



PW1: Plan / Work Application

Must be typewritten.

(4)

**1 Location Information** Required for all applications.

House No(s) 501

Street Name WEST 30TH STREET

Borough Manhattan

Block 702

Lot 50

BIN 1012456

C.B. No. 104

Work on Floor(s) CEL

Apt. / Condo No(s)

2 Applicant Information Required for all applications. Fax, mobile telephone and e-mail address are optional information.

Last Name PATEL

First Name GHANSHYAM

Middle Initial C

Business Name FNA ASSOCIATES, INC

Business Telephone (973) 244-5995

Business Address 100 NEW DUTCH LANE

Business Fax (973) 244-0544

City FAIRFIELD

State NJ

Zip 07004

Mobile Telephone () -

E-Mail LUCRECIA@STRESSTEEL.COM

License Number 048329

Choose one: ☒ P.E. ☐ R.A. ☐ Sign Hanger ☐ Other, please specify:**3 Filing Representative** Complete only if different from applicant specified in section 2. Fax, mobile phone, and e-mail are optional info.

Last Name VASKO/MCPHERSON/JACKIER First Name JOZEF/YVETTE/PHILLIP Middle Initial

Business Name GILLMAN CONSULTING INC

Business Telephone (212) 349-9304

Business Address 40 WORTH ST SUITE 600

Business Fax (212) 349-9346

City NEW YORK

State NY

Zip 10013

Mobile Telephone (917) 682-5971

E-Mail JOZEF@JEROMESGILLMAN.COM

Registration Number X06633

4 Filing Status Required for all applications. Choose one and provide specified associated information.☐ Initial Filing 5, 7, 11, 12A, 25-26☐ Prior to Approval Actions 25-26☐ Reinstatement 24-26

Review is requested under which Building Code?

☐ Amend Existing Filing 4A☐ Withdrawal 26☐ 2008 ☐ 1968 ☐ Prior to 1968☐ Subsequent Filing 6-7, 8A (Alt-2 only), 11☐ Specified in 4A and 6Choose ☐ Standard Plan Examination or Review☐ Post Approval Amendment (PAA) 4A, 6, 24-25☐ Entire Jobone: ☐ Professional Certification PC1, POC1Will PAA affect filing fees? ☐ Yes ☐ No

4A Indicate existing document number affected by filing: 04

☐ Self Certification of Objections AI1☒ New (Superseding) Applicant 4A, 25-26**5 Job/Project Types** Choose one and provide specified associated information.☐ Alteration Type 1 6A-E, 8B-C, 9-10, 13C-F, 14 & 18-20, 22, PW1-A, PD1, select all that apply:☐ Alteration Type 1, OT: "No Work" 8C, 9-10 & 12, 13C-F, 14, 18-19, PW1-A, PD1☐ Full Demolition 6B, 8D, 9B-D, & 13D-E, 14, 21A, 22☐ Change in Exits☐ Alteration Type 2 5A, 6A-D, 8A-B, 9-10, & 13C-E, 14, 20, 22☐ Sign 5A, 6B-D, 9B, 22-23☐ Change in Number of Stories☐ Alteration Type 3 5A, 6B-F, 8C, 9-10, 13C-E, 22☐ Subdivision 9B, 12A-B☐ Change in Number of Dwelling Units☒ New Building 6A-E, 8F-G, 9A-C, 9L, 10, 12, 13A-E☐ Condominium ☐ Improved 17☐ Change in Occupancy / Use☐ 5A Directive 14 acceptance requested?☐ Yes ☐ No☐ Change inconsistent with current Cert. of Occup. (13B: 2008 Code only), 14, 18-20, PW1-A, PD1☐ 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 PW1-C☐ FS - Fuel Storage PW1-C☐ PL - Plumbing PW1-B6E ☐ CC - Curb Cut 16☐ FA - Fire Alarm☐ FP - Fire Suppression☐ SD - Standpipe PW-1B6F ☐ OT/ANT - Antenna☐ FB - Fuel Burning PW1-C☐ MH - Mechanical☐ SP - Sprinkler PW-1B☐ OT/BPP - Builders Pavement Plan 8D6B ☐ EQ - Construction6C ☐ OT/GC - General6D ☒ OT - Other, describe:☐ OT/FPP - Fire Protection Plan

