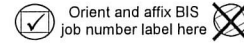




PW1: Plan / Work Application

Must be typewritten.



121324290

1	Location Information <i>Required for all applications.</i>
House No(s) 501 Street Name WEST 30TH STREET	
Borough Manhattan Block 702 Lot 50 BIN 1089323 C.B. No. 104	
Work on Floor(s) C,0-5,5M,6-34,34M,35-48,R Apt. / Condo No(s)	

2	Applicant Information <i>Required for all applications. Fax, mobile telephone and e-mail address are optional information.</i>
Last Name DIGIACOMO First Name AUGUSTINE Middle Initial A	
Business Name JAROS, BAUM & BOLLES Business Telephone (212) 530-9300	
Business Address 80 PINE STREET Business Fax (212) 269-5894	
City NEW YORK State NY Zip 10005 Mobile Telephone () -	
E-Mail DIGIACOMOA@JBB.COM License Number 052475	
Choose one: <input checked="" type="checkbox"/> P.E. <input type="checkbox"/> R.A. <input type="checkbox"/> Sign Hanger <input type="checkbox"/> Other, please specify:	

3	Filing Representative <i>Complete only if different from applicant specified in section 2. Fax, mobile phone, and e-mail are optional info.</i>
Last Name JACKIER/MCPHERSON/SEEMANGAL First Name PHILLIP/YVETTE/MADAN 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) 715-6264	
E-Mail PHILLIP@GILLMANINC.COM Registration Number A10679	

4	Filing Status <i>Required for all applications. Choose one and provide specified associated information.</i>
<input type="checkbox"/> Initial Filing 5, 7, 11, 12A, 25-26 Review is requested under which Building Code? <input type="checkbox"/> 2008 <input type="checkbox"/> 1968 <input type="checkbox"/> Prior to 1968 Choose <input type="checkbox"/> Standard Plan Examination or Review one: <input type="checkbox"/> Professional Certification PC1, POC1 <input type="checkbox"/> Self Certification of Objections A11	
<input type="checkbox"/> Prior to Approval Actions 25-26 <input type="checkbox"/> Amend Existing Filing 4A <input type="checkbox"/> Subsequent Filing 6-7, 8A (Alt-2 only), 11	
<input checked="" type="checkbox"/> Post Approval Amendment (PAA) 4A, 6, 24-25 Will PAA affect filing fees? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
<input type="checkbox"/> New (Superseding) Applicant 4A, 25-26	
<input type="checkbox"/> Reinstatement 24-26 <input type="checkbox"/> Withdrawal 26 <input type="checkbox"/> Specified in 4A and 6 <input type="checkbox"/> Entire Job 4A Indicate existing document number affected by filing: 06	

5	Job/Project Types <i>Choose one and provide specified associated information.</i>
<input type="checkbox"/> Alteration Type 1 6A-E, 8B-C, 9-10, 13C-F, 14 & 18-20, 22, PW1-A, PD1, select all that apply: <input type="checkbox"/> Change in Exits <input type="checkbox"/> Change in Number of Stories <input type="checkbox"/> Change in Number of Dwelling Units <input type="checkbox"/> Change in Occupancy / Use <input type="checkbox"/> Change inconsistent with current Cert. of Occup.	
<input type="checkbox"/> Alteration Type 1, OT: "No Work" 8C, 9-10 & 12, 13C-F, 14, 18-19, PW1-A, PD1 <input type="checkbox"/> Alteration Type 2 5A, 6A-D, 8A-B, 9-10, & 13C-E, 14, 20, 22 <input type="checkbox"/> Alteration Type 3 5A, 6B-F, 8C, 9-10, 13C-E, 22 <input type="checkbox"/> New Building 6A-E, 8F-G, 9A-C, 9L, 10, 12, 13A-E (13B: 2008 Code only), 14, 18-20, PW1-A, PD1	
<input type="checkbox"/> Full Demolition 6B, 8D, 9B-D, & 13D-E, 14, 21A, 22 <input type="checkbox"/> Sign 5A, 6B-D, 9B, 22-23 <input type="checkbox"/> Subdivision 9B, 12A-B <input type="checkbox"/> Condominium <input type="checkbox"/> Improved 17 5A Directive 14 acceptance requested? <input type="checkbox"/> Yes <input type="checkbox"/> No	

6	Work Types <i>Select all that apply but no more than allowed by job and filing type. "OT" required on all NB and Alteration 1 initial applications.</i>
6A <input type="checkbox"/> BL - Boiler PW1-C <input type="checkbox"/> FS - Fuel Storage PW1-C <input checked="" type="checkbox"/> PL - Plumbing PW1-B <input type="checkbox"/> FA - Fire Alarm <input type="checkbox"/> FP - Fire Suppression <input type="checkbox"/> SD - Standpipe PW-1B <input type="checkbox"/> FB - Fuel Burning PW1-C <input type="checkbox"/> MH - Mechanical <input type="checkbox"/> SP - Sprinkler PW-1B	
6B <input type="checkbox"/> EQ - Construction Equipment 15 6C <input type="checkbox"/> OT/GC - General Construction 6D <input type="checkbox"/> OT - Other, describe:	
6E <input type="checkbox"/> CC - Curb Cut 16 6F <input type="checkbox"/> OT/ANT - Antenna <input type="checkbox"/> OT/BPP - Builders Pavement Plan 8D <input type="checkbox"/> OT/FPP - Fire Protection Plan <input type="checkbox"/> OT/MAR - Marquee 8E, 26B	

