



Buildings

OP-98 Notice/Results—Self-Certification of Plumbing, Sprinkler, Standpipe Inspection(s) & Test(s)

A copy of this completed notice must be retained for re-submission with results.

DEPT BLDGS Job No. 121324290



Scan Code ESHS8464003



1 Permit No. 121324290		Document No. 06		Permit Type (check one only): <input checked="" type="checkbox"/> PL <input type="checkbox"/> SP <input type="checkbox"/> SD <input type="checkbox"/> LAA	
Borough Manhattan		Block 702 Lot 50 House No 501		Street Name West 30th Street	
2 Permit Applicant E-Mail: jeanette.winkler@almarplumbing.com Business Phone (718) 835-5900 Fax No. (718) 641-2469					
Last Name Martino		First Name Lawrence		M.I. P. Business Name Almar Plumbing & Heating Corp.	
Address 59-05 39th Avenue		City Woodside		State NY ZIP 11377 License No. 1932 <input checked="" type="checkbox"/> LMP <input type="checkbox"/> LFSC	
3 Inspection Data Inspection/test scheduled for: 10/5/15 (mmddyy) Time: <input type="checkbox"/> 8:00am <input type="checkbox"/> 8:30 <input type="checkbox"/> 9:00 <input type="checkbox"/> 9:30 <input type="checkbox"/> 10:00 <input type="checkbox"/> 10:30 <input type="checkbox"/> 11:00 <input type="checkbox"/> 11:30 <input type="checkbox"/> 12:30pm					
Apts and Floors: C thru 49 <input type="checkbox"/> 100pm <input type="checkbox"/> 1:30 <input type="checkbox"/> 2:00 <input type="checkbox"/> 2:30 <input type="checkbox"/> 3:00 Meeting Location:					

4 Notice/Result (Select one: PL, SP, SD only)																				
Systems: Inspections	Plumbing (PL)						Systems: Inspections	Sprinkler (SP)						Systems: Inspections	Standpipe (SD)					
	Underground		Roughing		Finish			Underground		Roughing		Finish			Underground		Roughing		Finish	
	Notice	Results	Notice	Results	Notice	Results		Notice	Results	Notice	Results	Notice	Results		Notice	Results	Notice	Results		
Sprinkler - PL		Pass	Fail		Pass	Fail		Pass	Fail		Pass	Fail	Fire Standpipe - SD		Pass	Fail		Pass	Fail	
Water/Sanitary - PL																				
Storm - PL																				
Gas - PL																				
Medical Gas - PL																				
Tests	Notice	Results					Tests	Notice	Results				Tests	Notice	Results					
Hydrostatic - PL		Pass	Fail				Hydrostatic - SP		Pass	Fail			Hydrostatic - SD		Pass	Fail				
Water - Sanitary							Dry Pipe Valve						Fire Pump							
Pressure - Water							Booster Pump													
Water Storm																				
Gas																				
Medical Gas																				
Additional Information/Comments: Original BO-12, Welder Affidavit, Welder Certification attached. Related to BIS# 122-128-713																				
<input type="checkbox"/> Submitted with minor variations, described here:																				
<input type="checkbox"/> Legalization <input type="checkbox"/> Gas to Gas Appliance Direct Replacement <input type="checkbox"/> Remove/Cap <input type="checkbox"/> Detention <input type="checkbox"/> Drywell/Retention																				

5 Gas Meters/Risers Data (Check all applicable to this inspection. Include gas usages for each listed meter(s)/riser(s)) <input type="checkbox"/> Gas requested for listed meters and risers									
No. of Meters:		Location(s) (Floor/Apt.):		No. of Risers:		Location(s) (Floor/Apt.):		<input type="checkbox"/> Welded Gas Piping	
Gas usage:		<input type="checkbox"/> Heat		<input type="checkbox"/> Boiler Pilot for oil burner		<input type="checkbox"/> Water Heater		<input type="checkbox"/> Dryer	
<input type="checkbox"/> Cooking		<input type="checkbox"/> Tankless Coil		<input type="checkbox"/> HVAC		<input type="checkbox"/> Fire Place		<input type="checkbox"/> Other (describe):	
6 Certifying Applicant E-Mail: jeanette.winkler@almarplumbing.com Business Phone (718) 835-5900 Fax No. (718) 641-2469									
Last Name Martino		First Name Lawrence		M.I. P. Business Name Almar Plumbing & Heating Corp.					
Address 59-05 39th Avenue		City Woodside		State N ZIP 11377 License No. 1932 <input checked="" type="checkbox"/> LMP <input type="checkbox"/> LFSC <input type="checkbox"/> P.E. <input type="checkbox"/> R.A.					

