

1. LOCATION & REQUESTOR INFORMATION *(required for all requests)*

Provide location information, requestor's name, email, and relation to job. Please note denied requests will be sent disapproval reason(s) to email address provided on Borough Drop-off Intake Sheet.

House No: _____ Street Name: _____ Application#: _____ Date: _____
 Borough: _____ Block: _____ Lot: _____ BIN: _____ Requestor Name: _____
 Relation to job (select one): ☐ Owner ☐ Applicant of Record ☐ Contractor ☐ Filing Representative
 Email: _____ Owner's Email: _____ ☐ Initial ☐ Resubmission Date: _____

2. TYPE OF REQUEST

The **Borough Drop-off Intake Sheet** is required for each request submitted. Please ensure all forms are fully completed, signed, sealed, and dated. Select **one** of the following options:

- ☐ **PAA (Post Approval Amendments)**
 Submit **PW1 (PAA)** to make changes to an already approved (P+ status in BIS) application.
 Changes made after initial approval are subject to PAA fees and plan examination unless initial job was professionally certified.
- ☐ **PW1 Withdrawal**
 Submit **PW1** to withdraw all or part of a job.
- ☐ **Initial Work Permit Application**
 Submit **PW2 Initial Work Permit Application** if this is the first time applying for this permit.
 Select **No Work Permit**, if this application will not include any physical work to be performed under this permit.
- ☐ **PW6 Certificate of Occupancy Inspection Application (Initial)**
 Submit **PW6** to initiate inspections required prior to issuance of a Certificate of Occupancy.
- ☐ **PW7 Certificate of Occupancy/Temporary Certificate of Occupancy/Letter of Completion**
 Submit **PW7** to obtain a final Certificate of Occupancy (CO), Temporary Certificate of Occupancy (TCO), Letter of Completion (LOC) or renew a Temporary Certificate of Occupancy. **NOTE: Resubmissions require a new BSCAN sticker**

INTERNAL USE ONLY

Reason(s) for hold/denial will be indicated below by borough staff and emailed to addresses indicated above

☐ **LPC Calendered Building 40-Day Hold (Full Demolition Applications Only)** Date Processed: ____/____/20____

Disapproval Reasons

Request cannot be processed for the following reason(s):

- | | |
|---|---|
| <input type="checkbox"/> Job is not approved.
<input type="checkbox"/> Job is in 'R - PERMIT-ENTIRE' status.
<input type="checkbox"/> Job is for different borough submit to corresponding borough.
<input type="checkbox"/> Fees due, pay outstanding fees and resubmit.
<input type="checkbox"/> Job is on hold for 'No Good Check', resolve and resubmit.
<input type="checkbox"/> Withdrawal Job/Doc #/Work type is missing/not on file.
<input type="checkbox"/> Property/Job on 'Hold', see Borough Commissioner's Office.
<input type="checkbox"/> Architect/Engineer's signature and/or seal missing.
<input type="checkbox"/> Applicant's information is different from Department records.
<input type="checkbox"/> Permitted application must see Plan Exam for determination if withdrawal inspection is required.
<input type="checkbox"/> Inspection required resubmit with 'Final-Pass' inspection report (OP113).
<input type="checkbox"/> Work type signed off, cannot withdraw.
<input type="checkbox"/> PAA approved, cannot withdraw.
<input type="checkbox"/> All PAA fees must be paid prior to withdrawal.
<input type="checkbox"/> Resolve open required items and resubmit for permit. | <input type="checkbox"/> Not an initial work permit application must be processed through permit renewal.
<input type="checkbox"/> No permits have been issued for this job number.
<input type="checkbox"/> Job number incorrect/invalid.
<input type="checkbox"/> Floors invalid.
<input type="checkbox"/> Electrical Control Number(s) missing (required for NB filings).
<input type="checkbox"/> Notarization by Superintendent of Construction missing.
<input type="checkbox"/> Open ECB/DOB violation(s)
<input type="checkbox"/> Incomplete PAA
<input type="checkbox"/> Missing inspection sign-off(s):
<input type="checkbox"/> Construction <input type="checkbox"/> Plumbing <input type="checkbox"/> Electrical <input type="checkbox"/> Elevator
<input type="checkbox"/> Other: _____
<input type="checkbox"/> Missing required items(s): _____
<input type="checkbox"/> TR-1 Error(s): _____
<input type="checkbox"/> Missing/Incomplete/Invalid:
<input type="checkbox"/> Form(s) _____
<input type="checkbox"/> Section(s) _____
<input type="checkbox"/> Other: _____ |
|---|---|