



Certificate of Occupancy

CO Number: 302081039F

This certifies that the premises described herein conforms substantially to the approved plans and specifications and to the requirements of all applicable laws, rules and regulations for the uses and occupancies specified. No change of use or occupancy shall be made unless a new Certificate of Occupancy is issued. *This document or a copy shall be available for inspection at the building at all reasonable times.*

A.	Borough: Brooklyn	Block Number: 02523	Certificate Type: Final
	Address: 214 GREEN STREET	Lot Number(s): 29	Effective Date: 03/24/2011
	Building Identification Number (BIN): 3064193	Building Type: New	
<i>For zoning lot metes & bounds, please see BISWeb.</i>			
B.	Construction classification: 1-D	(1968 Code)	
	Building Occupancy Group classification: J2	(1968 Code)	
	Multiple Dwelling Law Classification: HAEA		
	No. of stories: 5	Height in feet: 60	No. of dwelling units: 10
C.	Fire Protection Equipment: Sprinkler system		
D.	Type and number of open spaces: None associated with this filing.		
E.	This Certificate is issued with the following legal limitations: None		
Borough Comments: None			

Borough Commissioner

Commissioner

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Permissible Use and Occupancy						
All Building Code occupancy group designations are 1968 designations, except RES, COM, or PUB which are 1938 Building Code occupancy group designations.						
Floor From To	Maximum persons permitted	Live load lbs per sq. ft.	Building Code occupancy group	Dwelling or Rooming Units	Zoning use group	Description of use
CEL		OG	B-2 D-2		2, 2	ACCESSORY USES
001		50	E		4	AMBULATORY DIAGNOSTIC OR TREATMENT HEALTH CARE FACILITY
001		40	J-2	1	2	LOBBY , LOWER PARTS OF 2 DWELLING UNITS & MANDATORY"QUALITY HOUSING"COMMUNAL RECREATION ROOM
002		40	J-2	2	2	1 DWELLING UNIT AND UPPER PARTS OF 2 DWELLING UNITS
003		40	J-2	2	2	2 DWELLING UNITS
004		40	J-2	2	2	2 DWELLING UNITS
005		40	J-2	2	2	1 DWELLING UNIT & LOWER PART OF 2 DWELLING UNITS
ATT		40	J-2	1	2	STORAGE AND UPPER PART PF 2 DWELLING UNITS
ATT						GENERAL NOTE: TOTAL (10) DWELLING UNITS & AMBULATORY DIAGNOSTIC OR TREATMENT HEALTH CARE FACILITY
END OF SECTION						



Borough Commissioner



Commissioner

END OF DOCUMENT

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