



NEW YORK CITY AGENCY FILINGS, APPROVALS & PERMITS

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New York, NY 10001

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PROJECT INFORMATION SHEET

Project:

1. Filing Type (choose 1)

- ☐ **Standard Review:** Plans are reviewed by a DOB examiner for compliance.
- ☐ **Professional Certification:** Applicant takes full responsibility for plan compliance without DOB examiner review. (*refer to DOB OPP 01/2004*)

2. Signoff Type (choose 1)

- ☐ **Directive-14:** Applicant or designated 3rd party performs final inspection
- ☐ **Non-Directive-14:** DOB performs final inspection

3. Asbestos present?

☐ Yes ☐ No

If no, please provide a copy of recent ACP-5 for area of work.

4. Are there any Rent Controlled or Stabilized apartments?

☐ Yes ☐ No

If yes, please 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/apply 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:_____

5. **Will the building be occupied during construction?** ☐ Yes ☐ No
If yes, please provide the number of occupied apartments: _____
6. **For all modifications of existing fire alarm systems, provide copy of base building Letter of Approval**
7. **Please provide copies all Zoning Exhibits/Special permits/ Easements** (for New Building and enlargement applications)

Kindly complete and return to our office. If you have any further questions, please feel free to contact us.