7 Applicant Statements and Signatures <input type="checkbox"/> All Comments resolved, review for sign-off <input type="checkbox"/> All required back-up documents attached			
I certify the statements herein are correct and comply with the NYC Building code. I meet the requirements of the NYC Building code as they relate to the experience requirements set forth for gas tests. I realize falsification of any statement is a misdemeanor under §28-211.1 of the Administrative code punishable by a fine or imprisonment or both and may result in removal from participation in the self-certification program and/or disciplinary action by the Licensed Master Plumber or Licensed Fire Suppression Piping Contractor License Board.			
Print Name of Certifying Applicant Lawrence P. Martino		SEAL	
Signature <i>Lawrence P. Martino</i>		Signature <i>Lawrence P. Martino</i>	
Date 10/15/2015		Date 10/15/2015	

Reviewed by: *DK*, Date: *10/14*, Entered by: *TF*, R.S.O. by: _____, S/O by: _____EMPLOYER'S
DIRECT
WELDON AFFIDAVIT
NEEDS



The City of New York
Department of Buildings
Boiler Division

BOILER INSPECTION APPROVAL VERIFICATION

(This card verifies that the Boiler Inspector Examined and Recommended the Boiler(s) Listed Below for Approval)

Premises: 501 West 30th Street

Borough (check one): ☒ Manhattan ☐ Bronx ☐ Brooklyn ☐ Queens ☐ Staten Island

Application Job #: 122128713 Inspection Date: 9-30-15

PRESENT THIS VERIFICATION TO THE RELEVANT BOROUGH OFFICE

<small>For DOB Boiler Inspector use only.</small>			
Boiler Type: <input type="checkbox"/> Cast Iron <input type="checkbox"/> Fire Tube <input checked="" type="checkbox"/> Water Tube <input type="checkbox"/> Electric			
Boiler Specifications: <input type="checkbox"/> High Pressure <input checked="" type="checkbox"/> Low Pressure		<input type="checkbox"/> Steam <input checked="" type="checkbox"/> Hot Water	PSRV: <u>150 PSI</u>
Boiler Use: <input type="checkbox"/> Domestic Hot Water <input checked="" type="checkbox"/> Heating <input type="checkbox"/> Domestic Hot Water & Heating <input type="checkbox"/> Other:			
Inspector's full name (please print): <u>Robert Davin</u>			
Examined and recommended for approval on (inspection date): <u>9-30-15</u>			
Inspector's signature: <u>[Signature]</u>		Badge# <u>2312</u>	Date <u>9-30-15</u>
Department of Buildings Boiler No(s). <u>167031-01-02-03-04 / Temp Sign for GAS</u>			

ONLY THE SIGNED ORIGINAL COPY OF THIS FORM CAN BE ACCEPTED BY BOROUGH

Welders Affidavit

Exhibit-C

Contractors Name Almar Plumbing + Heating Corp.

Address 59-05 39th Avenue Woodside, NY 11377

This certifies that all welding on customer gas piping on premises

Located at: 501 West 30th Street

Lot No: 10 Block: 702

Owner: ERY Tenant LLC c/o The Related

Has been performed by a welder who has previously been qualified in accordance with the stated welding requirements and all welding has been performed according to those requirements.

The welder has been qualified in accordance with either ASME Section IX Boiler Pressure Vessel Code or API 1104 requirements, and such qualifications shall be performed by an independent inspection agency. Proof of such qualification shall be attached to this affidavit.

Date 10/13/2015

Signed

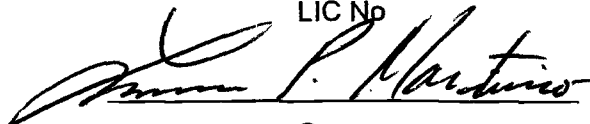


Welder

Almar Plumbing + Heating Corp.
Plumbing Contractor

1932

LIC No



Owner

Accepted for the Company by: _____

Date: _____

DC



UA / NCPWB

Joint Welder Testing Program

Welder Qualification Test Record



Welder's Name: Paul PATERNELLA, JR. SSN or UA Card No: _____ Stamp No: 8WBS
Welder's Home Local: 001 Test Location: Training Center City: Long Island City State: NY
UA Test Assembly ID No: _____

