

STAFF USE ONLY

LPC DOCKET #: DATE RECEIVED: STAFF: PERMIT TYPE:

FASTRACK APPLICATION FORM FOR WORK ON DESIGNATED PROPERTIES

INSTRUCTIONS FOR FILING

This application for certain work types can be processed within ten days of receipt if it is complete and there are no outstanding LPC violations against the property. A complete application includes **ALL 5 SECTIONS** of this two page form and materials needed to describe the project and its compliance with the Commission's rules. Please read the instructions for each section carefully, and provide the information requested.

	ST: Please complete the materials checklist for your proposed work type. All required materials must be e your application cannot be processed through the FasTrack system.				
INTERIOR ALTERATIONS ☐ Interior Alterations ☐ Place of Assembly/Certificate of Occupancy/No Work Proposed	☐ Submit a copy of your signed and sealed DOB Drawings				
CONCRETE SIDEWALK REPLACEMENT AND BELOW- GRADE UTILITY INSTALATIONS	 □ Photographs showing existing material(s), condition and the pattern of sidewalk and adjacent sidewalks □ Plan showing existing and proposed concrete scoring pattern indicating relationship to the patterns of the adjacent sidewalks □ Concrete specifications showing tint color to match the adjacent sidewalks. 				
ROOFTOP AND REAR YARD DECKS AND RAILINGS	□ Photos of existing roof and from surrounding points on the street to determine the potential visibility □ Existing and proposed elevation & sections at the same scale showing the dimension of the proposed deck, railings and steps ROOFTOP DECKS AND ASSOCIATED RAILINGS: □ Also include site line section drawings from across the street and oblique views to show they are not visible. Sight lines must be taken from a 6'-0" eye level. REAR YARD DECKS: □ Also include a site plan indicating the location of the building and deck to show they won't be visible from a public thoroughfare				
MINOR EXTERIOR FAÇADE / ROOF REPAIRS	 ☐ A condition statement describing the type and extent of deterioration ☐ Written specifications for method of repair ☐ Recipe of mortar and/or resurfacing/patching mix Name of chemicals or treatment products proposed 				
WINDOW AND DOOR WORK ON NON-VISIBLE FAÇADES	 □ A block plan or site plan showing the windows/doors will not be visible from any surrounding street □ Typical elevation drawings or catalog cut sheets of proposed windows/doors IF ALTERING OR CREATING NEW MASONRY OPENINGS: □ Façade elevations showing the existing and proposed window/door openings 				
TEMPORARY INSTALLATIONS	□ Photographs of the proposed location □ A plan and time schedule for the installations (60 calendar days or less for signs, and one (1) calendar year or less for all other installations) □ Specifications for any repair work that may be necessary after dismantling of the installation □ If the applicant is not a public or quasi-public agency, an escrow agreement is established. Please contact the LPC Director of Enforcement for instructions. IN THE CASE OF ARTWORK: □ The applicant is also required to submit a written instrument signed by the artist and the building owner that evidences the owner's authority to remove the artwork when the temporary installation permit expires and that waives any protection under applicable federal or state law afforded to the artist or artwork that would prevent such removal at the expiration of the temporary permit, including but not limited to, the Visual Artists Rights Act of 1990, 17 U.S.C. 101 et seq. and Article 14 of the New York State Law on Arts and Cultural Affairs				
HEATING, VENTILATION, & AIR CONDITIONING EQUIPMENT & ALTERNATIVE ENERGY EQUIPMENT ON ROOFTOPS AND SECONDARY FAÇADES AND REAR YARDS	THRU-WINDOW/THRU-WINDOW/WALL- MOUNTED EQUIPMENT: ☐ Photos of the proposed location ☐ Site plan, building footprint plan, block plan, or Sanborn map showing the location of the work will not be visible from a public thoroughfare ☐ Elevation drawings showing unit's relationship to window(s) and dimensions of existing grille ☐ Section drawing — if the unit is thru-wall or thru-window, the grille must be either flush with masonry/window or project no more than five inches Paint card or indication of the color to be used to match the surrounding wall/window color. NON-VISIBLE ROOFTOP EQUIPMENT: ☐ Photos from surrounding points on the street to show the units won't be visible from the street ☐ A building section and roof plan showing rooftop unit(s) and dunnage with clear dimensions Sightline section drawing taken from a 6'-0" eye level from any point where the addition may be visible				
UNENCLOSED SIDEWALK CAFES	☐ Photographs of the base of the building, including the storefront associated with the sidewalk café ☐ Two copies of a dimensioned site plan showing the number and location of the tables				

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2. PROPERTY INFORMATION							
ADDRESS:			FLOOR/APT. #:				
BOROUGH:	BLOCK:	LOT:	COMMUNITY	BOARD:	Z	ZONING:	
3. ATTACH MATERIALS NEEDED TO	COMPLETE THE A	APPLICAT	ION		'		
Required materials must be submitted to and proposed conditions, and clearly illu on the website www.nyc.gov/landmarks .	strates how the pro						
For a complete list of materials required application. You can download a PDF coproposed work type in the FasTrack Mat	ppy of the Permit A	pplication					
An application may be completed by the must be signed by the property owner or complete until it is so certified by the Lar application process, details about the typinfo@lpc.nyc.gov. Submit by mail or in p FI. North, New York, NY 10007	r an authorized repr ndmarks Preservations of drawings or d	resentative on Commis other mater	. Please list all relevant of ssion. You may contact the rials that may be require	contacts below. he LPC if you r d, or for genera	This applineed informations	cation will not be deemed nation about the : Tel: (212) 669-7817	
4. CONTACT INFORMATION (please	check off Primary	Contact)					
TENANT/LESSE/CO-OP SHAREHOLDER			☐ PRIMARY CONTACT				
Name:			Company/Corporation/Organization:				
Address:			City & State:	Z	ip:		
Phone:			E-mail:				
ARCHITECT/ENGINEER/CONTRACTO	R (IF APPLICABL	E)	☐ PRIMARY CONTACT				
Name:			Company/Corporation/Organization:				
Address:			City & State:	Zip):		
Phone:			E-mail:				
PERSON FILING APPLICATION (E.G.,	EXPEDITOR, ATT	ORNEY, N	IANAGING AGENT)	PRIMARY CO	ONTACT		
Name:			Company/Corporation/Organization:				
Address:			City & State:	Zip	:		
Phone:			E-mail:				
5. OWNER'S INFORMATION, CONSE	NT, AND SIGNATU	RE					
I am the owner of the above-listed prope Board or Condominium Association. An work proposed to be carried out on my p complete, to the best of my knowledge.	officer of the Co-op	Board or 0	Condominium Association	n must sign thi	s application	on. I am familiar with the	
IMPORTANT: The managing agent of	a cooperative or o	ondomini	um association must b	e an officer of	the board	d to sign this application	
NAME							
TITLE (if applicable)							
COMPANY, CORPORATION, OR ORGA	ANIZATION (if appl	licable)					
MAILING ADDRESS			CITY, STATE, ZIP CO	DDE			
PHONE	E-MA	AIL					
SIGNATURE OF OWNER OR AUTHOR	RIZED REPRESEN	TATIVE					

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