



PW1: Plan / Work Application

Must be typewritten.

4

DEPT.BLDGS	121324290 Job Number
SC113463564	Scan Code

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?

☐ 2008 ☐ 1968 ☐ Prior to 1968☐ Amend Existing Filing 4A☐ Withdrawal 26☐ Subsequent Filing 6-7, 8A (All-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 A11☒ 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

(13B: 2008 Code only), 14, 18-20, PW1-A, PD1

5A Directive 14 acceptance requested?

☐ Change inconsistent with current Cert. of Occup.☐ 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 - Construction Equipment 156C ☐ OT/GC - General Construction6D ☒ OT - Other, describe: SOE☐ OT/FPP - Fire Protection Plan☐ 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?		8C Estimated Job Cost \$	
									<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:		8D Street Frontage: linear ft. 8E Height: ft. Width: ft. 8F Name of cluster or development below:	
8G Total Construction Floor Area: sq. ft.						sq. ft.		Project lead job no.				
9 Additional Considerations, Limitations or Restrictions												
Yes No					Yes No					9F Structural Peer Reviewer License No. P.E.		
9A <input type="checkbox"/> <input type="checkbox"/> Structural peer review required per BC §1627 If yes, 9F												
9B <input type="checkbox"/> <input type="checkbox"/> Filed to Comply with Local Law If yes, 9G					<input type="checkbox"/> <input type="checkbox"/> Landmark					9G Local Law No(s) Year		
<input type="checkbox"/> <input type="checkbox"/> Other, specify:					<input type="checkbox"/> <input type="checkbox"/> "Little E" Hazmat Site							
<input type="checkbox"/> <input type="checkbox"/> Restrictive Declaration / Easement If yes, 9M					<input type="checkbox"/> <input type="checkbox"/> Unmapped Street					9H Violation No(s)		
<input type="checkbox"/> <input type="checkbox"/> Zoning Exhibit (I, II, III, etc.) If yes, 9N					<input type="checkbox"/> <input type="checkbox"/> Filing to Address Violation(s) If yes, 9H							
<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 If yes, plot diagram (except DM)					<input type="checkbox"/> <input type="checkbox"/> Included in LMCCC					9I BSA Calendar No(s)		
<input type="checkbox"/> <input type="checkbox"/> Compensated Development (Inclusionary Housing)					<input type="checkbox"/> <input type="checkbox"/> Infill Zoning							
<input type="checkbox"/> <input type="checkbox"/> Low Income Housing (Inclusionary Housing)					<input type="checkbox"/> <input type="checkbox"/> Loft Board							
<input type="checkbox"/> <input type="checkbox"/> Single Room Occupancy (SRO) Multiple Dwelling					<input type="checkbox"/> <input type="checkbox"/> Quality Housing					9J CPC Calendar No(s)		
<input type="checkbox"/> <input type="checkbox"/> Filing includes Lot Merger / Reapportionment If yes, 17					<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										9K High-Rise Team Tracking Number:		
9E <input type="checkbox"/> <input type="checkbox"/> Work includes partial demolition as defined in AC §28-101.5 If yes, 21B												
<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. [SECC 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: Choose one <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.												
* 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						
Support of excavation associated with new building as shown on drawings filed herewith.												
						11B Primary application job no.						

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			
13C 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.		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):										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																											
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td>Plaza Area</td> <td>Existing sq. ft.</td> <td>Proposed sq. ft.</td> <td>Arcade Area</td> <td>Existing sq. ft.</td> <td>Proposed sq. ft.</td> </tr> <tr> <td>Parking Area</td> <td>sq. ft.</td> <td>sq. ft.</td> <td>Parking Spaces</td> <td></td> <td></td> </tr> <tr> <td>Loading Berths</td> <td>sq. ft.</td> <td>sq. ft.</td> <td>Loading Berths</td> <td></td> <td></td> </tr> </table>										Plaza Area	Existing sq. ft.	Proposed sq. ft.	Arcade Area	Existing sq. ft.	Proposed sq. ft.	Parking Area	sq. ft.	sq. ft.	Parking Spaces			Loading Berths	sq. ft.	sq. ft.	Loading Berths			Yes No <input type="checkbox"/> <input type="checkbox"/> Tidal / Fresh Water Wetlands <input type="checkbox"/> <input type="checkbox"/> Urban Renewal <input type="checkbox"/> <input type="checkbox"/> Fire District <input type="checkbox"/> <input type="checkbox"/> Flood Hazard Area									
Plaza Area	Existing sq. ft.	Proposed sq. ft.	Arcade Area	Existing sq. ft.	Proposed sq. ft.																																
Parking Area	sq. ft.	sq. ft.	Parking Spaces																																		
Loading Berths	sq. ft.	sq. ft.	Loading Berths																																		

21 Demolition Details *Mechanical equipment other than handheld devices to be used for demolition or removal of debris (BC §3306.4).

Yes No

- 21A ☐ ☐ Demo. filing is for a secondary structure? If yes, specify structure being demolished:
☐ ☐ Mechanical means* from out of building? If yes, mechanical means will demolish: ☐ entire structure or ☐ part of structure
☐ ☐ Mechanical means* from within building? If yes, describe equipment proposed:
- 21B ☐ ☐ Demolition work affects the exterior building envelope

22 Asbestos Abatement Compliance Choose one.

- ☐ The scope of work requires related asbestos abatement as defined in the regulations of the NYC Department of Environmental Protection (DEP).
☐ The scope of work does not require related asbestos abatement as defined in the regulations of the NYC DEP.
☐ 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: ☐ Advertising ☐ Non-Advertising
Type: ☐ Illuminated 23A ☐ Non-Illuminated
Estimated Cost: \$
Total Square Feet:
Height above Curb: ft. in.
Height above Roof: ft. in.

Location: ☐ Ground ☐ Roof 23B ☐ Wall

Yes No

- ☐ ☐ Is sign inside building line? If no, sign projects by: ft. in.
☐ ☐ Designed for changeable copy? If no, 23C
☐ ☐ Does an OAC have an interest in this sign or location? If yes, 23G
☐ ☐ Within 900' and within view of an arterial highway? If yes, 23D
☐ ☐ Within 200' and within view of a park 1/2 acre or more? If yes, 23E

→ 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

23A Illuminated type: ☐ Direct ☐ Flashing ☐ Indirect

Yes No

- ☐ ☐ If sign projects beyond building line, is owner billed for annual permit? If no, specify in 26B

23B ☐ ☐ Is roof sign tight, closed or solid?

23C Sign wording. If extensive, provide only key wording.

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.**25 Applicant's Statements and Signatures** Required for all applications.

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 property 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, 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. ☐ (←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. Cluster Development Statement (if applicable): I hereby state that all specifications relating to this job are identical to those previously submitted under the group lead job number, except as specified herein.

Yes No

- ☐ ☐ For Initial New Building and Alteration 1 applications filed under the 2008 NYC Building Code only: does this building qualify for high-rise designation?
☐ ☐ 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.

Name (please print)

GHANSHYAM

Signature

Date

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.

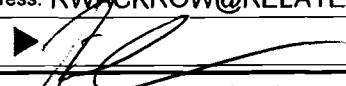
Business Name/Agency: ERY TENANT LLC C/O THE RELATED

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