Hong Sima, Ph.D., P.E.

275 Barnhill Road, Perkasie, PA 18944, USA 215-589-3720 hong.sima@yahoo.com

April 3, 2020

New York State Department of Environmental Conservation 1 Hunters Point Plaza 47-40 21st Street – 4th floor Long Island City, NY 11101

ATTN: Denise Harrington Grattan, Environmental Analyst II, DEP

Re: Response to NOIA Application ID: 2-6105-00889/00001

Dear Ms. Grattan:

The following response to the latest Notice of Incomplete Application (NOIA) dated February 26, 2020 is provided on behalf of Sharp's Compliance, Inc.

For ease of reference, each comment from the February 26, 2020 NOIA is presented below in *italics*, followed by Sharps' response:

 The 893 Shepherd facility is currently operating a 10-day hazardous waste storage facility; therefore, the facility should already possess a Certificate of Occupancy (COO) and New York City Fire Department (NYCFD) permit for the existing operations. Please submit that the COO and NYCFD permit for the existing ongoing operations. If the facility does not have either the COO or the NYCFD permit, please provide an explanation as to why. Department staff agrees that the revised COO and NYCFD permit for the RMW operation will be a permit condition requiring its submission prior to operation.

Sharps Response: Please refer to the correspondence provided by Sharps' legal counsel, Mr. Lawrence Schillinger, Esq., on January 28, 2020 and April 2, 2020. The aforementioned correspondence is provided as Attachment A to this letter and Appendix Q to the April 3, 2020 Revised Engineering Report (see Attachment B).

2) Application form, engineering report 8/12/19 Appendix E, received August 2019, box 11. The information presented is unclear, please amend so that waste accepted corresponds to throughput volumes and storage capacity volumes correspond to facility capacity. Also, please provide total quantities of RMW and hazardous waste pursuant to NYSDEC regulations. It is not necessary to breakdown the specific RMW or hazardous waste types on the form but the information should continue to be included in the reports.

Sharps Response: Appendix E – Application for Solid Waste Management Facility Permit Form Full, as part of the April 3, 2020 Revised Engineering Report, has been revised to reflect the following:

"11. Waste Accepted:

1. Regulated Medical Waste Maximum: 12,000 tons per year;

2. Non-hazardous expired pharmaceutical waste maximum: 500 tons per year; and,

3. Hazardous waste, as defined in 6 CRR-NY 371.1(d): 2,080 tons per year*. 11a. N/A

11b.1. Maximum Daily Tonnage Received: RMW: 48 tons per day; HW: 8 tons/day* 11b.2. Maximum Storage Capacity: RMW: 144 tons; HW: 8 tons*; 842.52 CY of storage

*Sharps may transfer hazardous waste amounts not to exceed, in aggregate, 2,000 gallons/day under NYSDEC Transporter Permit No. 2A-538. Hazardous waste tonnage calculated based on an average 8 lbs/gal density."

3) Please provide some explanation of the types of hazardous waste accepted and stored at the facility. The list of class types of hazardous waste was noted in Table 5.2 of the engineering report but neither the engineering report nor waste control plan provides any explanation of the waste types. It may be appropriate to add some narrative to the texts and include an appendix with more detailed information regarding the class types.

Sharps Response: Section 5.1 and Appendix C (City Environmental Quality Review (CEQR)) of the April 3, 2020 Revised Engineering Report, has been revised to include the following:

Sharps collects and transfers hazardous waste, incidental to regulated medical waste generation, from Retailers, Retail Pharmacies, Long-Term Care Facilities, Compounding Pharmacies, Dental Offices, Medical Offices, Veterinarian Clinics, Retail Clinics, Schools and Universities. Types of hazardous waste that Sharps collects and transfers include, but are not limited to:

| Hazardous Waste Type | Description | Examples | Generators | | |
|-------------------------|--|--|--|--|--|
| High BTU Liquids | High BTU Liquids are 100% liquid with no sludge or smaller inner containers in the DOT shipping container. A High BTU Liquid solution is a good energy source (>6,000 BTU/lb) when burned. Lastly, High BTU Liquids have a low amount of water (<30%) in the overall solution. | Gram stain solution, xylene, methanol, alcohol/ethanol, isopropanol, oil, naphtha, acetone, methyl ethyl ketone (MEK), butyl alcohol, ethyl acetate, hexane, toluene | Dermatologists, veterinarians, clinical labs | | |

| Hazardous Waste Type | Description | Examples | Generators | | |
|---|--|--|---|--|--|
| Formalin Solution, 10% | Used 10% formalin solution is regarded by NIOSH as a hazard to human health and well-being, it is a suspected carcinogen, and a proven human sensitizer. | Tissue samples in small containers, consolidated liquids in carboys/drums. | Dermatologists, veterinarians, clinical labs | | |
| Hazardous Waste Pharmaceuticals (HWP) | HWP are medications that meet the EPA definition of "hazardous waste" and have an associated RCRA code (waste code). | Warfarin, mitomycin C, lindane, nicotine, daunomycin, dandruff shampoo, insulin, vaccines, alcohol-based creams, gels, and ointments | Pharmacies, Skilled Nursing, Long Term Care Facilities (LTCF), rehab facilities | | |
| Medical Aerosols/Inhalers | Meter-dose inhalers are pressurized canisters that are managed as aerosols. In some cases, the propellant liquid within the canister is also flammable and carries a RCRA code. | Inhalers | LTCF, allergists, doctors' offices | | |
| Used X-ray Fixer/Developer Solution | Fixer and Developer solutions are part of a two-product system in the development of X-ray film. In their unused state, they do not carry a RCRA code. The x-ray fixer is typically a weak acid solution. During the fixing process, light- sensitive silver-halide crystals present on radiographic films are released as silver-thiosulfate. Silver is a RCRA regulated waste. | X-ray Fixer/Developer Solution | Dentists, doctors' offices, urgent care | | |

4) The engineering report notes that 2,000 gpd of hazardous waste is transferred Monday -Friday, peak days, but does not include any volumes for weekends. Please provide some estimate for weekends as well. This will also have to correspond to the proposed traffic volumes.

Sharps Response: Regular scheduled operations are limited to weekdays; Monday – Friday. Note, however, that an exception to the normal operating schedule may be required to respond to an emergency condition. Based on historical data Sharps projects an occurrence of twelve (12) weekend emergency calls per year. Typically, requests for emergency service are made by local government agencies.

Note, further: Sharps does not provide emergency service for the collection of hazardous waste. In the event of an emergency condition which requires an emergency response for the removal of hazardous waste a third-party State authorized stand-by contractor will be contacted by the generator or by Sharps.

Please refer to the following table for a quantification of maximum traffic generation related to weekend emergency response calls:

| Peak Hours (1) | Time (2) | Collection | Collection Vehicles Long-Haul Truck | | Employee | e Vehicles | Total ⁽³⁾ | | |
|----------------|----------|------------|-------------------------------------|----------|----------|------------|----------------------|----------|------|
| | | Vehicles | PCEs | Vehicles | PCEs | Vehicles | PCEs | Vehicles | PCEs |
| N/A | N/A | 2* | 3 | 0 | 0 | 2* | 2 | 4 | 5 |

Maximum Vehicular Trips - Weekend Emergency Peak Hours

*One (1) vehicle in and one (1) out.

Notes:

(1) Per Chapter 332 of the CEQR Technical Guidance, weekend peak periods are dependent upon the proposed project's site-generated trips and adjacent roadway traffic volumes. Therefore, it is conservatively assumed these emergency operations occur during peak hours.

(2) Emergency operations are unpredictable. Therefore, it is conservatively assumed these operations could occur at any time outside of normal operating hours / days.

(3) Inbound and outbound collection vehicles and/or employee vehicle trip ends will not typically occur within the same hour, but for purposes of this environmental impact analysis have been aggregated to generate maximum PCE estimates.

The above traffic volumes, attributed to emergency response occurring outside of the normal posted operating hours, have been included in the CEQR (Appendix C).

5) Engineering report Table 5.2 should be renumbered 5.1.3.

Sharps Response: Table 5.2 of the April 3, 2020 Revised Engineering Report, has been renumbered to 5.1.3, per NYSDEC request.

6) Engineering report Section 7.1.3, Table 7.1.3. This table should be relabeled to indicate it only addresses Hazardous Waste Authorized to be Accepted.

Sharps Response: Section 7.1.3, Table 7.1.3 of the April 3, 2020 Revised Engineering Report, has been revised to, "Table 7.1.3 – Type(s) of Hazardous Waste Authorized to be Accepted", to indicate it only addresses hazardous waste, per NYSDEC request.

7) Drawings inconsistent with Text/Applicant Response 2. Additional modifications made to the drawings. As stated in your response the drawings submitted January 31, 2020 were amended beyond removing the EarthRes label so that they no longer are consistent with the latest engineering report of 8/12/19. An example of one change is some of the drawings appear to include 1 additional RMW box truck to total 9 RMW box trucks, 1 hazardous waste box truck and 2 long haul trucks within the building whereas the former plan and 8/12/19 engineering report discusses 8 RMW box trucks. Please update the engineering report and all applicable documents accordingly and discuss all changes made to the drawings submitted on 1/31/20 in comparison to the 8/12/19 submittal.

Sharps Response: All discrepancies between the Engineering Report dated April 3, 2020 and associated application materials (i.e., figures, drawings, appendices, etc.) have been addressed. Please note that changes made to the Engineering Report have been provided as a red-lined strikeout electronic version on CD, per NYSDEC request (see Comment No. 8 and attached).