Testing Conditions and Ranges Qualified

Identification of WPS followed during welding of test coupon: UA-21, NCPWB (1-12-1)

Specification of Test Coupon Base Metal: A/SA-106 Grade B or A/SA-53 Grade B Thickness (in.): 0.436

Welding Variables	Actual Values	Range Qualified
Welding Process(es) used:	SMAW/SMAW	SMAW/SMAW
Type of welding (manual, semi-automatic):	Manual	Manual
Base Metal P-Number <u>1</u> to P-Number:	<u>1</u>	P-1 through 15F
Plate <input checked="" type="checkbox"/> Pipe (enter diameter if pipe or tube):	NPS 2, XXS (0.436")	1 in. OD and over
Backing (metal, weld metal, backwelded, etc):	None/Weld metal	F-3 Opt., F-1, 2, 4 Req'd
Filler Metal (SFA) Specification(s) (info. only):	5.1	
Filler Metal or Electrode Classification(s) (info. only):	E6010/E7018	
Filler Metal or Electrode F-Number:	3/4	1 through 4
Solid, Metal Cored or Flux Cored wire for GTAW:	N/A	N/A
Consumable Insert for GTAW or PAW:	N/A	N/A
Deposit Thickness for each process and variation (in.):	0.125/0.311	F-4: 0.622/F-1/3: 0.872 max
Position (2G, 6G, 3F, etc.):	6G	All
Progression (uphill, downhill):	Uphill	Uphill
Fuel Gas for OFW, Backing Gas for GTAW, PAW, GMAW:	N/A	N/A
GMAW Transfer Mode (short circuiting, spray, etc.):	N/A	N/A
GTAW Current Type/Polarity (AC, DCEP, DCEN):	N/A	N/A

* Indicates that at least 3 layers of weld metal were deposited

Testing and Results

Visual Examination of Completed Weld: Acceptable Date of Test: 10/18/2014

Bend Test ☐ Transverse Root and Face (QW-462.3(a)) ☐ Side (QW-462.2)

Type	Result	Type	Result	Type	Result

Radiographic Examination Results: Acceptable Lab Test No.: _____
Film or Specimens Evaluated By: Howard Boehmig Title: LII Company: QC Consulting
Contractor/Fabricator's Supervisor: Larry Frawley Title: Witness Company: PAR PLUMBING CO., INC.

We certify that the statements in this record are correct and that the test coupons were prepared, welded and tested in accordance with the requirements of Section IX of the ASME Code.

National Certified Pipe
Welding Bureau
Chapter Number: 08
Secretary: Tony Saporito
Date: 10/31/2014

United Association
Authorized Testing
Representative
Name: TERRANCE WILLIS
Date: 10/18/2014

Almar Plumbing & Heating Corp.
Contractor/Fabricator Name
Signature: [Signature]
Date: 10/13/2015



UA / NCPWB

Joint Welder Testing Program

Welder Qualification Test Record



Welder's Name: Paul Patemella SSN or UA card number: 1088128 Stamp No: _____
Welder's Home Local: 001 Test Location: Local1 Training Center City: LIC State: NY
UA Test Assembly ID No: 21PP8128

Testing Conditions and Ranges Qualified

Identification of WPS followed during welding of test coupon: UA 21, NCPWB (1-12-1)
Specification of Test Coupon Base Metal: A/SA-106 Grade B or A/SA-53 Grade B Thickness(in.): 0.436

Welding Variables

Actual Values

Range Qualified

Welding Process(es) used:	<u>SMAW</u>	<u>SMAW</u>
Type of welding (manual, semi-automatic):	<u>Manual</u>	<u>Manual</u>
Base Metal P or S-Number <u>1</u> to P or S-number	<u>1</u>	<u>1 through 11</u>
<input type="checkbox"/> Plate <input checked="" type="checkbox"/> Pipe (enter diameter if pipe or tube):	<u>NPS 2, XXS (0.436")</u>	<u>1 in. OD and over</u>
Backing (metal, weld metal, backwelded, etc.):	<u>None / Weld metal</u>	<u>F-3 Opt., F-1, 2, 4 Req'd</u>
Filler Metal (SFA) Specification(s) (info. only):	<u>5.1</u>	
Filler Metal or Electrode Classification(s) (info. only):	<u>E6010 / E7018</u>	
Filler Metal or Electrode F-Number:	<u>3 / 4</u>	<u>1 through 4</u>
Solid, Metal Cored or Flux Cored wire for GTAW:	<u>N/A</u>	<u>N/A</u>
Consumable Insert for GTAW or PAW:	<u>N/A</u>	<u>N/A</u>
Deposit Thickness for each process and variation (in.):	<u>0.125 / 0.311</u>	<u>F-4: 0.622/F-1/3: 0.872 max</u>
Position (2G, 6G, 3F, etc.):	<u>6G</u>	<u>All</u>
Progression (uphill, downhill):	<u>Uphill</u>	<u>Uphill</u>
Fuel Gas for OFW, Backing Gas for GTAW, PAW, GMAW:	<u>N/A</u>	<u>N/A</u>
GMAW Transfer Mode (short circuiting, spray, etc.):	<u>N/A</u>	<u>N/A</u>
GTAW Current Type/Polarity (AC, DCEP, DCEN):	<u>N/A</u>	<u>N/A</u>

