



PW1A: Schedule A - Occupancy / Use

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Orient and affix BIS
job number label here

121184841

Sheet 1 of 6

DEPT F BLDGS 121184841 Job Number

| Floor | Existing Legal Use | | | | Proposed Use | | | | *Use 2008 Code equivalents only even for older Code | | | |
|---------|---------------------------|-----------------|--|----------------------------------|------------------------------|---------------------|---------------------------|-----------------|---|----------------------------------|------------------------------|---------------------|
| | Maximum Number of Persons | Live Load (psf) | 2014 Code Designations? | Building Code Occupancy Group(s) | Dwelling/ Rooming Units (BC) | Zoning Use Group(s) | Maximum Number of Persons | Live Load (psf) | 2014 Code Designations only* | Building Code Occupancy Group(s) | Dwelling/ Rooming Units (BC) | Zoning Use Group(s) |
| SUB CEL | | | <input type="checkbox"/> Yes <input type="checkbox"/> No | | | | 48 | 150 | <input checked="" type="checkbox"/> Yes | S-2 | | 6 |
| CEL | | | <input type="checkbox"/> Yes <input type="checkbox"/> No | | | | 48 | 150 | <input checked="" type="checkbox"/> Yes | S-2 | | 6 |
| 1ST | | | <input type="checkbox"/> Yes <input type="checkbox"/> No | | | | 305 | 100 | <input checked="" type="checkbox"/> Yes | M | | 6 |
| 1ST | | | <input type="checkbox"/> Yes <input type="checkbox"/> No | | | | 200 | 100 | <input checked="" type="checkbox"/> Yes | B | | 6 |
| 2ND | | | <input type="checkbox"/> Yes <input type="checkbox"/> No | | | | 223 | 100 | <input checked="" type="checkbox"/> Yes | B | | 6 |



Applicant's Name (please print)
MICHAEL GREENE
Signature

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 hereby state all the above information is complete and correct to the best of my knowledge.

SIGN & SEAL

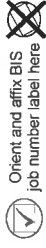
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| Existing Legal Use | | | | Proposed Use | | | | *Use 2008 Code equivalents only even for older Codes | | | | |
|--------------------|--|-----------------|--|----------------------------------|------------------------------|---------------------|---------------------------|--|---|----------------------------------|------------------------------|---------------------|
| Floor | Maximum Number of Persons | Live Load (psf) | 2014 Code Designations? | Building Code Occupancy Group(s) | Dwelling/ Rooming Units (BC) | Zoning Use Group(s) | Maximum Number of Persons | Live Load (psf) | 2014 Code Designations only* | Building Code Occupancy Group(s) | Dwelling/ Rooming Units (BC) | Zoning Use Group(s) |
| 3-5 | | | <input type="checkbox"/> Yes <input type="checkbox"/> No | | | | 263 | 100 | <input checked="" type="checkbox"/> Yes | B | | 6 |
| | Description: OFFICES | | | | | | | | | | | |
| 6-8 | | | <input type="checkbox"/> Yes <input type="checkbox"/> No | | | | 351 | 100 | <input checked="" type="checkbox"/> Yes | B | | 6 |
| | Description: OFFICES | | | | | | | | | | | |
| 9TH | | | <input type="checkbox"/> Yes <input type="checkbox"/> No | | | | 117 | 100 | <input checked="" type="checkbox"/> Yes | B | | 6 |
| | Description: MECHANICAL | | | | | | | | | | | |
| 10TH | | | <input type="checkbox"/> Yes <input type="checkbox"/> No | | | | 61 | 100 | <input checked="" type="checkbox"/> Yes | B | | 6 |
| | Description: OFFICES | | | | | | | | | | | |
| 10TH | | | <input type="checkbox"/> Yes <input type="checkbox"/> No | | | | 74 | 100 | <input checked="" type="checkbox"/> Yes | A-2 | | |
| | Description: TENANT'S ACCESSORY ROOF TERRACE | | | | | | | | | | | |



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Applicant's Name (please print) **MICHAEL GREENE**
 Signature _____
 Date **07/15/2016**