A list of modifications made to the drawings submitted on January 29, 2020 are provided below:

| Engineering Report Drawing | Revision(s) |
|-------------------------------|---|
| C-01 Site Plan | Added proposed emergency exit near the electrical panel enclosure along Stanley Avenue. Note, this revision was made to be consistent with the Department of Buildings submission. Removed Earthres Group, Inc. logo / information from title block. |
| C-02 Operations Plan | Added proposed emergency exit near the electrical panel enclosure along Stanley Avenue. Note, this revision was made to be consistent with the Department of Buildings submission. Added RMW Delivery and Designated Hazardous Waste vehicles near Waste Storage Area 2. Added secondary pallets near loading dock / Waste Storage Area 2. Added overhead storage racks / supplies areas near Waste Storage Area 1 and 2. Modified incoming and outgoing material flow pathways corresponding to the relocation / addition of the RMW Delivery and Designated Hazardous Waste vehicles. Modified Waste Storage Area 1 storage capacity from 2,745 ft² (450.24 CY) to 3,498 ft² (573.72 CY). Modified Waste Storage Area 2 storage capacity from 2,392 ft² (392.28 CY) to 1,639 ft² (268.80 CY). Note, the total waste storage capacity (5,137 ft² (842.52 CY)) remained consistent through both the August 12, 2019 and January 29, 2020 submissions. Modified Waste Storage Area 2 by adding an aisle / egress from the main plant floor to the proposed emergency exit. Note, this revision was made to be consistent with the Department of Buildings submission. |

| Engineering Report Drawing | Revision(s) |
|---------------------------------|---|
| а. В | Removed refrigerated transfer trailer from Loading Dock 2. Removed scale near Berriman Street entrance. Removed Earthres Group, Inc. logo / information from title block. |
| C-03 Queueing Site Plan | Added proposed emergency exit near the electrical panel enclosure along Stanley Avenue. Note, this revision was made to be consistent with the Department of Buildings submission. Added five (5) RMW Delivery vehicles. Added secondary pallets near loading dock / Waste Storage Area 2. Added overhead storage racks / supplies areas near Waste Storage Areas 1 and 2. Modified vehicle orientation of Modified Waste Storage Area 1 storage capacity from 2,745 ft² (450.24 CY) to 3,498 ft² (573.72 CY). Modified Waste Storage Area 2 storage capacity from 2,392 ft² (392.28 CY) to 1,639 ft² (268.80 CY). Note, the total waste storage capacity (5,137 ft² (842.52 CY)) remained consistent through both the August 12, 2019 and January 29, 2020 submissions. Modified Waste Storage Area 2 by adding an aisle / egress from the main plant floor to the proposed emergency exit. Note, this revision was made to be consistent with the Department of Buildings submission. Modified location of loading dock radiation detectors. Removed refrigerated transfer trailer from Loading Dock 2. Removed Earthres Group, Inc. logo / information from title block. |
| C-04 Truck Staging Site Plan | Added proposed emergency exit near the electrical panel enclosure along Stanley Avenue. Note, this revision was made to be consistent with the Department of Buildings submission. Added one (1) RMW Delivery vehicles. Added secondary pallets near loading dock / Waste Storage Area 2. Added overhead storage racks / supplies areas near Waste Storage Areas 1 and 2. Modified orientation of vehicles Modified Waste Storage Area 1 storage capacity from 2,745 ft² (450.24 CY) to 3,498 ft² (573.72 CY). Modified Waste Storage Area 2 storage capacity from 2,392 ft² (392.28 CY) to 1,639 ft² (268.80 CY). |

| Engineering Report Drawing | Revision(s) |
|--|---|
| | Note, the total waste storage capacity (5,137 ft² (842.52 CY)) remained consistent through both the August 12, 2019 and January 29, 2020 submissions. Modified Waste Storage Area 2 by adding an aisle / egress from the main plant floor to the proposed emergency exit. Note, this revision was made to be consistent with the Department of Buildings submission. Modified location of loading dock radiation detectors. Removed refrigerated transfer trailer from Loading Dock 2. Removed Earthres Group, Inc. logo / information from title block. |
| C-05 Current Operations/Staging | Added proposed emergency exit near the electrical panel enclosure along Stanley Avenue. Note, this revision was made to be consistent with the Department of Buildings submission. Added secondary pallets near loading dock / Waste Storage Area 2. Added overhead storage rack / supplies area near the steel wall (former sliding divider). Modified orientation of vehicles. Modified incoming and outgoing material flow pathways corresponding to the reorientation vehicles. Removed refrigerated transfer trailer from Loading Dock 2. Removed Earthres Group, Inc. logo / information from title block. |
| EEP-01 Current Operations Emergency Evacuation Plan | Added proposed emergency exit near the electrical panel enclosure along Stanley Avenue. Note, this revision was made to be consistent with the Department of Buildings submission. Added secondary pallets near loading dock / Waste Storage Area 2. Added overhead storage rack / supplies area near the steel wall (former sliding divider). Added six (6) fire extinguishers. Modified orientation of vehicles. Removed refrigerated transfer trailer from Loading Dock 2. Removed Earthres Group, Inc. logo / information from title block. |
| EEP-02 Proposed Operations Emergency Evacuation Plan | Added proposed emergency exit near the electrical panel enclosure along Stanley Avenue. Note, this revision was made to be consistent with the Department of Buildings submission. Added one (1) RMW Delivery vehicles. |

| Engineering Report Drawing | Revision(s) |
|-------------------------------|---|
| | Added secondary pallets near loading dock / Waste Storage Area 2. Added overhead storage racks / supplies areas near Waste Storage Areas 1 and 2. Added six (6) fire extinguishers. Modified orientation of vehicles Modified Waste Storage Area 1 storage capacity from 2,745 ft² (450.24 CY) to 3,498 ft² (573.72 CY). Modified Waste Storage Area 2 storage capacity from 2,392 ft² (392.28 CY) to 1,639 ft² (268.80 CY). o Note, the total waste storage capacity (5,137 ft² (842.52 CY)) remained consistent through both the August 12, 2019 and January 29, 2020 submissions. Modified Waste Storage Area 2 by adding an aisle / egress from the main plant floor to the proposed emergency exit. o Note, this revision was made to be consistent with the Department of Buildings submission. Modified alternate emergency evacuation route. Removed refrigerated transfer trailer from Loading Dock 2. Removed scale near Berriman Street entrance. Removed Earthres Group, Inc. logo / information from title block. |

8) Please update the engineering report and the waste control plan and all updated plans and associated drawings to reflect all operations onsite, the information provided in all submissions and responses to this NOIA. The 2-part submission (8/12/19 engineering report and waste control plan and the subsequent January 2020 plans) do not correspond. Changes should be provided as a red-lined strikeout electronic version indicating all changes. Upon receipt of an updated application which fully includes all operations onsite, review will recommence.

Sharps Response: The April 3, 2020 Engineering Report and associated materials have been updated accordingly (see attached). Changes made to the Engineering Report have been provided as a red-lined strikeout electronic version on CD, per NYSDEC request (see attached). Modifications made to the large format drawings between the August 12, 2019 Engineering Report submission and the January 29, 2020 submission are provided above in response to NYSDEC Comment No. 7.

9) PPP & SEQR. Please update all PPP & SEQR documents to reflect all existing and proposed operations onsite and provide some description of the types of hazardous waste accepted as per the existing operations (see comment #3). Future PPP dates such as the future public information meetings can be replaced as TBD. Changes should be

provided electronically in a red-line strikeout format in addition to hard copies. The updated copies will be compared to the updated engineering report and waste control plan to determine consistency.

Sharps Response: The Public Participation Plan (PPP) will be updated accordingly and submitted as a separate document which is not included as part of this submission. Changes made to the PPP will be provided as a red-lined strikeout electronic version on CD, per NYSDEC request, and submitted as a separate document which is not included as part of this submission. Changes made to Appendix C (CEQR) of the April 3, 2020 Revised Engineering Report are described above in response to NYSDEC Comment Nos. 3 and 4. Changes made to the CEQR are provided as a red-lined strikeout electronic version on CD, per NYSDEC request.

10) SEQR. Please ensure the document compares existing and proposed conditions. The proposed condition should be a reasonable worst case scenario where both the hazardous waste and RMW operations are operating simultaneously during all hours of operation. Noise and traffic volumes should address weekday and weekends hours and volumes. Traffic volumes should be organized as a temporal distribution of incoming and outbound truck traffic volumes including the size of each truck as well. Please provide a statement as to whether or not the proposed noise and traffic will exceed SEQR/CEQR thresholds. (see CEQR Technical Manual respective chapters, Section 200). If further analysis is warranted pursuant to CEQR, please provide the analysis comparing proposed conditions to the CEQR standards. Please note additional information may be required to address SEQR requirements as well.

Sharps Response: Changes made to Appendix C (CEQR) of the April 3, 2020 Revised Engineering Report are described above in response to NYSDEC Comment Nos. 3 and 4. Changes made to the CEQR are provided as a red-lined strikeout electronic version on CD, per NYSDEC request. Traffic volumes organized as a temporal distribution of incoming and outbound truck traffic volumes, including the type / implied size of each truck, are provided as Tables 3, 5 and 6 of the revised CEQR (Appendix C).

Based on the worst case conditions, the current and proposed operations will not exceed noise and/or traffic thresholds; therefore, no further analysis is warranted.

11) Upon receipt of the above requested information including, but not limited to, site plans and a revised engineering report which adequately addresses all the above comments, review will recommence. Please note given the absence of necessary information regarding the site and operations, further comments on all sections of the application may be forthcoming.

Sharps Response: See attached revised Engineering Report and associated materials.

Instructions for submission of this response and associated materials were not provided by the Department in the February 26, 2020 NOIA, therefore, previous submission instructions from the June 25, 2019 NOIA have been followed:

Three (3) hardcopies of this response to and associated material are being sent directly to the Regional Permit Administrator along with an electronic copy. The electronic version of this NOIA response and associated materials is a searchable OCR-PDF format, provided on a CD. CDs are also being submitted to the following individuals as previously requested by the Department:

Two (2) CDS:

Thomas Killeen Chief RCRA Permitting Section Materials Management NYS Dept. of Environmental Conservation 625 Broadway New York, NY 12233-7251

<u>One (1) CD</u>: Alan G. Woodard, Ph.D. Environmental Program Specialist Materials Management NYS Dept. of Environmental Conservation 625 Broadway New York, NY 12233-725

Documents which have been prepared by a professional engineer display the engineer's seal and signature (where appropriate).

If you have any questions or would like to discuss this response, please feel free to contact me and/or Mr. Curtis Knisley at 713-443-3539.