Equipment 15

Construction

SOE

☐ OT/MAR - Marquee 8E, 26B

7 Plans/Construction Documents Submitted <i>Plans are required for most applications.</i> <input type="checkbox"/> AR - Architectural <input type="checkbox"/> BP - BPP Checklist <input type="checkbox"/> DM - Demolition (Full/Partial) <input type="checkbox"/> EN - Energy Analysis <input type="checkbox"/> FO - Foundation or <input type="checkbox"/> NP - No Plans <input type="checkbox"/> ME - Mechanical <input type="checkbox"/> OT - Other <input type="checkbox"/> PL - Plumbing <input type="checkbox"/> ST - Structural <input type="checkbox"/> ZO - Zoning											
8 Additional Information											
8A WT Cost WT Cost WT Cost 						8B Is a building enlargement proposed? <input type="checkbox"/> No enlargement is proposed <input type="checkbox"/> Yes 12, PD1 <input type="checkbox"/> Horizontal <input type="checkbox"/> Vertical Additional Construction Floor Area: _____ sq. ft.			8C Estimated Job Cost \$ 8D Street Frontage: _____ linear ft. 8E Height: _____ ft. Width: _____ ft. 8F Name of cluster or development below: _____ Project lead job no. _____		
8G Total Construction Floor Area: _____ sq. ft.											
9 Additional Considerations, Limitations or Restrictions											
Yes No 9A <input type="checkbox"/> <input type="checkbox"/> Structural peer review required per BC §1627 <i>If yes, 9F</i> 9B <input type="checkbox"/> <input type="checkbox"/> Filed to Comply with Local Law <i>If yes, 9G</i> <input type="checkbox"/> <input type="checkbox"/> Other, specify: _____ <input type="checkbox"/> <input type="checkbox"/> Restrictive Declaration / Easement <i>If yes, 9M</i> <input type="checkbox"/> <input type="checkbox"/> Zoning Exhibit (I, II, III, etc.) <i>If yes, 9N</i> <input type="checkbox"/> <input type="checkbox"/> Requesting legalization of work where no work w/o a permit violations have been issued						Yes No <input type="checkbox"/> <input type="checkbox"/> Landmark <input type="checkbox"/> <input type="checkbox"/> "Little E" Hazmat Site <input type="checkbox"/> <input type="checkbox"/> Unmapped Street <input type="checkbox"/> <input type="checkbox"/> Filing to Address Violation(s) <i>If yes, 9H</i>			9F Structural Peer Reviewer License No. _____ P.E. 9G Local Law No(s) _____ Year _____ 9H Violation No(s) _____ 9I BSA Calendar No(s) _____ 9J CPC Calendar No(s) _____ 9K High-Rise Team Tracking Number: _____		
9C <input type="checkbox"/> <input type="checkbox"/> Adult Establishment <i>If yes, plot diagram (except DM)</i> <input type="checkbox"/> <input type="checkbox"/> Compensated Development (Inclusionary Housing) <input type="checkbox"/> <input type="checkbox"/> Low Income Housing (Inclusionary Housing) <input type="checkbox"/> <input type="checkbox"/> Single Room Occupancy (SRO) Multiple Dwelling <input type="checkbox"/> <input type="checkbox"/> Filing includes Lot Merger / Reapportionment <i>If yes, 17</i>						<input type="checkbox"/> <input type="checkbox"/> Included in LMCCC <input type="checkbox"/> <input type="checkbox"/> Infill Zoning <input type="checkbox"/> <input type="checkbox"/> Loft Board <input type="checkbox"/> <input type="checkbox"/> Quality Housing <input type="checkbox"/> <input type="checkbox"/> Site Safety Job/Project					
9D <input type="checkbox"/> <input type="checkbox"/> Includes permanent removal of standpipe, sprinkler or fire suppression related systems											
9E <input type="checkbox"/> <input type="checkbox"/> Work includes partial demolition as defined in AC §28-101.5 <i>If yes, 21B</i> <input type="checkbox"/> <input type="checkbox"/> Structural Stability affected by proposed work											
9L <input type="checkbox"/> <input type="checkbox"/> Work includes lighting fixture and/or controls, installation or replacement. [§ECC 404 and 505]											
9M CRFN(s) Restrictive Declaration / Easement (max. 4):											
9N CRFN(s) Zoning Exhibit (I, II, III, etc. - max. 4):											
10 NYCECC Compliance <i>New York City Energy Conservation Code</i> <input type="checkbox"/> To the best of my knowledge, belief and professional judgment, all work under this application is in compliance with the NYCECC* <input type="checkbox"/> Energy analysis is on another job number: _____ Yes No <input type="checkbox"/> <input type="checkbox"/> This application is, or is part of, a project that utilizes trade-offs among different major systems <input type="checkbox"/> <input type="checkbox"/> This application utilizes trade-offs within a single major system <input type="checkbox"/> 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: <i>Choose one</i> <input type="checkbox"/> The work is an alteration of a State or National historic building. <input type="checkbox"/> The scope of work is entirely in a "low-energy building" and is limited to the building envelope. <input type="checkbox"/> The scope of work does not affect the energy use of the building. <input type="checkbox"/> This is a post-approval amendment and exempt under a prior edition of the energy code. See statement of exemption on attached drawings. <small>* Note: Exceptions to Section ECC 101.4.3 are NOT exemptions. For exceptions, check compliance statement and use the Energy Analysis.</small>											
11 Job Description Support of excavation associated with new building as shown on drawings filed herewith.						11A Related DOB Job Numbers 					