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12/14



PW1A: Schedule A - Occupancy / Use

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| Floor | Existing Legal Use | | | | Proposed Use | | | | *Use 2008 Code equivalents only even for older Codes. | | | |
|-------|--|-----------------|---|----------------------------------|-----------------------------|---------------------|---------------------------|-----------------|---|----------------------------------|-----------------------------|---------------------|
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| 10th | | | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | | | | 438 | 100 | <input checked="" type="checkbox"/> Yes | A-2 | | 6 |
| | Description: CAFETERIA, SERVERY | | | | | | | | | | | |
| 10th | | | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | | | | 22 | 100 | <input checked="" type="checkbox"/> Yes | F-2 | | 6 |
| | Description: MECHANICAL ROOMS, KITCHEN | | | | | | | | | | | |
| 11th | | | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | | | | 231 | 100 | <input checked="" type="checkbox"/> Yes | B | | 6 |
| | Description: OFFICES | | | | | | | | | | | |
| 12-14 | | | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | | | | 100 | 100 | <input checked="" type="checkbox"/> Yes | B | | 6 |
| | Description: OFFICES | | | | | | | | | | | |
| 15-30 | | | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | | | | 231 | 100 | <input checked="" type="checkbox"/> Yes | B | | 6 |
| | Description: OFFICES | | | | | | | | | | | |



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Applicant's Name (please print)
MICHAEL GREENE
 Signature

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| 31-34 | | | <input type="checkbox"/> Yes <input type="checkbox"/> No | | | | 231 | 100 | <input checked="" type="checkbox"/> Yes | B | | 6 |
| | Description | | | | | | OFFICES | | | | | |
| 35-38 | | | <input type="checkbox"/> Yes <input type="checkbox"/> No | | | | 231 | 100 | <input checked="" type="checkbox"/> Yes | B | | 6 |
| | Description | | | | | | OFFICES | | | | | |
| 39-42 | | | <input type="checkbox"/> Yes <input type="checkbox"/> No | | | | 231 | 100 | <input checked="" type="checkbox"/> Yes | B | | 6 |
| | Description | | | | | | OFFICES | | | | | |
| 43-46 | | | <input type="checkbox"/> Yes <input type="checkbox"/> No | | | | 231 | 100 | <input checked="" type="checkbox"/> Yes | B | | 6 |
| | Description | | | | | | OFFICES | | | | | |
| 47-50 | | | <input type="checkbox"/> Yes <input type="checkbox"/> No | | | | 231 | 100 | <input checked="" type="checkbox"/> Yes | B | | 6 |
| | Description | | | | | | OFFICES | | | | | |



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Applicant's Name (please print) **MICHAEL GREENE**
Signature _____ Date **07/15/2016**

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| Floor | Existing Legal Use | | | Proposed Use | | | *Use 2008 Code equivalents only even for older Codes | | | | | |
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| 51ST | | | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | | | | 77 | 150 | <input checked="" type="checkbox"/> Yes | B | | 6 |
| | MECHANICAL | | | | | | | | | | | |
| 51M | | | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | | | | 12 | 150 | <input checked="" type="checkbox"/> Yes | B | | 6 |
| | MECHANICAL | | | | | | | | | | | |
| ROF | | | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | | | | 3 | 150 | <input checked="" type="checkbox"/> Yes | B | | 6 |
| | MECHANICAL | | | | | | | | | | | |
| | | | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | | | | | | <input checked="" type="checkbox"/> Yes | | | |
| | | | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | | | | | | <input checked="" type="checkbox"/> Yes | | | |



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Applicant's Name (please print) **MICHAEL GREENE**
 Signature _____
 Date **07/15/2016**

SIGN & SEAL

12/14

2 Building Notes to appear on the Certificate of Occupancy

NOTE: ZONING EXHIBITS I & III RECORDED UNDER CRFN#'S 2014000290111, 2014000 290112

3 Applicant's Statements and Signatures Required for all applications.

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Internal Use Only

Name (please print)

MICHAEL GREENE

Signature

Date

12/14/2016



SIGN & SEAL

P.E. / R.A. Seal (apply seal, then sign and date over seal)