Sincerely,

Hong Sima, PK.D., P.E

- cc: Curtis Knisley, Sharps Compliance (electronic)
 Lawrence R. Schillinger, Esq. (electronic)
 Thomas Killeen and Alan G. Woodard, Ph.D., NYSDEC (CDs only)
 NYSDEC, Region 2, Regional Permit Administrator
- Enclosures: Attachment A Lawyer's Correspondence to Address February 26, 2020 NOIA Item #1 Attachment B – Revised Engineering Report as of April 3, 2020

Sharps Compliance, Inc. Response to NOIA Application ID: 2-6105-00889/00001 April 3, 2020

ATTACHMENT A

Lawyer's Correspondence to Address February 26, 2020 NOIA Item #1

LAWRENCE R. SCHILLINGER ATTORNEY AND COUNSELOR AT LAW

PO BOX 11182 ALBANY NY 12211

TEL: 518 459-0600 FAX: 518 677-1053 lschillinger@msn.com

January 28, 2020

Denise Grattan Environmental Analyst NYS DEC Region 2 47-40 21st Street Long Island City NY 11101

Re: Sharps Compliance, Inc. Application ID: 2-6105-00889/00001

Dear Ms. Grattan,

The Department issued a Notice of Incomplete Application (NOIA) dated June 25, 2019 in regard to a pending application filed by Sharps Compliance, Inc. for a permit to operate a solid waste management facility authorizing short-term storage and truck-to-truck transfer of regulated medical waste.

The NOIA required, inter alia, that the Applicant provide "documentation from the building department that the handling of hazardous waste meets the NYC building code and documentation from the fire department showing that that the handling of hazardous waste meets the NYC fire code."

We respectfully propose that documentation of the local approvals noted above be excluded as a pre-condition to a determination that the application is "Administratively Complete".

Rather, upon review and acceptance of any other matters specified in the NOIA, we request that the Department proceed to a determination of administrative completeness and issuance of a Draft Permit which provides that operation of the facility may not commence pending: (1) an amended Certificate of Occupancy authorizing the proposed use of the subject property and (2) an FDNY permit authorizing storage of hazardous waste.

Denise Grattan January 28, 2020 Page 2

BACKGROUND

As a pre-requisite for a determination of administrative completeness the NOIA required "documentation from the building department that the handling of hazardous waste meets the NYC building code and documentation from the fire department showing that that the handling of hazardous waste meets the NYC fire code."

In order to address the Department's demand, the requested documentation will be satisfied by the issuance by the NYC DOB of an amended Certificate of Occupancy for the subject property located at 893 Shepherd Avenue Brooklyn NY 11208, and by issuance of a permit from the NYFD for the storage of hazardous waste. [Note: amendment of the Certificate of Occupancy is a pre-requisite for FDNY processing of an application for a permit to store hazardous waste.]

Sharps Compliance filed with the NYC Department of Buildings an application to amend the Certificate of Occupancy on January 9, 2020. [Att. A]. A recent decision promulgated by the NYC Board of Standards and Appeals resolved that a comparable RMW facility located at 10002 Farragut Avenue constitutes a Use Group 16 activity and as such is permitted in a Commercial Zone [Att. B] As the proposed Sharps facility is sited within a Manufacturing Zone which encompasses Use Group 16, we are assured that our request for an amended Certificate of Occupancy will be granted.

JUSTIFICATION

There are several compelling considerations which justify issuance of a completeness determination at this juncture and prior to ministerial local approvals.

1. Compliance with Local Regulation via Incorporation of Permit Condition

We note that the Department can deem the application complete and prepare a draft permit which contains a permit condition as follows:

Prior to operation, the applicant / permittee shall provide to the Department documentation from the NYC Department of Buildings that the handling of hazardous waste meets the NYC building code and documentation from the FDNY showing that the handling of hazardous waste meets the NYC fire code. Denise Grattan January 28, 2020 Page 3

By establishing as a permit condition certification that the proposed permitted facility satisfies applicable local land use codes and fire regulations prior to operation, the Department fulfills its implied objective of comporting the permitting process with and respecting the governance of the host municipal government.

By doing so the Department also properly distances its review from the parochial concerns of zoning and land use in cognizance with established precedent. As well-established in the Commissioner's Interim Decision in <u>Matter of New York City Department of Sanitation</u> (Spring Creek Yard Waste Composting Facility, June 14, 2006), the Department lacks the authority under the ECL to adjudicate compliance with local government zoning, and any attempt to do so would be an arrogation of the Department's jurisdiction (see <u>Matter of Town of Poughkeepsie v. Flacke</u>, 84 AD2d 1, 5-6 [2d Dept 1981], lv denied 57 NY2d 602 [1982]; see also Matter of Hingston v. New York State. Dept. of Envtl. Conservation, 202 AD2d 877, 878-879 [3d Dept], leave denied 84 NY2d 809 [1994]). Instead, issues concerning consistency with local zoning must be decided by the local agency with appropriate jurisdiction, subject to judicial review if necessary (see <u>Matter of 4-C's Develop. Corp., Interim Decision of the Commissioner</u>, May 1, 1996.) See, also: <u>Matter of CMW Industries</u>, ALJ Ruling on Issues, Party Status and Environmental Significance and Order of Disposition, dated March 24, 2009.

2. Public Participation

It is accepted and understood that upon a determination of completeness the applicant will engage in an enhanced public participation process in accordance with the Department's Environmental Justice policy. Incorporation of a permit condition linking operation of the facility to a certification of compliance with local zoning and fire regulations properly provides assurance to public participants that a local forum is identified that should either or both of these considerations be a concern.

3. Capital Improvement

Compliance with local zoning and/or fire codes may require the applicant to incur significant costs for capital improvements, e.g. upgrade to the installed fire suppression system, installation of a fire alarm call box. It is manifestly unfair to require a permit applicant to incur capital improvement costs <u>speculatively</u> prior to permit issuance. The Department would not require any other applicant to construct a proposed facility before a permit is granted. We respectfully aver that it would be unjust, arbitrary and capricious for Department to require the applicant in this matter to do so.

Denise Grattan January 28, 2020 Page 4

4. <u>Timeliness</u>

Amendment of a Certificate of Occupancy entails a cumbersome review. It is administratively efficient for the review and approval process at the Department of Buildings to run in parallel to and in coordination with the DEC permitting process. There is no justification for withholding a determination of administrative completeness and the commencement of public notice / public engagement during the pendency of ministerial municipal regulatory processes.

Thank you for your consideration. We are of course available to discuss this matter with you and staff at greater length, either in person or via telephone conference.

Very truly yours,

Lawrence R. Schillinger

Enc.

cc. Curtis Knisley, Sharps Compliance Hong Sima, PhD, P.E.



EF1: eFiling Job Application Cover Sheet Generated by the eFiling application.



You are almost done!

All documents generated by this eFiling must be signed and sealed appropriately and submitted with all other filing requirements to the borough office.

| 1 Key Application Information This key information was generated based on i | nformation provided by the user during the eFiling process. | | | | | | | |
|--|--|--|--|--|--|--|--|--|
| Filing At: BROOKLYN - 893 SHEPHERD AVENUE Validated On: 01/09/2020 1:30 PM Forms Generated: PWI, Schedule A Filing Type: ALTERATION 1 (A1) - INITIAL | | | | | | | | |
| 2 Filing Fee Estimation The following fee estimation is based on information provided by the applicant. | | | | | | | | |
| COST FEE = ((10 - 3)* 10.3) + 280 = 352.1 | Building Type: OTHER Fee Status: STANDARD Directive 14: NO Computed Total Filing Fee: \$352.10 Minimum Required Payment: \$280.00 Computed Civil Penalty: \$0.00 Records Management Fee: \$165.00 STANDARD PLAN EXAM Number of Stories: 1 Total Building Square Footage: 32450 sq. ft. | | | | | | | |
| PD-1 (Plot Diagram) must be manually completed for this application. | Work Type(s)- | | | | | | | |

3 Other Important Information

- The applicant is responsible for reviewing all documentation generated by eFiling for completeness and accuracy. The submitted documents are the official filing record upon being accepted for filing at the Department.
- It is the applicant's responsibility to ensure that the forms generated by eFiling are accompanied by all other required plans and documentation and that all filing submissions are in compliance with applicable codes, laws, rules and regulations.
- Though eFiling checks all applications for errors, other issues may prevent the Department from accepting this filing.

4 Where to File This application must be filed in-person in the borough where the proposed work is to occur, or electronically.

| Office Location: | 210 JORALEMON STREET |
|------------------|----------------------|
| | BROOKLYN, NY 11201 |
| Phone: | (718) 802-3675 |
| Hours: | 8:30 AM - 4:30 PM |
| | |



DOB Reference Number: T00002244985-000070 User Ref ID: SHEPHERD

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PW1: Plan / Work Application

Must be typewritten



Location Information Required for all applications. House No(s) 893 Street Name SHEPHERD AVENUE Borough BROOKLYN Block 04521 BIN 3327505 C.B. No. 305 Lot 00001 Apt. / Condo No(s) Work on Floor(s) 001, MEZ Applicant Information Required for all applications. Fax, mobile telephone and e-mail address are optional information. Middle Initial T Last Name GORMAN First Name WALTER Business Name WALTER T. GORMAN, P.E., P.C. Business Telephone (212) 532-5970 Business Fax (212) 725-3690 Business Address 420 WEST 45 STREET, 6TH FLOOR Mobile Telephone Zip 10036 City NEW YORK State NY License Number 043490 E-Mail WALTER. T. GORMAN@WTGPEPC. COM Sign Hanger R.L.A. Other: X) P.E. R.A. Choose one: Filing Representative Complete only if different from applicant specified in section 2. Fax, mobile phone, and e-mail are optional info. 3 Middle Initial T Last Name GORMAN/SEM/GAR/KH First Name WALTER/SH/J/L Business Telephone (212) 532-5970 Business Name WALTER T. GORMAN, P.E., P.C. **Business Fax** Business Address 420 WEST 45 STREET, 6TH FLOOR Mobile Telephone Zip 10036 City NEW YORK State NY Registration Number N10467 E-Mail WALTER.T.GORMAN@WTGPEPC.COM Filing Status Required for all applications. Choose one and provide specified associated information. Prior to Approval Actions 25-26 Reinstatement 24-26 XInitial Filing 5, 7, 11, 12A, 25-26 Amend Existing Filing 4A Withdrawal 26 Choose only one: Subsequent Filing 6-7, 8A (Alt-2 only), 11 Specified in 4A and 6 [X] Standard Plan Examination or Review Entire Job Post Approval Amendment (PAA) 4A, 6, 24-25 Professional Certification PC1, POC1 4A Indicate existing document number Will PAA affect filing fees?
Yes
No Professional Certification of Objections Al1 affected by filing: New (Superseding) Applicant 4A, 25-26 5 Job/Project Types Choose one and provide specified associated information. XAlteration Type 1 or Alteration Type 1 required Alteration Type 2 5A, 6A-D, 8A-B, 9-10, 13C-E, & Full Demolition 6B, 8D, 9A & 14, 20, 22 9C-D, 9K, 9M, 13D-E, 14, 21A, 22 to meet New Building requirements (28-101.4.5) Alteration Type 3 5A, 6B-F, 8C, 9-10, 13C-E, 20, Subdivision 9A, 9D, 12A-B 6A-E, 8B-C, 8F, 9-10, 12, 13C-F, 14, 18-20, 22 & Alteration Type 1, OT: "No Work" 8C, 8F, 9-10 & New Building 6A-E, 8F, 9A, 9C-K, 9M, 10, 12 & Condominium Improved 17 5A Directive 14 acceptance requested? XNO □Yes 12, 13C-F, 14, 18-19, 22, PW1A, PD1 Sign 5A, 6B-D, 9A, 9D, 22-23 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. PL - Plumbing PW18 6E 🗌 CC - Curb Cut 16 6A BL - Boiler PW1C □ FS - Fuel Storage PW1C OT/LAN - Landscape SD - Standpipe PW1B IFA - Fire Alarm FP - Fire Suppression DFB - Fuel Burning PW1C MH - Mechanical SP - Sprinkler PW18 6F 🔲 OT/ANT - Antenna OT/BPP - Builders Pavement Plan 8D 6B DEQ - Construction 6C M OT/GC - General 6D 🗂 OT - Other, describe: OT/FPP - Fire Protection Plan Equipment 15 Construction OT/MAR - Marquee 8E, 26B