12 Zoning Characteristics										
12A District(s)				12B Street legal width: 0 ft.						
Overlay(s)				Street Status: <input checked="" type="checkbox"/> Public <input type="checkbox"/> Private						
Special Dist.(s)				If the zoning lot includes multiple tax lots, list all tax lots here ►						
Map Number										
12C Proposed: Use*		Zoning Floor Area	District	FAR	Proposed Lot Details:			Proposed Yard Details:		
		sq. ft.			Lot Type: <input type="checkbox"/> Corner <input type="checkbox"/> Interior <input type="checkbox"/> Through			Check here if no yards: <input type="checkbox"/> 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? <input type="checkbox"/> Yes <input type="checkbox"/> No			Side Yard 2 ft.		
Proposed Totals		sq. ft.			If yes, no. of parking spaces:					
Existing Total		sq. ft.			Perimeter Wall Height ft.					

*Use can be one of the following: residential, commercial, manufacturing, or community facility. List only one use per line.

13 Building Characteristics *Main use/dominant occupancy per AC §28-101.5. **Use 2008 Code equivalents only. *Residential w/other use.									
13A Primary structural system, choose one: <input type="checkbox"/> Masonry <input type="checkbox"/> Concrete (CIP) <input type="checkbox"/> Concrete (Precast) <input type="checkbox"/> Wood <input type="checkbox"/> Steel (Structural) <input type="checkbox"/> Steel (Cold-Formed) <input type="checkbox"/> Steel (Encased in Concrete)									
13B		Existing		Proposed		13D Building Type: <input type="checkbox"/> 1, 2, or 3 Family <input type="checkbox"/> Other			
Structural Occupancy Category						Mixed use building? <input type="checkbox"/> Yes <input type="checkbox"/> No			
Seismic Design Category		2008 Code Designations?		2008 Code Designations?		13E			
Occupancy Classification*		<input type="checkbox"/> Yes <input type="checkbox"/> No		<input checked="" type="checkbox"/> Yes**		Existing		Proposed	
Construction Classification		<input type="checkbox"/> Yes <input type="checkbox"/> No		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		Building Height		ft.	
Multiple Dwelling Classification						Building Stories			
						Dwelling Units			
13F Building was originally erected pursuant to which Building Code: <input type="checkbox"/> 2008 <input type="checkbox"/> 1968 <input type="checkbox"/> Prior to 1968									
The earliest Code with which this building or any part of it is required to comply: <input type="checkbox"/> 2008 <input type="checkbox"/> 1968 <input type="checkbox"/> Prior to 1968									

14 Fill Choose one.									
<input type="checkbox"/> Not Applicable <input type="checkbox"/> On-Site <input type="checkbox"/> Off-Site <input type="checkbox"/> Under 300 cubic yards									

15 Construction Equipment					16 Curb Cut Description				
<input type="checkbox"/> Chute <input type="checkbox"/> Sidewalk Shed <input type="checkbox"/> Fence <input type="checkbox"/> Supported Scaffold <input type="checkbox"/> Other: _____					Construction Material: _____ Size: _____ linear ft. BSA/MEA Approval No. _____				
					Size of cut (with splays): _____ ft. Distance to nearest corner: _____ ft. on street: _____				

17 Tax Lot Characteristics										18 Fire Protection Equipment																																	
Original tax lots being merged or reapportioned (if applicable):																																											
Tentative tax lot numbers (new tax lots only):																																											
										<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th></th> <th colspan="2">Existing</th> <th colspan="2">Proposed</th> </tr> <tr> <th></th> <th>Yes</th> <th>No</th> <th>Yes</th> <th>No</th> </tr> <tr> <td>Fire Alarm</td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td>Fire Suppression</td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td>Sprinkler</td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td>Standpipe</td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> </table>					Existing		Proposed			Yes	No	Yes	No	Fire Alarm	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Fire Suppression	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Sprinkler	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Standpipe	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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Sprinkler	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>																																							
Standpipe	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>																																							

19 Open Spaces						20 Site Characteristics			
	Existing	Proposed		Existing	Proposed	Yes No			
Plaza Area	sq. ft.	sq. ft.	Arcade Area	sq. ft.	sq. ft.	<input type="checkbox"/> Tidal / Fresh Water Wetlands			
Parking Area	sq. ft.	sq. ft.	Parking Spaces			<input type="checkbox"/> Urban Renewal			
Loading Berths	sq. ft.	sq. ft.	Loading Berths			<input type="checkbox"/> Fire District			
						<input type="checkbox"/> Flood Hazard Area			

21	Demolition Details <i>*Mechanical equipment other than handheld devices to be used for demolition or removal of debris (BC §3306.4).</i>
Yes No 21A <input type="checkbox"/> <input type="checkbox"/> Demo. filling is for a secondary structure? <i>If yes, specify structure being demolished:</i> <input type="checkbox"/> <input type="checkbox"/> Mechanical means* from out of building? <i>If yes, mechanical means will demolish:</i> <input type="checkbox"/> entire structure or <input type="checkbox"/> part of structure <input type="checkbox"/> <input type="checkbox"/> Mechanical means* from within building? <i>If yes, describe equipment proposed:</i> 21B <input type="checkbox"/> <input type="checkbox"/> Demolition work affects the exterior building envelope	

22	Asbestos Abatement Compliance <i>Choose one.</i>
<input type="checkbox"/> The scope of work requires related asbestos abatement as defined in the regulations of the NYC Department of Environmental Protection (DEP). <input type="checkbox"/> The scope of work does not require related asbestos abatement as defined in the regulations of the NYC DEP. <input type="checkbox"/> 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)).	

23	Sign		
Purpose: <input type="checkbox"/> Advertising <input type="checkbox"/> Non-Advertising		Type: <input type="checkbox"/> Illuminated 23A <input type="checkbox"/> Non-Illuminated	Estimated Cost: \$ _____ Total Square Feet: _____ Height above Curb: _____ ft. in. Height above Roof: _____ ft. in.
Location: <input type="checkbox"/> Ground <input type="checkbox"/> Roof 23B <input type="checkbox"/> Wall		23A Illuminated type: <input type="checkbox"/> Direct <input type="checkbox"/> Flashing <input type="checkbox"/> Indirect Yes No <input type="checkbox"/> <input type="checkbox"/> If sign projects beyond building line, is owner billed for annual permit? <i>If no, specify in 26B</i>	
Yes No <input type="checkbox"/> <input type="checkbox"/> Is sign inside building line? <i>If no, sign projects by:</i> _____ ft. in. <input type="checkbox"/> <input type="checkbox"/> Designed for changeable copy? <i>If no, 23C</i> <input type="checkbox"/> <input type="checkbox"/> Does an OAC have an interest in this sign or location? <i>If yes, 23G</i> <input type="checkbox"/> <input type="checkbox"/> Within 900' and within view of an arterial highway? <i>If yes, 23D</i> <input type="checkbox"/> <input type="checkbox"/> Within 200' and within view of a park 1/2 acre or more? <i>If yes, 23E</i>		23B <input type="checkbox"/> <input type="checkbox"/> Is roof sign tight, closed or solid? 23C Sign wording. <i>If extensive, provide only key wording.</i> 23D Distance from Arterial Highway: _____ ft. 23E Distance from Park 1/2 acre or more: _____ ft. 23F OAC Sign Number: 23G OAC Registration Number:	
→ If answer is "yes" to either of the above two questions <u>and</u> this is an advertising sign, OAC sign number is required in section 23F			

