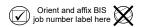




## PW1: Plan / Work Application

Must be typewritten



House No(s) Street Name Borough Block Lot BiN C.B. No.  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 First Name Middle Initial Business Name Business Fax  City State Zip Mobile Telephone E-Mail Choose one: P.E. RA. 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 Name City State Zip Mobile Telephone R.L.A. Other:  4 Filing Status Required for all applications. Choose one and provide specified associated information.										
Borough Block Lot BIN C.B. No.  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 First Name Middle Initial Business Name Business Telephone Business Address Business Fax  City State Zip Mobile Telephone  E-Mail License Number  Choose one: P.E. R.A. Sign Hanger R.L.A. Other:  1 Filling 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										
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 First Name Middle Initial Business Name Business Fax  City State Zip Mobile Telephone  E-Mail License Number  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										
2 Applicant Information Required for all applications. Fax, mobile telephone and e-mail address are optional information.  Last Name First Name Middle Initial  Business Name Business Telephone  Business Address Business Fax  City State Zip Mobile Telephone  E-Mail License Number  Choose one: P.E. R.A. Sign Hanger R.L.A. Other:  3 Filling 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										
Last Name First Name Middle Initial  Business Name Business Telephone  Business Address Business Fax  City State Zip Mobile Telephone  E-Mail License Number  Choose one: P.E. R.A. Sign Hanger R.L.A. Other:    P.E. R.A. Sign Hanger R.L.A. Other:										
Last Name First Name Middle Initial  Business Name Business Telephone  Business Address Business Fax  City State Zip Mobile Telephone  E-Mail License Number  Choose one: P.E. R.A. Sign Hanger R.L.A. Other:    P.E. R.A. Sign Hanger R.L.A. Other:										
Business Name Business Address Business Fax  City State Zip Mobile Telephone  E-Mail License Number  Choose one: P.E. R.A. Sign Hanger R.L.A. Other:    P.E. R.A. Sign Hanger R.L.A. Other:										
Business Address  City State Zip Mobile Telephone  E-Mail License Number  Choose one: P.E. R.A. Sign Hanger R.L.A. Other:    Sign 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										
City State Zip Mobile Telephone  E-Mail License Number  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										
E-Mail License Number  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										
Choose one: P.E. R.A. Sign Hanger R.L.A. Other:    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										
Last Name First Name Middle Initial  Business Name Business Telephone  Business Address Business Fax  City State Zip Mobile Telephone  E-Mail Registration Number										
Last Name First Name Middle Initial  Business Name Business Telephone  Business Address Business Fax  City State Zip Mobile Telephone  E-Mail Registration Number										
Business Name Business Telephone Business Address Business Fax City State Zip Mobile Telephone E-Mail Registration Number										
Business Address  City State Zip Mobile Telephone  E-Mail Registration Number										
City State Zip Mobile Telephone  E-Mail Registration Number										
E-Mail Registration Number										
4 Filing Status Required for all applications. Choose one and provide specified associated information.										
9										
Initial Filing 5, 7, 11, 12A, 25-26 Prior to Approval Actions 25-26 Reinstatement 24-26										
Choose only one: Amend Existing Filing 4A Withdrawal 26										
Standard Plan Examination or Review Subsequent Filing 6-7, 8A (Alt-2 only), 11 Specified in 4A and 6										
Professional Certification PC1, POC1										
New (Superseding) Applicant 4A, 25-26 affected by filling:										
5 Job/Project Types Choose one and provide specified associated information.										
Alteration Type 1 or Alteration Type 1 required Alteration Type 2 5A, 6A-D, 8A-B, 9-10, 13C-E, & Full Demolition 6B, 8D, 9A &										
to meet New Building requirements (28-101.4.5)  14, 20, 22  9C-D, 9K, 9M, 13D-E, 14, 21A, 22  Alteration Type 3 5A, 6B-F, 8C, 9-10, 13C-E, 20, Subdivision 2A, 2B, 43A, B, 2B,										
0A-E, 8B-C, 8F, 9-10, 12, 13C-F, 14, 18-20, 22 & 22   Subdivision 9A, 9D, 12A-B										
PW1A, PD1 New Building 6A-E, 8F, 9A, 9C-K, 9M, 10, 12 & ☐ Condominium ☐ Improved 5  Alteration Type 1, OT: "No Work" 8C, 8F, 9-10 & 13A-E, 14, 18-20, PW1A, PD1 5A Directive 14 acceptance requeste										
12, 13C-F, 14, 18-19, 22, PW1A, PD1 Sign 5A, 6B-D, 9A, 9D, 22-23 □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 <i>PW1C</i> FS - Fuel Storage <i>PW1C</i> PL - Plumbing <i>PW1B</i> 6E CC - Curb Cut <i>16</i>										
FA - Fire Alarm										
FB - Fuel Burning PW1C MH - Mechanical SP - Sprinkler PW1B 6F OT/ANT - Antenna  6B EQ - Construction 6C OT/GC - General 6D OT - Other, describe:										
6B EQ - Construction 6C OT/GC - General 6D OT - Other, describe: ☐ OT/BPP - Builders Pavement Plan ☐ OT/FPP - Fire Protection Plan ☐ OT/FPP - Fire Protection Plan										
□ OT/MAR - Marquee 8E, 26B										