| PW1 | PAGE 2 | | | | | | |
|---|---|--|--|--|--|--|--|
| 7 Plans/Construction Documents Submitted Plans are required for most applications. | | | | | | | |
| Are plans being submitted with this PW1? X Yes No If yes, do the plans include: FO - Foundation EN - Energy | Analysis | | | | | | |
| 8 Additional Information | | | | | | | |
| | | | | | | | |
| 8A WT Cost WT Cost 8B is a building enlargement proposed? 8C Estimated Job Cost \$10000 Image: Street Frontage: Image: Street Frontage: Image: Street Frontage: Street Frontage: Image: Street Frontage: St | | | | | | | |
| Image: Sector of the sector | linear ft. ft. | | | | | | |
| ☐ Horizontal ☐ Vertical 8F Total Building Square Footag | | | | | | | |
| Additional Construction Floor Area: 32450 | ,c. sq. ft | | | | | | |
| sq. ft. | | | | | | | |
| 9 Additional Considerations, Limitations or Restrictions | | | | | | | |
| 9A Review is requested under which building code? 2014 2008 1968 XPrior to 1968 | | | | | | | |
| Yes No | | | | | | | |
| 98 🔲 🖾 Alteration required to meet New Building | | | | | | | |
| requirements (28-101.4.5) If yes, 13A-B | | | | | | | |
| X Atteration is a major change to exits X Change is inconsistent with current certificate of occupation | incy | | | | | | |
| 9C 🗌 🖾 Façade Alteration | - | | | | | | |
| X Adult Establishment If yes, plot diagram (except DM) X Infill Zoning | ••• | | | | | | |
| 🗋 🖾 Compensated Development (Inclusionary Housing) 👘 🕱 Loft Board Yes No Work Includes: | | | | | | | |
| 🔲 🕱 Low Income Housing (Inclusionary Housing) 👘 🔀 Quality Housing 📄 🕱 Prefab wood I-joi | sts | | | | | | |
| 📋 🕅 Single Room Occupancy (SRO) Multiple Dwelling 👘 🖾 Site Safety Job/Project 🔲 🖾 Structural cold-fo | | | | | | | |
| T X Filing includes Lot Merger / Reapportionment <i>If yes</i> , 17 ' C X Included in LMCCC ' C X Open-web steel | joists | | | | | | |
| 9D X Landmark X Filing to address violations VI Little "E" or PD Site (list #s—max. 5): | | | | | | | |
| | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | | | | | | |
| □ X Unmapped/CCO Street | | | | | | | |
| Li ki Requesting regarization of work where no work without a permit violations have been issued | Year | | | | | | |
| Image: Second seco | | | | | | | |
| Laws (list #s-max. 2) | | | | | | | |
| CRFN(s) Restrictive Declaration / Easement (max. 4): | | | | | | | |
| □ 🕱 CRFN(s) Zoning Exhibit (I, II, III, etc max. 4): | | | | | | | |
| 9E 📋 😰 BSA Calendar Numbers (max. 5): | | | | | | | |
| 9F 🔲 😡 CPC Calendar Numbers (max. 5): | | | | | | | |
| 9G D 😡 Work includes lighting fixture and/or controls, installation or replacement. [ECC §404 and §505] | | | | | | | |
| 9H 🔲 🕅 Work includes modular construction under New York State jurisdiction 9I High Rise Team trac | king #: | | | | | | |
| Work Includes modular construction under New York City jurisdiction | ··· - · ·· | | | | | | |
| 9J Structural peer review required per BC 16. If yes, provide NYS P.E. license number: | | | | | | | |
| 9K 🖸 🔟 Work includes permanent removal of standpipe, sprinkler or fire suppression related systems | <u></u> | | | | | | |
| 9L 📋 🕱 Work includes partial demolition as defined in AC §28-101.5, or the raising/moving of a building <i>If yes, 21B</i> | | | | | | | |
| Image: Structural stability affected by proposed work 9M Image: Work involves or will result in an amount of soil disturbance greater than or equal to one acre in an MS4 area | | | | | | | |
| 9M I Work involves or will result in an amount of soil disturbance greater than or equal to one acre in an MS4 area III Work is part of a larger common plan or development or sale that involves or will result in an amount of soil disturbance greater | r than or | | | | | | |
| equal to one acre in an MS4 area | | | | | | | |
| 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* | | | | | | | |
| Code Compliance Path (choose one): | | | | | | | |
| Energy Analysis (choose one): I Tabular Analysis I REScheck COMcheck Energy Modeling | | | | | | | |
| To the best of my knowledge, belief and professional judgment, all work under this application is exempt from the NYCECC* in accordation one of the following (choose one): | ince with | | | | | | |
| The work is an alteration of a State or National historic building. | | | | | | | |
| The scope of the work is entirely in a "low-energy building" and is limited to the building envelope. | | | | | | | |
| The entire scope of work involves a temporary structure and/or one or more of the following work types: FA, FP, SD, SP, FS, EQ, CC, OT/BPP, OT/FPP. Other work types are not exempt. | | | | | | | |
| This is a post-approval amendment and exempt under a prior edition of the energy code. See statement of exemption on attached | l drawings, | | | | | | |
| DOB Reference Number: T00002244985-000 | | | | | | | |

PW1

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| PW1 | PAGE 3 |
|---|--|
| 11 Job Description | 11A Related DOB Job Numbers |
| PROPOSED TO CHANGE OCCUPANCY GROUP AND | AMEND THE USE GROUP TO |
| "TRUCKING TERMINAL AND STORAGE OF SEALE WASTE" , PROPOSE TO INSTALL EXIT/EMERGE | |
| EXIT DOOR, ALL AS PER PLAN. | |
| | · · · · · · · · · · · · · · · · · · · |
| | |
| | 11B Primary application job no. |
| 12 Zoning Characteristics | |
| 12A District(s) M1-1 | 128 Street legal width: 60 ft. |
| Ovenlay(s) | Street Status: X Public Private |
| Special Dist.(s) | If the zoning lot includes multiple |
| Map Number 17D | tax lots, list all tax lots here 🅨 |
| 12C Proposed: Use* Zoning Ftoor Area District FAR | Proposed Lot Details: Proposed Yard Details: |
| MANUFACTURING 32450 sq.ft. M1-1 0.98 | Lot Type: 🕱 Corner 🛄 Interior 🛄 Through 🛛 Check here if no yards: 🕱 or |
| sq. ft, | Lot Coverage 99 % Front Yard ft. |
| sq. ft. | Lot Area <u>33080</u> sq. ft. Rear Yard ft. Lot Width 175 ft. Rear Yard Equivalent ft. |
| | Lot Width175 ft. Rear Yard Equivalentft. Proposed Other Details: Side Yard 1 ft., |
| sq. ft. | Enclosed Parking? XYes No Side Yard 2 ft. |
| Proposed Totals 32450 sq. ft. | |
| Existing Total 32450 sq. ft. | Perimeter Wall Height 17 ft. |
| *Use can be one of the following: residential, commercial, m | anufacturing, or community facility. List only one use per line. |
| 13 Building Characteristics *Main use/dominant occupar | ncy per AC §28-101.5, **Use 2014 Code equivalents only, ‡Residential w/olher use. |
| 13A Primary structural system, choose one: Masonry | Concrete (CIP) Concrete (Precast) |
| | Steel (Structural) Steel (Cold-Formed) Steel (Encased in Concrete) |
| 13BF | Proposed 13D Building Type: 1, 2, or 3 Family 🗴 Other |
| Structural Occupancy/Risk Cat. 2014 Code - | 2014 Code Mixed use building? [‡] Yes X No |
| Seismic Design Cat. Designations? | Designations? 13E Existing Proposed |
| 13C Occupancy Classification* D-2 Yes k No Construction Classification 1 Yes k No | |
| Multiple Dwelling Classification | 1 Lyes in No Building Stories 1 1 Dwelling Units < |
| 13F Building was originally erected pursuant to | |
| The earliest Code with which this building or any part of it is | a required to comply: 2014 2008 X 1968 Prior to 1968 |
| 14 Fill Choose one. | |
| X Not Applicable On-Site Off-Site | Under 300 cubic yards |
| 15 Construction Equipment | 16 Curb Cut Description |
| Chute Sidewalk Shed | Construction Material: Size of cut (with splays); ft. |
| | SA/MEA Approval No Distance to nearest cornerft. |
| Supported Scaffold Other: | to 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): | Fire Alarm 🗍 🗹 🗍 😿 |
| | |
| | Standpipe 🗋 🕱 🗌 🕱 |
| - | |

DOB Reference Number: T00002244985-000070 User Ref ID: SHEPHERD 8/19

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| | | | | | | <u> </u> | | | PAGE 4 |
|------------|---|--|---|---|----------------------------|----------------|------------|----------------------------|---|
| 19 | Open Space | S | | | | | | ····· | |
| | | Existing | Propose | d | | | | Existing | Proposed |
| | Plaza Area | 0 sq. ft. | 0 | sq. ft. | | Arcade A | ea | 0 sq. | ft. 0 sq. ft. |
| | Parking Area | 0 sq. ft. | 2680 | sq, ft. | | Parking S | paces | 0 | 10 |
| | Loading Berths | 600 sq. ft. | 600 | sq. ft. | | Loading E | Berths | 1 | 1 |
| 20 | Site Charact | eristics | | | | | 20A | Flood Hazard Are | a Information |
| | Yes No K Tidal V X Coasta X Fire Di | I Erosion Hazard Area | Ye | I Urban Renewa | 1 | es, 20A | · | | mprovement? / damaged? : part of proposed work? |
| 21 | Demolition D | etails Mechanical eq | uipment d | other than handheld d | evices to | be used fo | or demoli | ition or removal of det | ris (BC §3306.4). |
| 21A 21B | Image: Constraint of the second se | filing is for a secondary nical means* from out o nical means* from withir tion work affects the ext ope of work involves rais | f building? building? erior build | If yes, mechanica If yes, describe ing envelope | al means | will demol | ish: 🗍 e | ntire structure or |]part of structure |
| 22 | Asbestos Ab | atement Complianc | e Choos | e one. | | | | · <u>.</u> | |
| | The scope of the DEP ACP-5 Cor The scope of we | e work is not an asbesto | s project : sbestos re | as defined in the regul | lations of I in the reg | the NYC I | DEP, D | EP Control # is requir | (15 RCNY 1-23(b)) |
| 23 | Sign | | | | | | | | |
| | Location: Gro | Type: IIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIII | Tota Heigi | | ft. in ft. in | - \ - [| /esNo | billed for annual perm | building line, is owner t? If no, specify in 26B |
| | Yes No El El la sign | inside building line? | If no sia | en projecto hur | 61 in | 23B E | | ls roof sign tight, close | |
| | Is sign inside building line? If no, sign projects by: ft. in. 23C Sign wording. If extensive, provide only key wording. Designed for changeable copy? If no, 23C Does an OAC have an interest in this sign or location? If yes, 23G | | | | | | | | |
| į | | 900' and within view of | | | | | | from Arterial Highway | |
| | 🔲 🗆 Within | 200' and within view of | a park 1/2 | 2 acre or more? If yes | s, 23E | | | from Park 1/2 acre or | more: ft. |
| | | ver is "yes" to either of t | | | s is an | | | Number: | |
| | advert | ising sign, OAC sign nu | mber is re | quired in section 23F | • | 23G C | AC Reg | istration Number: | |
| 24 | Comments F | lace additional commen | ts on an A | Al-1 form. See Guide | for prope | r incorpora | ation of p | professional certification | on statements. |

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| ₽V | <u>V1</u> | | | PAGE 5 |
|-----|--|---|--|---|
| 25 | Aŗ | piliq | ant's Statements and Signatures Required for all a | pplications. |
| | bend certificant subrappli this a those For I Code Direct all co | elii, m Sersta ficate ed fro nitted icable applic e prev Initial e ont; ctive onstru | ohetary or otherwise, either as a gratuity for property performing the job or in ind that if I are found after hearing to have knowingly or negligently made a f form, signed statement, application, report or certification of the correction of the correction of the correction. | No Name (Drink) Wallerer T GORMAN 47 |
| 26 | Pr | ope | rty Owner's Statements and Signatures | |
| | bene unde certif barre perm | dit, m arstan ficate, ed from hitted f | onetary or otherwise, either as a gratulty for property performing the job or in if that if I am found after hearing to have knowingly or negligently made a fal form, signed statement, application, report or certification of the correction in filling further applications or documents with the Department, Furthermore | nment, or both. It is unlawful to give to a city employee, or for a city employee to accept, any nexchange for special consideration. Violation is punishable by imprisonment or fine or both. I lse statement or to have knowingly or negligently falsified or allowed to be falsified any of a violation required under the provisions of this code or of a rule of any agency. I may be , I understand that I am responsible for insuring that a final inspection be performed when the led, along with all required submittal documents, so that the NYC Department of Buildings may w. |
| | and e | all futo | norized the applicant to file this application for the work specified herein are amendments. I will not knowingly authorize any work that is not in e with all applicable laws, rules, and regulations. | Owner Individual Partnership NYCHA / HHC Type: Corporation Other Government NYC Agency |
| | Yes | | | Condo Unit Owner or Co-Op Tenant-shareholder 26A |
| | | | Fee Exemption Request (Non-Profit Owned and Operated) In accordance with Administrative Code §28-112.1, Exception 1, I certify that the deed holder is a corporation or association organized and operated exclusively for the purposes indicated in such section, and that the property is used exclusively by such entity for such purposed. ★ | Is the deed holder a non-profit organization? Yes IN No Name (please print): ISSAC TURKIEH Relationship to Owner: |
| | | | Fee Exemption Request (NYCHA/HHC, NYC Agency, or Other | Business Name/Agency: SIT REALTY LLC |
| | | _ | Government Owned and Operated) The building or any part thereof to be constructed, renovated, altered or demolished is owned and | Street Address: 2266 E 2ND STREET |
| | | | operated exclusively for the purposes of the NYC Agency, NYC Authority, NYS Agency, Federal Government or any other government entity. | City: BROOKLYN State: NY Zip: 11223 |
| I | | X | Owner's Certifications Regarding Occupied Housing The site of the building to be altered or demolished, or the site of the new | Telephone Number: (516) 322-7763 Fax: |
| | | | building to be constructed, contains one or more occupied dwelling units that will remain occupied during construction. These occupied dwelling | E-Mail Address: ARYEHREALTY@YAHOOCOM |
| | | | Units have been clearly identified on the submitted construction documents. | Signature and Date |
| . { | ₽ | X | The sile of the building to be altered or demolished, or the site of the new building to be constructed, contains occupied housing accommodations | 26A Condo/Co-Op Board See note in bottom left corner of page. |
| | | | 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 | Name (please print): |
| | | | following: The owner is not required to notify the New York State Homes and | Title: |
| | | | Community Renewal (NYSHCR) of the owner's intention to file because the nature and scope of the work proposed, pursuant to | Street Address: |
| | | | NYSHCR regulations, does not require notification. | City: State: Zip: |
| | | | The owner has notified the New York State Homes and Community Renewal (NYSHCR) of its intention to file such construction | Telephone Number: Fax: |
| | | | documents/apply for such permit and has complied with all requirements imposed by the regulations of such agency as | E-Mail Address: |
| | | | preconditions for such (filing/application). Provide date NYSHCR notified: | Signature and Date |
| ε | J | Q | Owner's Certification for Directive 14 Applications (if applicable) I have read and am fully aware of the applicant's statement that the | 26B Lessee Responsible for Annual Sign or Marquee Permit |
| | | | construction documents submitted and all construction documents related to this application will not require a new or amended Certificate of | Name (please print): |
| | | | Occupancy as there is no change in use, exits, or occupancy and the work is not inconsistent with the current certificate of occupancy. | Relationship to Owner: |
| | | | Furthermore, I understand that I am responsible for retaining a qualified design professional to perform a final inspection when the permitted work | Business Name/Agency: |
| | | | is complete and this professional must submit a satisfactory final inspection report to the NYC Department of Buildings within the time | Street Address: |
| | 14.4 | | following inspection prescribed by Department rule. | City: State: Zip: |
| 5 | ligna | ture n | Section 26A: Section required if unit owner signed Section 26. equired for authorized representative of Condo or Co-Op board. | Telephone Number: Fax: |
| | *F | or fee | waivers, please see the PW1 User Guide | E-Mail Address: |

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DOB Reference Number: T00002244985 User Ref ID: SHEPHERD 8/19

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DOB Reference Number: T00002244985-000070 User Ref ID: SHEPHERD

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| Numerrum Persons Live (and bescription Code (Designet (and bescription Code (Coupsnoy) (and bescription Company (and bescription Com | escription | | | Description | | Description | | Description | MEZ 4 | Description | | Floor Ma Nui Per | Ex |
|--|-------------------------|-------------|--------|-------------|------|-------------|------|-------------|-------|--------------------------|------|------------------------------------|--|
| 2014 Code Building Code Occupancy Dwelling/ Rooming Oning Use BYes s-1 units (BC) WYes s-1 17c BYes s-1 17c WYes s-1 17c BYes s-1 s-1 BYes s-1 s-1 BYes s-1 s-1 | | | | | : | | | OFFICES | | FABRICA | | ថ្មា | Existing Legal Use |
| Image: Solution of Course of | | | DYes D | | | | | | ∏Yes | TION OF METAL | □Yes | | Use |
| Imp Zoning Use Maximum Live 2014 Code Building Cocupancy Dwelling/ Rooming Zoning/ Rooming Zoning Zoning <thzoning< th=""> <thzoning< th=""> Zoning<td></td><td></td><td>0</td><td></td><td>Vo</td><td></td><td>40</td><td></td><td></td><td>TUBING, INTERIOR LOADING</td><td></td><td></td><td></td></thzoning<></thzoning<> | | | 0 | | Vo | | 40 | | | TUBING, INTERIOR LOADING | | | |
| 2014 Code Building Code Occupancy Dwelling/ Rooming Oning Use BYes s-1 Units (BC) Wres s-1 17c Drecess s-1 17c Srecess s-1 17c BYes s-1 s-1 | a fine or impl | | | | | • • | | | | вактн | | ~ | |
| 2014 Code Building Code Occupancy Dwelling/ Rooming Group(s)* Zoning Use BYes s-1 Units (BC) 17C BYes s-1 ITC SFFICES s-1 ITC BYes s-1 ITC SYes s-1 ITC System s-1 | isonment, or both. It i | | | | | | | | 17 | | 17 | Zoning Use Group(s) | |
| 2014 Code Building Code Occupancy Dwelling/ Rooming Oroup(s)* Zoning Use BYes s-1 Units (BC) 17c BYes s-1 17c SFFICES s-1 17c BYes s-1 17c SFFICES s-1 17c SYes s-1 s-1 SYes s-1 s-1 SYes s-1 s-1 | | Description | | Description | | Description | | Description | 4 | Description | 30 | Maxim Numbe Persor | Propo |
| 2014 Code Building Code Occupancy Dwelling/ Rooming Oroup(s)* Zoning Use BYes s-1 Units (BC) 17c RYes s-1 I7c SFFICES S-1 I7c SYes s-1 I7c Systems s-1 I7c Systems <td< td=""><td>dive to a c</td><td></td><td></td><td></td><td></td><td></td><td></td><td>ACCESSOR</td><td>120</td><td>trucking Packaging</td><td>ଠୁନ</td><td>ਰੋੜ</td><td>Proposed Use</td></td<> | dive to a c | | | | | | | ACCESSOR | 120 | trucking Packaging | ଠୁନ | ਰੋੜ | Proposed Use |
| Building Code Occupancy Evelling Zoning Use Group(s)* Units (BC) Units (BC) 17C TRANSFER MEDICAL/ EALARDOUS WASTE (NO PROCESSING OR S-1 17C S-1 17C 17C 17C 17C 17C 17C 17C 17C | | | ⊠Yes | | ⊠Yes | | ⊠Yes | | | TERMINAL FOR | ⊠Yes | | |
| Dwelling/ Zoning Use Rooming Group(s) Units (BC) 17C 17C 17C 17C 17C 17C 17C 17C | Name (please print) | | | | | | | | S-1 | TRANSFER MEDICAL/ HAZAR | S-1 | | * Must u |
| TER 7 WHO PROCESSING ON NO PROCESSING ON | | EN LICE | | | | | | | | ous maste | | Dwelling/ Rooming Units (BC) | ISE 2014 OCC |
| | PE/RA Selleruled | NOP N | ۲. | | | | | | 170 | (NO PROCESSING OR | 170 | _ | * Must use 2014 occupancy classification codes |