24	Comments <i>Place additional comments on an AI-1 form. See Guide for proper incorporation of professional certification statements.</i>
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25	Applicant's Statements and Signatures <i>Required for all applications.</i>
<p>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. <input type="checkbox"/> (←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 services available.</p> <p>Cluster Development Statement (if applicable): I hereby state that all specifications relating to this job are identical to those previously used under the group lead job number, except as specified herein.</p>	
Yes No <input type="checkbox"/> <input type="checkbox"/> For Initial New Building and Alteration 1 applications filed under the 2008 NYC Building Code only: does this building qualify for high-rise designation? <input type="checkbox"/> <input type="checkbox"/> Directive 14 Initial applications only: I certify that the construction documents submitted and all construction documents related to this application do not require a new or amended Certificate of Occupancy as there is no change in use, exits, or occupancy.	
<div style="display: flex; justify-content: space-between;"> <div> Name (please print) GHANSHYAM C. 21829-1 Signature </div> <div> Date 12-7-12 </div> </div>	
P.E. / R.A. Seal (apply seal over signature and date over seal)	

26 Property Owner's Statements and Signatures

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. 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 the New York City Energy Conservation Code (NYCECC).

Yes No

☐ ☒ **Fee Deferred Request Statement**

I hereby request a fee deferral for the work proposed on this application and understand that all fees must be paid before issuance of any Certificate of Occupancy or job sign off.

☐ ☒ **Fee Exemption Request Statement**

In accordance with §28-112.1 of the NYC Administrative Code I hereby state that the proposed work involves a building or property owned or used exclusively for the purposes indicated in such section.

☐ ☒ **Owner's Certifications Regarding Occupied Housing**

The site of the building to be altered or demolished, or the site of the new building to be constructed, contains one or more occupied dwelling units that will remain occupied during construction. These occupied dwelling units have been clearly identified on the submitted construction documents.

☐ ☒ **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. If yes, select one of the following:**

☐ The owner is not required to notify the Division of Housing and Community Renewal (DHCR) of the owner's intention to file because the nature and scope of the work proposed, pursuant to DHCR regulations, does not require notification.

☐ The owner has notified the Division of Housing and Community Renewal (DHCR) 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 DHCR notified:

☐ ☒ **Owner's Certification for Adult Establishments**

I authorize and intend to create, enlarge, or extend an establishment with adult activity and/or adult material as defined in ZR §12-10 "adult establishment" or related sign at the subject premises.

☐ ☐ **Owner's Certification for Directive 14 Applications (if applicable)**

I have read and am fully aware of the applicant's statement that the construction documents submitted and all construction documents related to this application will not require a new or amended Certificate of Occupancy as there is no change in use, exits, or occupancy. Furthermore, I understand that I am responsible for retaining a qualified design professional to perform a final inspection when the permitted work is complete and this professional must submit a satisfactory final inspection report to the NYC Department of Buildings within the time following inspection prescribed by Department rule.

Owner type: ☐ Individual ☐ DCAS ☐ HHC ☐ NYCHA
☐ Partnership ☐ DOE ☐ HPD ☐ NYS
☒ Corporation 26A ☐ Other Government
☐ Condo Unit Owner or Co-Op Tenant-shareholder 26A

Is the owner a non-profit organization? ☐ Yes ☒ No

Name (please print): RONALD WACKROW

Relationship to Owner: EXECUTIVE V.P.

Business Name/Agency: ERY TENANT LLC C/O THE RELATED

Street Address: 60 COLUMBUS CIRCLE, 19TH FLOOR

City: NEW YORK State: NY Zip: 10023

Telephone Number: (212) 801-3476 Fax: () -

E-Mail Address: RWACKROW@RELATED.COM

Signature and Date

26A Condo/Co-Op Board or Corporation Second Officer

Name (please print): BRUCE WARWICK

Title: SENIOR VP

Street Address: 60 COLUMBUS CIRCLE

City: NEW YORK State: NY Zip: 10023

Telephone Number: (212) 421-5333 Fax: (212) 801-1066

E-Mail Address:

Signature and Date*

*Signature required for authorized representative of Condo or Co-Op board. Second officer signature not required for corporations.