PW<sub>1</sub> PAGE Plans/Construction Documents Submitted Plans are required for most applications. Are plans being submitted with this PW1? If yes, do the plans include:  $\square$  EN Yes ☐ No ☐ FO - Foundation - Energy Analysis **Additional Information** 8A WT Cost WT Cost WT Cost 8B Is a building enlargement proposed? 8C Estimated Job Cost \$ ☐ No enlargement is proposed 8D Street Frontage: linear ft. ☐ Yes 12, PD1 8E Height: ft. Width: ft. ☐ Horizontal □ Vertical 8F Total Building Square Footage: Additional Construction Floor Area: sq. ft sq. ft Additional Considerations, Limitations or Restrictions 9A Review is requested under which building code? 2014 2008 1968 Prior to 1968 Yes No Yes No 9B ☐ Alteration required to meet New Building ☐ Change in number of dwelling units requirements (28-101.4.5) If yes, 13A-B ☐ Change in occupancy / use ☐ Alteration is a major change to exits ☐ Change is inconsistent with current certificate of occupancy ☐ Change in number of stories 9C ☐ Façade Alteration ☐ Adult Establishment If yes, plot diagram (except DM) ☐ Infill Zoning ☐ Compensated Development (Inclusionary Housing) □ Loft Board Yes No Work Includes: ☐ Low Income Housing (Inclusionary Housing) ☐ Quality Housing Prefab wood I-joists ☐ ☐ Single Room Occupancy (SRO) Multiple Dwelling ☐ Site Safety Job/Project Structural cold-formed steel Filing includes Lot Merger / Reapportionment If yes, 17 ☐ Included in LMCCC Open-web steel joists 9D Landmark ☐ Filing to address violations (list #s-max. 5): ☐ Little "E" or RD Site ☐ Unmapped/CCO Street ☐ Requesting legalization of work where no work without a permit violations have been issued LL Number Year ☐ Other (please specify on line provided below): ☐ Filing to comply with Local Laws (list #s-max. 2) CRFN(s) Restrictive Declaration / Easement (max. 4): CRFN(s) Zoning Exhibit (I, II, III, etc. - max. 4): 9E BSA Calendar Numbers (max. 5): 9F CPC Calendar Numbers (max. 5): 96 Work includes lighting fixture and/or controls, installation or replacement. [ECC §404 and §505] 9H ☐ Work includes modular construction under New York State jurisdiction High Rise Team tracking #: ☐ Work includes modular construction under New York City jurisdiction 9J Structural peer review required per BC 16. If yes, provide NYS P.E. license number: 9K Work includes permanent removal of standpipe, sprinkler or fire suppression related systems Work includes partial demolition as defined in AC §28-101.5, or the raising/moving of a building If yes, 21B Structural stability affected by proposed work 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 9M square feet or more of impervious surface. 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. 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\*

NYCECC □ASHRAE Code Compliance Path (choose one):

Energy 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.