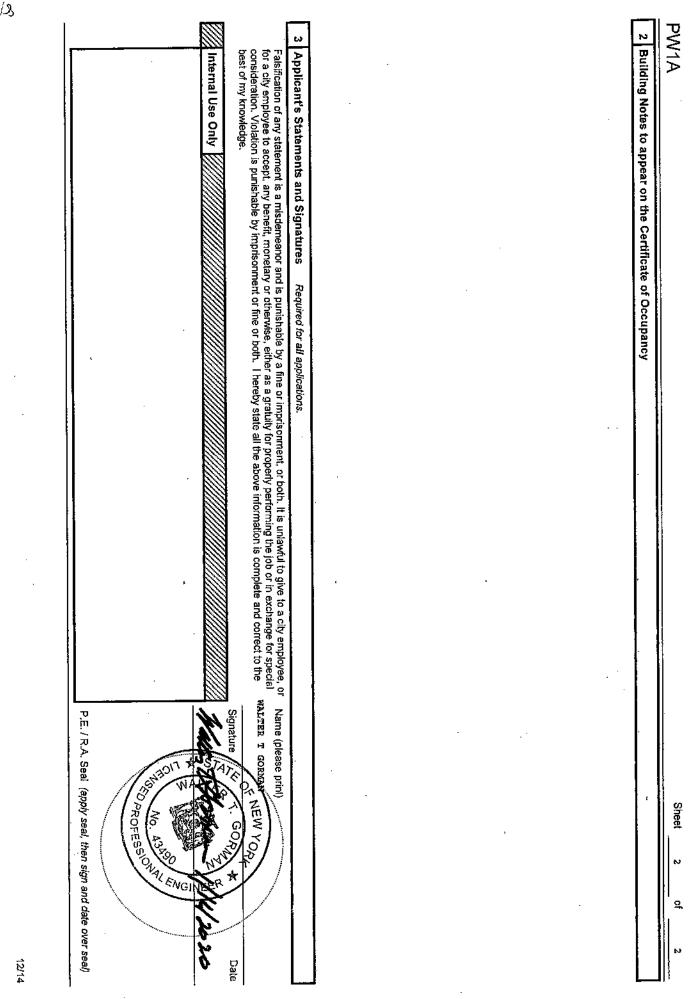


PW1A: Schedule A - Occupancy / Use Must be typewritten. Sheet <u>1</u> of <u>2</u>

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Job Number Scan Code

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DOB Reference Number; T00002244985-000070 User Ref ID; SHEMERD

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ST-1: Street Tree Checklist

Must be typewritten.



| 1 Location Information Requir | ed for all applications. | | | | - |
|-------------------------------|---------------------------------|------------------|-------------|--------------|---|
| House No(s) 893 | Street Name Shephe | erd Ave. | - | BIS Job No. | |
| Borough Brooklyn | Block 5421 | _{Lot} 1 | BIN 3327505 | C.B. No. 305 | |

| Last Name Gorman | Fire | st Name Walter | | Middle Initial T. |
|-------------------------------------|-------------|----------------|-----|-----------------------------------|
| Business Name Walter T. Gorman | , PE., PC. | | | Business Telephone (212) 532-5970 |
| Business Address 420 W 45 Street, 6 | | v.đa | | Business Fax |
| City New York | State NY | Zip 10036 | | Mobile Telephone |
| E-Mail walter.t.gorman@ | wtapepc.com | | · . | License Number 043490 Type P |

3 Certifications Required for all applications. If proposed work is exempt from tree requirements, proceed to section 4

I herby certify this application complies with all street tree requirements specified in the NYC Zoning Resolution, as well as NYC Department of Transportation, NYC Department of Parks and Recreation ("Parks") and all other applicable rules and regulations unless appropriate waivers are obtained. Below is summary information pertaining to these requirements and in addition I have included a complete zoning calculation supporting this summary within the drawing set submitted as part of this application.

Total Required Trees

| Street frontage is > | Lin.ft. |
|---|---------|
| Minus allowable deduction (use group 16B, 16C and 16D only)► | Lin.ft. |
| Total applicable street frontage | Lin.ft. |
| Total above divided by 25 feet = Total Required Trees ► | |
| (Fractions equal to or greater than one-half resulting from this calculation shall be considered to be one tree (ZR § 26-41)) | |
| | |
| otal Proposed Trees | |
| Number of existing trees to be removed (requires Parks Tree Removal permit prior to job approval) | <u></u> |
| Number of existing street trees to be preserved at the location (on-site) | |
| Number of new street trees to be planted at the location (on-site) | |
| Number of new trees to be planted at an alternate location (off-site) | <u></u> |
| Number of proposed trees where payment will be made to Parks for planting > | |
| Number of off-site trees planted and/or trees satisfied with fund payments under previous application(s) | |
| Job # (Parks documentation attached) | |
| Equals total number of proposed trees (must equal Total Required Trees above) | |

| ST-1 | | | | | PAGE 2 |
|----------------------|---|--|---|---|--|
| | | | | | 5.4 |
| 4 Exei | nptions | ······ | | | ¢ |
| l here | by certify this application is exempt from all str | eet tree requirements s | pecified in NYC Zo | ning Resolution bec | ause (choose one): |
| ີ ແກ | e building's proposed dominant use group is 17 derstand that any future changes to the domina eet tree compliance. | 7 or 18 and is exempt fr ant use group of the bui | rom street tree requ Idings must be sub | uirements as per NY mitted to the Depart | C Zoning Resolution. I ment and may require full |
| | is is an Enlargement of a single or two family re t an enlargement of 20% or more pursuant to th | esidence that is not loca he Quality Housing Prog | ated in one of the s gram. | pecial districts speci | ified in ZR § 23-03 and |
| [| oposed work is EXEMPT because (select all th This is <u>not</u> an Enlargement exceeding 20% o | f floor area (ZR §23-03 | | 2 24 05 22 (2) | |
| | ∃This is <u>not</u> a Change of Use to Residential Us ∃This is <u>not</u> a detached garage that is 400 squ | | | 3, 24-09, 33-03) | |
| | | | | | |
| 5 Stat | ements and Signatures: Applicant of R | ecord and Owner F | Required for all app | lications. | |
| fino d | icant of Record and Owner: Falsification of a or imprisonment, or both. It is unlawful to give t gratuity for properly performing the job or in exc | o a city employee, or fo | ar a city employee t | o accept, any benefi | it, monetary or otherwise, either |
| revis | icant of Record: I understand that I must infor ed form reflecting those changes. I understand this application must be consistent with the info | the information provid | ed on the Builders | nformation contained Pavement Plan app | d in this document and submit a lication submitted in conjunction |
| Own preve name | er: I hereby certify I am the owner of the above ent the issuance of permits, sign-offs or Certific ed. | e mentioned premises, ates of Occupancy. I u | l understand that f inderstand this form | n must ne re-tilea ir a | a street tree regulations may new applicant of record is ALE OF WEAL - TER T. CO OT |
| | er Name (please print) c Turkieh | Notarization of Owner's S New York, County of: | Signature State of | <u> </u> | |
| Signa | | Sworn to or affirmed und | | Walter T.Gorna Signature | |
| Date | 1/3/2020 | Notary Signature: | ~ / | Val. 1 Ho | No. 43490 6 Date |
| Nota | ry Seal for Owner's Signature Required | | | P.E. / R.A. of Reco | rd Seal Required |

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WASIM AKRAM BACCHUS Notary Public - State of New York NO. 01BA6389973 Qualified in Queens County . My Commission Expires Apr 8, 2023

8/16



TR8: Technical Report Statement of Responsibility for Energy Code Progress Inspections