26B Lessee Responsible for Annual Sign or Marquee Permit

Name (please print):

Relationship to Owner:

Business Name/Agency:

Street Address:

City: State: Zip:

Telephone Number: Fax:

E-Mail Address:

Internal Use Only	
Pre-Filer Name:	
Pre-Filer Signature:	Date:
Cost Estimate: \$	
Amount Due: \$	Verified by ▼ Date ▼
Initial Amount Paid: \$	
Balance Due: \$	
Stamps, Certifications and Notes:	



TR1: Technical Report Statement of Responsibility

This form must be typewritten



1 Location Information *Required for all applications.*

House No(s) 501

Street Name WEST 30TH STREET

Work on Floor(s) CEL

2 Applicant Information *Required for all applications.*

Choose all that apply: ☒ Design Applicant 3A, 4A, 5 ☐ Special Inspections Applicant 3B-D, 6-8 ☐ Progress Inspections Applicant 4B-D, 6-8

Last Name PATEL

First Name GHANSHYAM

Middle Initial C

Business Name FNA ASSOCIATES, INC

Business Telephone (973) 244-5995

Business Address 100 NEW DUTCH LANE

Business Fax (973) 244-0544

City FAIRFIELD

State NJ

Zip 07004

Mobile Telephone () -

License Type choose one: ☒ P.E. ☐ R.A. ☐ Other:

License Number 048329

Special Inspection
Agency Number

3 Special Inspection Items *Required for all applications, continued on page 2; ■ indicates report required.*

3A Identification of Requirement		3B Identification of Responsibilities	3C Certificate of Complete Inspections / Tests	3D Withdraw Responsibilities
Y	N Special Inspections	Code/Section	Initial & Date	Initial & Date
<input type="checkbox"/>	<input checked="" type="checkbox"/> Flood Zone Compliance	BC G105		
<input type="checkbox"/>	<input checked="" type="checkbox"/> Fire Alarm Test	BC 907, BC 1704.13		
<input type="checkbox"/>	<input checked="" type="checkbox"/> Photoluminescent Exit Path Markings ■ TR7	BC 1026.11		
<input type="checkbox"/>	<input checked="" type="checkbox"/> Emergency Power Systems (Generators)	BC 1704.13, BC 2702		
<input type="checkbox"/>	<input checked="" type="checkbox"/> Structural Steel - Welding	BC 1704.3.1		
<input type="checkbox"/>	<input checked="" type="checkbox"/> Structural Steel - Erection & Bolting	BC 1704.3.2, BC 1704.3.3		
<input type="checkbox"/>	<input checked="" type="checkbox"/> Structural Cold-Formed Steel	BC 1704.3.4		
<input type="checkbox"/>	<input checked="" type="checkbox"/> Concrete - Cast-In-Place	BC 1704.4		
<input type="checkbox"/>	<input checked="" type="checkbox"/> Concrete - Precast	BC 1704.4		
<input type="checkbox"/>	<input checked="" type="checkbox"/> Concrete - Prestressed	BC 1704.4		
<input type="checkbox"/>	<input checked="" type="checkbox"/> Masonry	BC 1704.5		
<input type="checkbox"/>	<input checked="" type="checkbox"/> Wood - Off-Site fabrication of Structural Elements	BC 1704.6		
<input type="checkbox"/>	<input checked="" type="checkbox"/> Wood - Installation of High-Load Diaphragms	BC 1704.6.1		
<input type="checkbox"/>	<input checked="" type="checkbox"/> Wood - Installation of Metal-Plate-Connected Trusses	BC 1704.6.3		
<input type="checkbox"/>	<input checked="" type="checkbox"/> Wood - Installation of Prefabricated I-Joists	BC 1704.6.4		
<input type="checkbox"/>	<input checked="" type="checkbox"/> Soils - Site Preparation	BC 1704.7.1		
<input type="checkbox"/>	<input checked="" type="checkbox"/> Soils - Fill placement & In-Place Density	BC 1704.7.2, BC 1704.7.3		
<input type="checkbox"/>	<input checked="" type="checkbox"/> Soils - Investigations (Borings/Test Pits) ■ TR4	BC 1704.7.4		
<input type="checkbox"/>	<input checked="" type="checkbox"/> Pile Foundations & Drilled Pier Installation ■ TR5	BC 1704.8		
<input type="checkbox"/>	<input checked="" type="checkbox"/> Pier Foundations	BC 1704.9		
<input type="checkbox"/>	<input checked="" type="checkbox"/> Underpinning	BC 1704.9.1		
<input type="checkbox"/>	<input checked="" type="checkbox"/> Wall Panels, Curtain Walls, and Veneers ■	BC 1704.10		
<input type="checkbox"/>	<input checked="" type="checkbox"/> Sprayed Fire-Resistant Materials	BC 1704.11		
<input type="checkbox"/>	<input checked="" type="checkbox"/> Exterior Insulation Finish Systems (EIFS)	BC 1704.12		
<input type="checkbox"/>	<input checked="" type="checkbox"/> Alternative Materials - OTCR Buildings Bulletin # _____	BC 1704.13		
<input type="checkbox"/>	<input checked="" type="checkbox"/> Smoke Control Systems	BC 1704.14		
<input type="checkbox"/>	<input checked="" type="checkbox"/> Mechanical Systems	BC 1704.15		
<input type="checkbox"/>	<input checked="" type="checkbox"/> Fuel-Oil Storage and Fuel-Oil Piping Systems	BC 1704.16		
<input type="checkbox"/>	<input checked="" type="checkbox"/> High-Pressure Steam Piping (Welding)	BC 1704.17		
<input type="checkbox"/>	<input checked="" type="checkbox"/> Fuel-Gas Piping (Welding)	BC 1704.18		
<input type="checkbox"/>	<input checked="" type="checkbox"/> Structural Safety - Structural Stability	BC 1704.19		
<input type="checkbox"/>	<input checked="" type="checkbox"/> Mechanical Demolition	BC 1704.19, BC 3306.6		

