



PW7:

Letter of Completion Request

(Must be typewritten)

1 LOCATION INFORMATION

House No(s) 95	Street Name DETROIT AVENUE	Work Proposed on Floor No(s) ROF
Borough 5	Block 5696 Lot 64	BIN 5077181 CB No. 503

2 REQUESTOR INFORMATION

Individuals Relationship to Job (Example: Applicant, Owner Filing Representative) Filling Representative

Last Name De Los Santos	First Name Rosa	Middle Initial I
Business Name Sunrun Installation Services	Business Telephone 732-551-5638	
Business Address 26 Worlds Fair Dr Ste K	Business Fax	
City Somerset	State NJ	Zip 08773
Mobile Telephone 732-551-5638		
E-Mail rosy.delossantos@sunrun.com	License Number 6266	

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 Rosa Concepcion

Date 12/27/2021

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: _____			