PW1

11 Job Description	11A Related DOB Job Numbers			
<u> </u>	· · ·			
	-			
	44D Di			
	11B Primary application job no.			
12 Zoning Characteristics				
12A District(s)	12B Street legal width: ft.			
Overlay(s)	Street Status: Public Private			
Special Dist.(s)	If the zoning lot includes multiple			
Map Number	tax lots, list all tax lots here ►			
12C Proposed: Use* Zoning Floor Area District FAR	Proposed Lot Details: Proposed Yard Details:			
sq. ft.	Lot Type: Corner Interior Through Check here if no yards: 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? Yes No Side Yard 2 ft.			
Proposed Totals sq. ft.	If yes, no. of parking spaces:			
Existing Total sq. ft.	Perimeter Wall Heightft.			
*Use can be one of the following: residential, commercial, ma	anufacturing, or community facility. List only one use per line.			
13 Building Characteristics *Main use/dominant occupant	ncy per AC §28-101.5. **Use 2014 Code equivalents only. ‡Residential w/other use.			
13A Primary structural system, <i>choose</i> <b>one</b> : Masonry	Concrete (CIP) Concrete (Precast)			
₩ood	Steel (Structural) Steel (Cold-Formed) Steel (Encased in Concrete)			
13B Existing F	Proposed 13D Building Type:  1, 2, or 3 Family  Other			
Structural Occupancy/Risk Cat.	Mixed use building? <sup>‡</sup> Yes No			
Seismic Design Cat. Designations?	Designations? 13E Existing Proposed			
13C Occupancy Classification* Yes No	Building Height ft. ft. ft.			
Construction Classification Yes No	□Yes □No Building Stories			
Multiple Dwelling Classification  13F Building was originally erected pursuant to v	Dwelling Units Dwelling Units Prior to 1968			
The earliest Code with which this building or any part of it is				
	3 required to comply.			
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: Size of cut (with splays): ft.			
<del>-</del>	SA/MEA Approval No. Distance to nearest corner: ft.			
Supported Scaffold Other:	to street:			
17 Tax Lot Characteristics	18 Fire Protection Equipment			
Original tax lots being merged or reapportioned (if applicable				
Singifical tax lots being merged of reapportioned (if applicable	Yes No Yes No			
	Fire Alarm			
Tentative tax lot numbers (new tax lots only):	Fire Suppression ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐			
	Standpipe			

PM1 PAGE 4

19 Open Spaces									
	Existing Proposed				Existing	Proposed			
Plaza Area	· ·		cade Area	sq. ft.	sq. ft.				
Parking Area	sq. ft.	sq. ft.	Pa	rking Spaces					
Loading Berths	sq. ft.	sq. ft.	Lo	ading Berths					
20 Site Charact	20 Site Characteristics 20A Flood Hazard Area Information								
☐ ☐ Coasta	□       Tidal Wetlands       □       □       Freshwater Wetlands       □       □       Substantial improvement?         □       □       Coastal Erosion Hazard Area       □       □       Urban Renewal       □       □       Substantially damaged?								
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:									
22 Asbestos Abatement Compliance Choose one.									
<ul> <li>The scope of work requires related asbestos abatement as defined in the regulations of the NYC Department of Environmental Protection (DEP).</li> <li>The scope of the work is <b>not</b> an asbestos project as defined in the regulations of the NYC DEP. DEP Control # is required.</li> <li>DEP ACP-5 Control No.</li> <li>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.</li> </ul>									
23 Sign									
Yes No	Type:    Illuminated 23A g	Estimated Cost: \$ Total Square Feet: Height above Curb: Vall Height above Roof:  If no, sign projects by:	ft. in. ft. in.	23B 🗆 🗀	If sign projects beyond to billed for annual permit?  Is roof sign tight, closed	If no, specify in 26B or solid?			
<ul> <li>☐ Is sign inside building line? If no, sign projects by:ftin.</li> <li>☐ Designed for changeable copy? If no, 23C</li> <li>☐ Does an OAC have an interest in this sign or location? If yes, 23G</li> </ul>									
☐ ☐ Within 900' and within view of an arterial highway? If yes, 23D ☐ Distance from Arterial Highway:									
☐ Within 200' and within view of a park 1/2 acre or more? If yes, 23E  23E Distance from Park 1/2 acre or more:									
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  23F OAC Sign Number:  23G OAC Registration Number:									
auvertising sign, OAO sign number is required in section 25F									