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This form must be typewritten

| House No(s) 893 Street Name Shepherd Ave. Work on Floor(s) 1, Moz. 2 Applicant Information Required for all applications. Choose all that apply: Design Applicant 34, 4 Progress Inspections Applicant 38-0, 5-6 Last Name Gorman First Name Walter Middle Initial T. Business Name Walter T. Gorman, PE, PC. Business Telephone (212) 532-5970 Business Address 420 W 45th Street, 6th Floor Business Fax City New York State NY Zip 10036 Mobile Telephone License Number 043490 3 Energy Code Progress Inspection Required for applications where Energy Code Compliance Progress Inspection is marked Yes on TR1 3A – Identification of Requirement Table Patrone in 1870/W Negress Inspection is marked Yes on TR1 3A – Identification of Requirement Table Patrone in 1870/W Negress Inspection is marked Yes on TR1 3A – Identification of Requirement Table Patrone in 1870/W Negress Inspection is marked Yes on TR1 3A – Identification of Requirement Table Patrone in 1870/W Negress Inspection is marked Yes on TR1 3A – Identification of Requirement Table Patrone in 1870/W Negress Inspection is marked Yes on TR1 | | 1 | Location Information Required for all applications. | | | | | |
|---|---|-----|---|-------------------------|----------|---------------------------------------|---------------------------------------|------------------|
| Work on Floor(s) 1, Mez. 2 Applicant Information Required for all applications. Choose all that apply: Design Applicant 34, 4 Progress Inspections Applicant 38-0, 5-6 Last Name Corman Business Name Walter T. Gorman, PE, PC. Business Telephone (212) 532-5970 Business Address 420 W 45th Street, 6th Floor Business Fax City New York State NY Zlp 10036 Mobile Telephone License Type choose one: P.E. R.A. License Number 043490 3 Energy Code Progress Inspection Required for applications where Energy Code Compliance Progress Inspection is marked Yes on TR1 34 Identification of Regularement Y N Progress Inspection Required for applications where Energy Code Compliance Progress Inspection is marked Yes on TR1 BM rotection of exposed function insulation (A), (A) Instit & Date Instit & Date BM rotection of exposed function insulation (A), (A) Instit & Date Instit & Date BM rotection of apposed institution (A), (A) Instit & Date Instit & Date BM rotection of exposed function insulation (A), (A) Instit & Date Instit & Date BM rotection of exposed functinstitution insulation (A), (| | | House No(s) 893 Street Name Shep | herd Ave. | | | | |
| 2 Applicant Information Required for all applications. Choose all that spply: Design Applicant 3A, 4 | | • | | | _ | | | |
| Choose all that apply: Design Applicant 34, 4 Progress Inspections Applicant 39-D, 5-6 Last Name Gorman First Name Walter Middle Initial T. Business Name Walter T. Gorman, PE, PC. Business Telephone (212) 532-5970 Business Address 420 W 45th Street, 6th Floor Business Telephone (212) 532-5970 Business Address 420 W 45th Street, 6th Floor Business Telephone (212) 532-5970 License Type choose one: [X] P.E. [] R.A. License Number 043490 3 Energy Code Progress Inspection Required for epplications where Energy Code Compliance Progress Inspection is marked Yes on TR1 3A Identification of Requirement Table Reference in 1RCW Responsibilities Y N Progress Inspection Required for epplications where Energy Code Compliance Progress Inspection is marked Yes on TR1 Bit dentification of Requirement Table Reference in 1RCW Responsibilities Y N Progress Inspection and reductor traing (A43, (A44) Bit dentification of exposed four-duire in marked Yes on TR1 Bit dentification of exposed four-duire in marked Yes on TR1 Bit dentification of exposed four-dui | | - | | - ·· ·· ·· ·· ·· | | | | |
| Last Name Gorman First Name Walter Middle Initial T. Business Name Walter T. Gorman, PE, PC. Business Telephone (212) 532-5970 Business Address 420 W 45th Street, 6th Floor Business Telephone (212) 532-5970 City New York State NY Zip 10036 Mobile Telephone License Type choose one: P.E. R.A. License Number 043490 State NY Zip 10036 Mobile Telephone License Type choose one: P.E. R.A. State NY Zip 0036 Mobile Telephone A - Identification of Requirement Y N Progress Inspection Required for epplications where Energy Code Compliance Progress Inspection is marked Yes on TR1 State Responsibilities Cartification of Requirement Table Reference in 1RCNY Y N Progress Inspection (MA), (MA) Initial & Date Initial & Date BX Protection of respect foundation Insulation (MA), (MA) Initial & Date Initial & Date BX Instantion static Adage (MA), (MA) Initial & Date Initial & Date BX Instantion understand Insulation (MA), (MA) Initial & Date BX Instantion | | 2 | Applicant Information Required for all applications | | | | | |
| Last Name Gorman First Name Walter Middle Initial T. Business Name Walter T. Gorman, PE, PC. Business Telephone (212) 532-5970 Business Address 420 W 45th Street, 6th Floor Business Telephone (212) 532-5970 City New York State NY Zip 10036 Mobile Telephone License Type choose one: Xip 10036 Mobile Telephone License Type choose one: Xip 1 R.A. License Number 043490 State NY Zip 10036 Mobile Telephone A - Identification of Requirement Y N Progress Inspection Required for epplications where Energy Code Compliance Progress Inspection is marked Ves on TR1 BM Prodection of Requirement Table Reference in IRCNY Soludo(1)(1)(1)(1)(1)(1)(1)(1)(1)(1)(1)(1)(1)(| | | Choose all that apply: IXI Design Applicant 3A, 4 | Progress Inspection | is Ap | plicant 3B-D, 5-6 | | |
| Business Name Walter T. Gorman, PE, PC. Business Telephone (212) 532-5970 Business Address 420 W 45th Street, 6th Floor Business Fax City New York Stale NY Zip 10036 Mobile Telephone License Type choose one: X P.E. R.A. License Number 043490 3 Energy Code Progress Inspection Required for applications where Energy Code Compliance Progress Inspection is marked Yes on TR1 38 Energy Code Progress Inspection Required for applications where Energy Code Compliance Progress Inspection is marked Yes on TR1 38 Energy Code Progress Inspection Required for applications where Energy Code Compliance Progress Inspection is marked Yes on TR1 38 Genetitication of Requirement 38 Identification of Requirement Responsibilities 1000000000000000000000000000000000000 | | | | _ | | | Middle Initial T. | |
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| City New York State NY Zip 10036 Mobile Telephone License Type choose one: N P.E. R.A. License Number 043490 3 Energy Code Progress Inspection Required for explications where Energy Code Compliance Progress Inspection is marked Yes on TR1 3A - Identification of Requirement 3B Identification of Cartificate of Complete Sinspection is marked Yes on TR1 Y N Progress Inspection Table Reference in IRCWY S000-0f(1) (1) and (2) Initial & Date | | - | | | | | Business Fax | |
| License Type choose one: N P.E. R.A. License Number 043490 3 Energy Code Progress Inspection Required for epplications where Energy Code Compliance Progress Inspection is marked Yes on 7R1 3A Identification of Requirement 3B identification of Requirement [http://www.compliance Progress Inspection / Ecsis [http://www.compliance Progress Inspection of Tests [http://www.compliance Progress Inspection / Tests [http://www.compliance Progress Inspection of Tests [http://www.compliance Progress Inspection Installation [http://www.compliance Progress Inspection Installation Installation [http://www.compliance Progress Inspection Installation Installatinspection Installatinspection Installation [httttp://wwww.complia | | | | | 36 | | Mobile Telephone | |
| 3 Energy Code Progress Inspection Required for applications where Energy Code Compliance Progress Inspection is marked Yes on TR1 3A Identification of Requirement 3B Identification of Requirement 3B Identification of Requirement 3 Table Reforence in 1RCNY \$5000-01(b) (1) and (2) South for applications where Energy Code Compliance Progress Inspection is marked Yes on TR1 3B Identification of Requirement 3B Identification of Complete Responsibilities Inspection of Requirement 3D Withdraw Responsibilities IM Progress Inspection frequences (IA2) Initial & Date | | , | | | | | License Number 04 | 3490 |
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| JA Identification of Requirement JB Identification of Requirement SC Centificate of Comptete JS Y N Progress Inspections Table Reference in 1RCNY §5000-01(b) (1) end (2) Initial & Date < | | 7 | Energy Code Progress Inspection Required for | r applications where El | iergi | Code Compliance | Progress Inspection is m | arked Yes on TR1 |
| Y N Progress Inspections Table Reference in HRCMY §5000-01(h) (1) and (2) [Mitial & Date Initial & Date Initial & Date Image: State of the second of exposed foundation insulation (A1), (IA4) Image: State of the second of the sec | Ļ | - 1 | | | | 3B Identification of | 3C Certificate of Complete | 3D Withdraw |
| Y N Progress inspections §5000-01(b) (1) ent/(2) Initial & Date I | 3 | 3A | Identification of Requirement | Table Reference in 1RC | NY | Responsibilities | | |
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| Image: Constraint of the stage (IA4), (IBA4) | | | | | | | · · · · · · · · · · · · · · · · · · · | |
| L L Defension areas (IA5), (IIA5) L Mar sealing and insulation — visual (IA6), (IA6) (IA6) L Mar sealing and insulation — visual (IA7), (IIA7) (IA8) L L Loading deck weather seals (IA8) (IA8) L Vestibules (IIA8) (IIA8) L Vestibules (IB1), (IIB1) (IIA8) L Markets (IB2), (IB2) (IIA8) Markets (IB3), (IIB3) (IIA8) (IIA8) Markets (IB3), (IIB3) (IIA8) (IIA8) Markets (IB3), (IIB3) (IIA8) (IIA8) Markets (IB2), (IIB2) (IIA8) (IIA8) Markets (IB4), (IIB4) (IIA8) (IIA8) Markets (IIB4), (IIB4) (IIA8) (IIA8) (IIA8) Markets (IIB5), (IIB5) (IIA8) | | _ | | | | · · · · · · · · · · · · · · · · · · · | | · |
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| Image: Second | 밀 | | | | _ | · · · · · · · · · · · · · · · · · · · | | |
| I X Vestifyles (IB1), (IB1) I X Fireplaces (IB1), (IB1) I X Shutoff dampers (IB2), (IB2) I X HVAC and service water heating equipment (IB3), (IB3) I X HVAC and service water heating system controls (IB4), (IB4) I X HVAC insulation and sealing (IB5), (IB5) I X Duct leakage testing (IB6), (IB6) I X Electrical energy consumption (IC1), (IC1) I X Lighting in dwelling units (IC2) I X Interior lighting power (IC4) I X Exterior lighting power (IIC4) I X Lighting controls (IIC5) I X Lighting controls (IIC6) I X Exterior lighting power (IIC6) I X Exterior lighting controls (IIC6) | 片 | | | | | · · · · · · · · · · · · · · · · · · · | | |
| Image: Shutoff dampers (IB2), (IIB2) Image: Shutoff dampers Image: Shu | 片 | | | | | | | |
| Image: Sign HVAC and service water heating equipment (IB3), (IIB3) | 台 | | | (iB2), (| IB2) | | | ········ |
| Image: Section 2 in Secting 2 in Secting 2 in Section 2 in Section 2 in Section 2 in Sectin | Ē | | | (IB3), (| IB3) | | | |
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| Image: Starting registry (IC1), (IIC1) Image: Starting registry Image: Starting registry (IC2), (IIC3) Image: Starting registry Image: Starting registry (IC2), (IIC3) Image: Starting registry Image: Starting registry (IC2), (IIC3) Image: Starting registry Image: Starting registry (IIC4) Image: Starting registry Image: Starting registry (IIC4) Image: Starting registry Image: Starting registry (IIC4) Image: Starting registry Image: Starting registry (IIC5) Image: Starting registry Image: Starting registry (IIC6) Image: Starting registry Image: Starting registry (IIC5) Image: Starting registry Image: Starting registry (IIC5) Image: Starting registry Image: Starting registry (IIC5) Image: Starting registry Image: Starting registry (IIC6) Image: Starting registry Image: Starting registry (IIC1), (IID1) Image: Starting registry Image: Starting registry (ID2) Image: Starting registry | | Ī | HVAC insulation and sealing | | | | | |
| Image: Section analogy containing on the section of the section o | | | X Duct leakage testing | | | | <u> </u> | · |
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| Image: Interfor lighting power (IIC4) Image: Ima | | | | | <u> </u> | <u></u> | | · · · · · · · · |
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| Image: A maintenance information (ID2) Image: A maintenance information (ID2) | 님 | | | | | | | |
| | 늼 | | | | | | | |
| | 늼 | | X Solar Ready Requirements | (ID3) | | | | |