7 Plans/Construction Documents Submitted *Plans are required for most applications.*

☐ AR - Architectural ☐ BP - BPP Checklist ☐ DM - Demolition (Full/Partial) ☐ EN - Energy Analysis ☐ FO - Foundation or ☐ NP - No Plans
☐ ME - Mechanical ☐ OT - Other ☒ PL - Plumbing ☐ ST - Structural ☐ ZO - Zoning

8 Additional Information

8A	WT	Cost	WT	Cost	WT	Cost	8B	Is a building enlargement proposed?	8C	Estimated Job Cost \$
								<input type="checkbox"/> No enlargement is proposed		8D Street Frontage: linear ft.
								<input type="checkbox"/> Yes 12, PD1		8E Height: ft. Width: ft.
								<input type="checkbox"/> Horizontal <input type="checkbox"/> Vertical		8F Name of cluster or development below:
								Additional Construction Floor Area:		Project lead job no.
8G Total Construction Floor Area:						sq. ft.				

9 Additional Considerations, Limitations or Restrictions

Yes No	Yes No	9F	Structural Peer Reviewer License No.
9A	<input type="checkbox"/> <input type="checkbox"/> Structural peer review required per BC §1627 <i>If yes, 9F</i>		P.E.
9B	<input type="checkbox"/> <input type="checkbox"/> Filed to Comply with Local Law <i>If yes, 9G</i>	9G	Local Law No(s) Year
	<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>	9H	Violation No(s)
	<input type="checkbox"/> <input type="checkbox"/> Requesting legalization of work where no work w/o a permit violations have been issued		
9C	<input type="checkbox"/> <input type="checkbox"/> Adult Establishment <i>If yes, plot diagram (except DM)</i>	9I	BSA Calendar No(s)
	<input type="checkbox"/> <input type="checkbox"/> Compensated Development (Inclusionary Housing)		
	<input type="checkbox"/> <input type="checkbox"/> Low Income Housing (Inclusionary Housing)	9J	CPC Calendar No(s)
	<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>		
9D	<input type="checkbox"/> <input type="checkbox"/> Includes permanent removal of standpipe, sprinkler or fire suppression related systems	9K	High-Rise Team Tracking Number:
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 *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*
☐ Energy analysis is on another job number: _____
 Yes No
☐ ☐ This application is, or is part of, a project that utilizes trade-offs among different major systems
☐ ☐ This application utilizes trade-offs within a single major system
☐ 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 work is entirely in a "low-energy building" and is limited to the building envelope.
☐ The scope of work does not affect the energy use of the building.
☐ This is a post-approval amendment and exempt under a prior edition of the energy code. See statement of exemption on attached drawings.

* Note: Exceptions to Section ECC 101.4.3 are NOT exemptions. For exceptions, check compliance statement and use the Energy Analysis.

11 Job Description
11A Related DOB Job Numbers

11B Primary application job no.

12 Zoning Characteristics										
12A District(s) C6-4				12B Street legal width: 0 ft.						
Overlay(s)				Street Status: <input checked="" type="checkbox"/> Public <input type="checkbox"/> Private						
Special Dist.(s) HY				If the zoning lot includes multiple tax lots, list all tax lots here ►						
Map Number 8B										
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		B		Existing		Proposed	
Construction Classification		<input type="checkbox"/> Yes <input type="checkbox"/> No		1-A		Building Height ft.		565 ft.	
Multiple Dwelling Classification						Building Stories		48	
						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 Construction Material: _____ <input type="checkbox"/> Fence Size: _____ linear ft. BSA/MEA Approval No. _____ <input type="checkbox"/> Supported Scaffold <input type="checkbox"/> Other: _____					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):										Existing Proposed									
										Yes No Yes No									
Tentative tax lot numbers (new tax lots only):										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"/>									

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


21	Demolition Details *Mechanical equipment other than handheld devices to be used for demolition or removal of debris (BC §3306.4).
<div style="display: flex; justify-content: space-between;"> Yes No </div>	
21A <input type="checkbox"/> <input type="checkbox"/> Demo. filing 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 Choose one.
<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		
<div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> Purpose: <input type="checkbox"/> Advertising <input type="checkbox"/> Non-Advertising </div> <div style="width: 40%;"> Type: <input type="checkbox"/> Illuminated 23A <input type="checkbox"/> Non-Illuminated </div> <div style="width: 10%;"> Estimated Cost: \$ _____ Total Square Feet: _____ Height above Curb: _____ ft. in. Height above Roof: _____ ft. in. </div> <div style="width: 45%;"> 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> </div> </div>			
Location: <input type="checkbox"/> Ground <input type="checkbox"/> Roof 23B <input type="checkbox"/> Wall 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>			
<i>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</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: _____			

24	Comments Place additional comments on an AI-1 form. See Guide for proper incorporation of professional certification statements.
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Submission of revised plumbing drawings and schedule B:

25	Applicant's Statements and Signatures Required for all applications.
<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 documents submitted.</p> <p>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.</p>	
<div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> 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> <div style="width: 50%;"> <div style="text-align: center;">  </div> Name (please print) AUGUSTINA DIGIORGIO Signature _____ Date <u>8.26.14</u> P.E. / R.A. Seal (apply seal, then sign and date over seal) </div> </div>	

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):

Relationship to Owner:

Business Name/Agency:

Street Address:

City:

State:

Zip:

Telephone Number:

Fax:

E-Mail Address:

Signature and Date

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

Name (please print):

Title:

Street Address:

City:

State:

Zip:

Telephone Number:

Fax:

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-File Name:

Pre-File Signature:

Date:

Cost Estimate: \$

Amount Due: \$

Verified by ▼ Date ▼

Initial Amount Paid: \$

Balance Due: \$

Stamps, Certifications and Notes: