

**26 Property Owner's Statements and Signatures**

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 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. Furthermore, I understand that I am responsible for insuring that a final inspection be performed when the permitted work is complete, and that a satisfactory report of final inspection be submitted, along with all required submittal documents, so that the NYC Department of Buildings may issue a letter of completion or certificate of occupancy within the time prescribed by law.

I have authorized the applicant to file this application for the work specified herein and all future amendments. I will not knowingly authorize any work that is not in compliance with all applicable laws, rules, and regulations.

Yes ☐ No ☐

☐ ☐ **Fee Exemption Request (Non-Profit Owned and Operated)**  
In accordance with Administrative Code §28-112.1, Exception 1, I certify that the deed holder is a corporation or association organized and operated exclusively for the purposes indicated in such section, and that the property is used exclusively by such entity for such purpose. ★

☐ ☐ **Fee Exemption Request (NYCHA/HHC, NYC Agency, or Other Government Owned and Operated)** The building or any part thereof to be constructed, renovated, altered or demolished is owned and operated exclusively for the purposes of the NYC Agency, NYC Authority, NYS Agency, Federal Government or any other government entity. ★

☐ ☒ **Owner's Certifications Regarding Occupied Housing**  
The building to be altered, constructed or demolished contains one or more occupied dwelling units.

☐ ☐ The building to be altered, constructed or demolished contains one or more dwelling units that will remain occupied during construction. These occupied dwelling units have been clearly identified on the submitted construction documents.

☐ ☒ The site of the building to be altered or demolished, or the site of the new building to be constructed, contains occupied housing accommodations subject to rent control or rent stabilization under Chapters 3 and 4 of Title 26 of the New York City Administrative Code. If yes, select one of the following:

☐ The owner is not required to notify the New York State Homes and Community Renewal (NYSHCR) of the owner's intention to file because the nature and scope of the work proposed, pursuant to NYSHCR regulations, does not require notification.

☐ The owner has notified the New York State Homes and Community Renewal (NYSHCR) of its intention to file such construction documents/application for such permit and has complied with all requirements imposed by the regulations of such agency as preconditions for such [filing/application].

Provide date NYSHCR notified: \_\_\_\_\_

☐ ☐ **Owner's Certification for Directive 14 Applications (if applicable)**  
I have read and am fully aware of the applicant's statement that the construction documents submitted and all construction documents related to this application will not require a new or amended Certificate of Occupancy as there is no change in use, exits, or occupancy and the work is not inconsistent with the current certificate of occupancy. Furthermore, I understand that I am responsible for retaining a qualified design professional to perform a final inspection when the permitted work is complete and this professional must submit a satisfactory final inspection report to the NYC Department of Buildings within the time following inspection prescribed by Department rule.

Notes for Section 26A: Section required if unit owner signed Section 26 Signature required for authorized representative of Condo or Co-Op board.

★ For fee waivers, please see the PW1 User Guide

Owner ☒ Individual ☐ Partnership ☐ NYCHA / HHCType: ☐ Corporation ☐ Other Government ☐ NYC Agency☐ Condo Unit Owner or Co-Op Tenant-shareholder 26AIs the deed holder a non-profit organization? ☐ Yes ☐ NoName (please print): PAUL LIOTTARelationship to Owner: HOMEOWNERBusiness Name/Agency: N/AStreet Address: 410 HUNTER AVENUECity: STATEN ISLAND State: NY Zip: 10306Telephone Number: (718) 916-7236 Fax: \_\_\_\_\_E-Mail Address: LIOTTAPAU1@GMAIL.COMSignature and Date: Paul Liotta 2-13-25**26A Condo/Co-Op Board** See note in bottom left corner of page.

Name (please print): \_\_\_\_\_

Title: \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_

State: \_\_\_\_\_

Zip: \_\_\_\_\_

Telephone Number: \_\_\_\_\_

Fax: \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

Signature and Date: Paul Liotta 2-13-25**26B Lessee Responsible for Annual Sign or Marquee Permit**

Name (please print): \_\_\_\_\_

Relationship to Owner: \_\_\_\_\_

Business Name/Agency: \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_

State: \_\_\_\_\_

Zip: \_\_\_\_\_

Telephone Number: \_\_\_\_\_

Fax: \_\_\_\_\_

E-Mail Address: \_\_\_\_\_