3 Special Inspection Items (continued) Required for all applications; ■ indicates report required.					
3A Identification of Requirement			3B Identification of Responsibilities	3C Certificate of Complete Inspections / Tests	3D Withdraw Responsibilities
Y	N	Special Inspections	Code/Section	Initial & Date	Initial & Date
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Excavation - Sheeting, Shoring, and Bracing	BC 1704.19, BC 3304.4.1		
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Soil Percolation Test - Drywell	BC 1704.20.1		
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Soil Percolation Test - Septic	BC 1704.20.1		
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Site Storm Drainage Disposal and Detention System Installation	BC 1704.20		
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Septic System Installation	BC 1704.20		
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Sprinkler Systems	BC 1704.21		
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Standpipe Systems	BC 1704.22		
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Heating Systems	BC 1704.23		
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Chimneys	BC 1704.24		
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Firestop, Draftstop, and Fireblock systems	BC 1704.25		
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Aluminum Welding	BC 1704.26		
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Seismic Isolation Systems	BC 1707.8		
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concrete Test Cylinders	BC 1905.6	Submit TR2 to complete these items	
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concrete Design Mix	BC 1905.3	Submit TR3 to complete these items	

4 Progress Inspection Items Required for all applications. ■ indicates report required.					
4A Identification of Requirement			4B Identification of Responsibilities	4C Certificate of Complete Inspections / Tests	4D Withdraw Responsibilities
Y	N	Progress Inspections	Code/Section	Initial & Date	Initial & Date
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Preliminary	28-116.2.1, BC 109.2		
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Footings and Foundation	BC 109.3.1		
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Lowest Floor Elevation (attach FEMA form)	BC 109.3.2		
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Frame Inspection	BC 109.3.3		
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Energy Code Compliance Inspections	BC 109.3.5	Submit TR8 to complete this item	
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Fire-Resistance Rated Construction	BC 109.3.4		
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Public Assembly Emergency Lighting	28-116.2.2		
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Final*	28-116.2.4.2, BC 109.5, Directive 14 of 1975, and 1 RCNY §101-10		

* For column 4C, indicate date when the actual final inspection was performed

5 Design Applicant's Statements and Signatures P.E./R.A. responsible for plans, choose both below and sign/seal.	
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☒ I have identified all of the special inspections, progress inspections and tests required for compliance.