* Indicates that at least 3 layers of weld metal were deposited

Testing and Results

Visual Examination of Completed Weld: Acceptable Date of Test: 10/18/14

Bend Test ☐ Transverse Root and Face (QW-462.3(a)) ☐ Side (QW-462.2)

Type	Result	Type	Result	Type	Result

Radiographic Examination Results: Acceptable Lab Test No.: _____
Film or Specimens Evaluated By: [Signature] Title: LII Company: QC CONSULTING
Contractor/Fabricator's Supervisor: _____ Title: _____ Company: _____

We certify that the statements in this record are correct and that the test coupons were prepared, welded and tested in accordance with the requirements of Section IX of the ASME Code.

National Certified Pipe
Welding Bureau
Chapter Number: _____

United Association
Authorized Testing
Representative

Par Plumbing & Heating

Contractor/Fabricator Name

Secretary: _____

Name: Nicholas Ventura

Signature: [Signature]

Date: 10/18/14

Date: 10/18/14

Date: 10/18/14

**National Certified Pipe Welding Bureau
NCPWB of New York, Inc.**


Continuity Records: PAUL PATERNELLA, JR.

UA Welder ID: 001088128

Stamp: 8WBS

TYPE	DATE	DESCRIPTION	CONTRACTOR
Transfer	10/22/2014**		Almar Plumbing & Heating Corp.
Transfer	10/18/2014**		Almar Plumbing & Heating Corp.
Transfer	03/14/2014**		Almar Plumbing & Heating Corp.
Transfer	10/24/2012**		Almar Plumbing & Heating Corp.
Transfer	06/29/2011**		Almar Plumbing & Heating Corp.

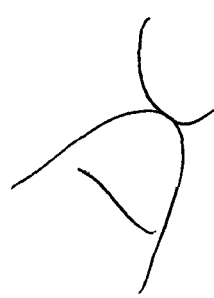
TYPE	DATE	DESCRIPTION	CONTRACTOR
Test	10/18/2014	JPQT-21	PAR PLUMBING CO., INC.
Continuity	08/26/2014		Almar Plumbing & Heating Corp.
Continuity	04/19/2014		Almar Plumbing & Heating Corp.
Test	10/19/2013	JPQT-21	SKANSKA MECHANICAL & STRUCTURAL, INC.
Continuity	06/18/2013		Almar Plumbing & Heating Corp. (This Continuity was obtained from the contractor - Almar Plumbing & Heating Corp.)
Continuity	06/15/2013		Almar Plumbing & Heating Corp.
Test	12/15/2012	JPQT-21	Forsythe Plumbing & Heating Corp.
Continuity	08/11/2012		Almar Plumbing & Heating Corp.
Continuity	06/28/2012		Almar Plumbing & Heating Corp.
Continuity	03/29/2012		Almar Plumbing & Heating Corp.
Test	02/11/2012	JPQT-21	DURR MECHANICAL
Continuity	09/26/2011		Almar Plumbing & Heating Corp.
Continuity	09/19/2011		Almar Plumbing & Heating Corp.
Test	03/19/2011	JPQT-21	Durr Mechanical Construction, Inc.
Continuity	10/11/2010		DELPHI MECHANICAL
Test	05/22/2010	JPQT-02	CRESCENT CONTRACTING



10/31/2014

NCPWB Welder Certification System

TYPE	DATE	DESCRIPTION	CONTRACTOR
Test	09/21/2013	JPQT-18A	CRESCENT CONTRACTING

A handwritten signature or mark, possibly initials, consisting of several curved lines.