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

PV	<b>V1</b>						PAGE 5				
25	<b>А</b> р	plic	ant's Statements and Signatures Required for all a	pplications.							
	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 or allowed to be 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 specifications herewith submitted and to the best of my knowledge and belief, 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 instructions 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 2008 or 2014 NYC Building										
	Code	e only	: does this building qualify for high-rise designation? Yes N	No	Name (print):		<del>/</del>				
	Directive 14 initial applications only: I certify that the construction documents submit all construction documents related to this application do not require a new or amended Occupancy as there is no change in use, exits, or occupancy.   ☐ Yes ☐ No			I Certificate of	Sign and Date:	ply seal, then sign and date ov	· · · · · · · · · · · · · · · · · · ·				
	1				P.E. / K.A. Seal (ap)	pry sear, we <u>m sign and</u> date of	ver sear)				
26											
	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 file 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 or allowed to be 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.  Owner Individual Partnership NYCHA / HHC Type: Corporation Other Government NYC Agency										
	Yes		e with all applicable laws, rules, and regulations.			Co-Op Tenant-sharehol					
			Fee Exemption Request (Non-Profit Owned and Operated) In accordance with Administrative Code §28-112.1, Exception 1, I certify			a non-profit organization	? □ Yes □ No				
			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 purposed.	Name (pl Relationshi	ease print): p to Owner:						
			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.	Business Nar	ne/Agency:						
				Stre	et Address:	0	7.				
		П	Owner's Certifications Regarding Occupied Housing		City:	State:	Zip:				
			The building to be altered, constructed or demolished contains one or more occupied dwelling units.		ne Number:	Fax:					
			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.	Signature and	d Date						
			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. <i>If yes, select one of the</i>	26A Cond	o/Co-Op Board	See note in bottom lef	t corner of page.				
					lease print):						
			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.		Title:						
				Stre	eet Address:						
					City:	State:	Zip:				
			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		ne Number:	Fax					
			requirements imposed by the regulations of such agency as preconditions for such filling/application].		ail Address:						
			Provide date NYSHCR notified:	Signature an	d Date						
	_	_	Owner's Certification for Directive 14 Applications (if applicable)	26B Less	ee Responsible	for Annual Sign or	Marquee Permit				
		Ш	I have read and am fully aware of the applicant's statement that the construction documents submitted and all construction documents related	Name (p	lease print):						
			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	Relationsh	ip to Owner:						
			work is not inconsistent with the current certificate of occupancy. Furthermore, I understand that I am responsible for retaining a qualified	Business Na	me/Agency:						
			design professional to perform a final inspection when the permitted work is complete and this professional must submit a satisfactory final	Stre	eet Address:						
			inspection report to the NYC Department of Buildings within the time following inspection prescribed by Department rule.		City:	State:	Zip:				
			Section 26A: Section required if unit owner signed Section 26. Signature	Telepho	ne Number:	Fax:					
			or authorized representative of Condo or Co-Op board.	E-M	ail Address:						

★ For fee waivers, please see the PW1 User Guide