☐ I certify that the Special Inspection and Approved Agencies engaged by the owner to supervise the work specified above are acceptable. (BC 1704.1)

Name (please print)

GHANSHYAM PASTAL

Signature

Date

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

6 Owner's Statement and Signature for Progress/Special Inspector Required when inspection applicant identifies responsibilities.	
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I have reviewed the information provided herein and, to the best of my knowledge and belief, attest to its accuracy. I approve the identification of the responsible progress inspector. 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 a fine or imprisonment, 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.

Name (print) RONALD WACKROW

Title EXECUTIVE V.P.

Signature

Date

12/10/12

7 Inspection Applicant's Identification of Responsibilities

Check all that apply below:

- ☐ For the special inspections indicated above in section 3, I certify that I am the principal/director of the special inspection agency accepting responsibility for conducting the inspections. I further certify that I have read the applicable sections of the New York City Construction Codes in connection with special inspections as well as 1 RCNY 101-06 Rule, which specifies the qualifications required for each inspection and that this agency meets those qualifications for each and every special inspection for which I/we take responsibility. I agree that both I and the agency will comply with all provisions of the New York City Construction Codes and the Rule. I am aware of the additional sanctions imposed on false filings by §28-211.1.2 of the Administrative Code.
- ☐ I certify that I am conducting Small Building Inspections and assume the responsibility for the special inspections specified in section 3 above. I personally, or where permitted by the New York City Construction Codes, qualified personnel under my direct supervision, will perform the required inspections and tests. All inspection and test reports shall be signed and made available to the Department. I understand that a qualified special inspection agency is required for Soils Investigation, Pier and Pile installation, Underpinning of structures and Protection of the sides of excavations greater than 10 feet in depth. I am aware of the additional sanctions imposed on false filings by §28-211.1.2 of the Administrative Code.
- ☐ For the progress inspections indicated above in section 4, except energy code inspections on the TR1EN form, and/or concrete test items indicated in section 3, I assume the responsibility and I personally, or where permitted by the New York City Construction Codes, qualified personnel under my direct supervision, will perform the required inspections and tests on such forms and in such matter as the Department requires or requests. I am aware of the additional sanctions imposed on false filings by §28-211.1.2 of the Administrative Code.

Final Inspection:

- ☐ I will make final inspection of the construction work, including those inspections during its progress necessary to my certification upon final inspection that all work substantially conforms to approved construction documents and applicable laws and rules. I will confirm that the performance of progress inspections and other inspections has been documented before I report the work complete. As prescribed by 1 RCNY 101-10, I will perform the final inspection within 1 year from the expiration of the last valid permit of the work.
- Upon completion of the work and within 30 days of my final inspection, I will file a certification attesting to the fact that all work was performed and completed in accordance with the approved construction documents, laws and rules, except as reported otherwise.
- I understand that my failure to file a certification of completion or to notify the Department of my withdrawal of responsibilities within one year from expiration of the last valid permit may result in the loss of my privileges to file under Directives 2 and 14 of 1975 or issuance of a violation, or both. I am aware of the additional sanctions imposed on false filings by §28-211.1.2 of the Administrative Code.

- ☐ **Change of Applicant:** I am a newly designated individual responsible for the items specified herein and I hereby state that:
- ☐ None of the inspections/tests indicated herein have been performed to date by the previously designated individual.
- ☐ Some of the inspections/tests indicated herein have been performed by the previously designated individual, as indicated in the attached report.

I am aware of the additional sanctions imposed on false filings by §28-211.1.2 of the Administrative Code.

Name (please print)

Signature

Date

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

8 Inspection Applicant's Certification of Completion

- ☐ I have completed the items specified herein and certify the following (check one only):
- ☐ All work performed substantially conforms to approved construction documents and has been performed in accordance with applicable provisions of the New York City Construction Codes and other designated rules and regulations.
- ☐ All work performed substantially conforms to approved construction documents and has been performed in accordance with applicable provisions of the New York City Construction Codes and other designated rules and regulations, except as indicated in the attached report.
- I am aware of the additional sanctions imposed on false filings by §28-211.1.2 of the Administrative Code.
- ☐ **Withdrawal of Applicant:** I am withdrawing responsibility for the items of special/progress inspections and/or tests indicated herein and herewith submit the results or status of the work performed to date.

Name (please print)

Signature

Date

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