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| TR | 8 | PAGE 2 |
|----|---|--|
| 4 | Design Applicant's Statements and Signatures P.E./R.A. responsible for | plans must sign and seal. |
| | I have identified herein all of the progress inspections, and commissioning required for compliance and determined whether commissioning is required. | Name (please print) SATE OF NEW Walter T. Gorman RER T. C. L |
| | Commissioning is required for applications where C408 or ASHRAE 90.1 Section 6.7.2.4 requires commissioning. Check one: | Signature |
| | This project requires commissioning and a preliminary commissioning report certification will be provide prior to sign-off. | P.E. / R.A. Seal (apply seal then sign and date over seal) |
| | This project does not require commissioning. | P.E. / R.A. Seal (apply seal then sign and date over seal) |
| 5 | Inspection Applicant's Identification of Responsibilities | |
| | Check all that apply below: | |
| X | For the progress inspections indicated above in section 3 and identified by me for progress inspection agency accepting responsibility for conducting the inspections applicable sections of the New York City Construction Codes and 1 RCNY 5000-01 101-07, which specifies the qualifications required for each progress inspector, and every progress inspection for which I/we take responsibility. I agree that both I and City Construction Codes and the Rules. I am aware of the additional sanctions imprecise. | as identified in section 3B. Turner certify that Thave read the in connection with progress inspections as well as 1 RCNY that this agency meets those qualifications for each and the agency will comply with all provisions of the New York osed on false filings by §28-211.1.2 of the Administrative |
| | Change of Applicant: I am a newly designated individual responsible for the item | s specified herein and I hereby state that: |
| | □ None of the inspections/tests indicated herein have been performed to date by | |
| | Some of the inspections/tests indicated herein have been performed by the pr designated individual, as indicated in the attached report. | reviously |
| | I am aware of the additional sanctions imposed on false filings by §28-211.1.2 of the | e Administrative Code. |
| | Name (please print) Walter T. Gorman, PE | |
| | Signature Date | |
| | P.E. / R.A. Seal (apply seal, then sign and date over seal) | - |
| 10 | | |
| 6 | Inspection Applicant's Certification of Completion | |
| E | I have completed the items specified herein and certify the following (check one or | |
| | All work performed substantially conforms to approved construction docume provisions of the New York City Energy Conservation Code and other design | nated rules and regulations. |
| | All work performed substantially conforms to approved construction docume provisions of the New York City Energy Conservation Code and other design report. | ents and has been performed in accordance with applicable nated rules and regulations, except as indicated in the attached |
| | I am aware of the additional sanctions imposed on false filings by §28-211.1.2 of the | |
| E | Withdrawal of Applicant: I am withdrawing responsibility for the items of progress the results or status of the work performed to date. Name (please print) | inspections and/or tests indicated herein and herewith submit |
| | | - |
| | Signature Date | |
| | P.E. / R.A. Seal (apply seal, then sight and date over seal) | |
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TR1: Technical Report Statement of Responsibility

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| 1 | Location Information Required for all applications. | | • | · | · • • |
|-------------|---|--|--|---|---------------------------------|
| | House No(s) 893 Street Name Sheph | erd Ave. | | | |
| | | | | | |
| | Work on Floor(s) 001, Mez | · ···· | | ····· | |
| 2 | Applicant Information Required for all applications. | | | | |
| | Choose all that apply: 🔀 Design Applicant 3A, 4A, 5 🔲 | Special Inspections Ap | plicant 3B-D, 6-9 | Progress Inspections Ap | plicant 4B-D, 6-9 |
| | | | | Middle Initial | |
| | Last Name Gorman | First Name Walter | | <u></u> . | |
| | Business Name Walter T. Gorman, PE., PC. | | | Business Telephone (212 |) 532-5970 |
| | Business Address 420 W 45th Street, 6th Floor | | | Business Fax | |
| | City New York State NY | Zip 10036 | | Mobile Telephone | |
| | License Type choose one: X P.E. R.A | | | License Number ()434 | 90 |
| | | | | Special Inspection 0002 Agency Number | 68 |
| | | | | | |
| 3 | Special Inspection Categories Required for all appli | cations, continued on p | | | |
| 3A | u ← Identification of Requirement | | 3B Identification of Responsibilities | 3C Certificate of Complete Inspections / Tests | 3D Withdraw Responsibilities |
| Y I | N Special Inspections | Code/Section | Initial & Date | Initial & Date | Initial & Date |
| | X Structural Steel - Welding | BC 1704.3.1 | | | |
| | X Structural Steel – Details | BC 1704.3.2 | | | |
| | X Structural Steel High Strength Bolting | BC 1704.3.3 | | | |
| ΞĪ | X Structural Cold-Formed Steel | BC 1704.3.4 | | | |
| 1 0 | X Concrete Cast-In-Place | BC 1704.4 | | | |
| | X Concrete Precast | BC 1704.4 | | | |
| 310 | X Concrete - Prestressed | BC 1704.4 | | | <u> </u> |
| | X Masonry | BC 1704.5 | | | |
| | X Wood - Installation of High-Load Diaphragms | BC 1704.6.1 | | | |
| | X Wood - Installation of Metal-Plate-Connected Trusses | BC 1704.6.2 | | | |
| | Wood - Installation of Prefabricated 1-Joists | BC 1704.6.3 | | n | |
| | X Subgrade Inspection | BC 1704.7.1 BC 1704.7.2 | · · · · · · · · · · · · · · · · · · · | · | |
| 0 I | Subsurface Conditions Fill Placement & In-Place Density | BC 1704.7.3 | | | |
| | X Subsurface Investigations (Borings/Test Pils) TR4 | BC 1704.7.4 | | | |
| | TR5 | BC 1704.8 | | | |
| 긝 | X Helical Piles (88 # 2014-020) TR5H X Vertical Masonry Foundation Elements | BC 1704.8.5 BC 1704.9 | · · | ·· ·· ·· · | |
| | X Wall Panels, Curtain Walls, and Veneers | BC 1704.10 | | · · · · · | |
| | Sprayed fire-resistant materials | BC 1704.11 | | | |
| | X Mastic and Intumescent Fire-resistant Coatings | BC 1704.12 | | | |
| | X Exterior Insulation and Finish Systems (EIFS) | BC 1704.13 | | <u> </u> | |
| | X Alternative Materials - OTCR Buildings Bulletin # | BC 1704.14 | · | | |
| - 17 | X Smoke Control Systems | BC 1704.15 | | ····· | |
| | | BC 1704.16 | | | <u> </u> |
| וכ | X Mechanical Systems | BC 1704 17 | | 1 | |
| | X Fuel-Oil Storage and Fuel-Oil Piping Systems | BC 1704.17 BC 1704.18 | | | |
| | X Fuel-Oll Storage and Fuel-Oll Piping Systems High-Pressure Steam Piping (Welding) | | | | <u></u> |
| | X Fuel-Oil Storage and Fuel-Oil Piping Systems | BC 1704.18 | | | |
| | X Fuel-Oil Storage and Fuel-Oil Piping Systems X High-Pressure Steam Piping (Walding) X High Temperature Hol Water Piping (Welding) | BC 1704.18 BC 1704.18 | | | |
| | X Fuel-Oil Storage and Fuel-Oil Piping Systems X High-Pressure Steam Piping (Welding) X High Temperature Hot Water Piping (Welding) X High-Pressure Fuel-Gas Piping (Welding) | BC 1704.18 BC 1704.18 BC 1704.19 | | | |
| | X Fuel-Oil Storage and Fuel-Oil Piping Systems X High-Pressure Steam Piping (Welding) X High Temperature Hot Water Piping (Welding) X High-Pressure Fuel-Gas Piping (Welding) X High-Pressure Fuel-Gas Piping (Welding) X Structural Stability – Existing Buildings | BC 1704.18 BC 1704.18 BC 1704.19 BC 1704.20.1 | | | |



TR1: Technical Report Statement of Responsibility

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| 34 | Special Inspection Categories (contin | | | 3B Identification of Responsibilities | 3C Certificate of Complete | 3D Withdraw Responsibilities |
|--------------|---|-----------------|-------------------------|--|---|---------------------------------|
| γÌ | N Special Inspections | | Code/Section | Initial & Date | Initial & Date | Initial & Date |
| | X Raising and Moving of a Building | | BC 1704.20,5 | | | |
| | Soil Percolation Test - Private On-Sile Storm Water Drainage Disposal Systems, and Detention Facilitie | | BC 1704,21.1.2 | | | |
| | Private On-Site Storm Water Drainage Disposal Systems, and Detention Facilities Installation | | BC 1704.21.2 | | | |
| | Individual On-Sile Private Sewage Disposal System | 18 | BC 1704.22 | | | |
| | Soil Percolation Test - Individual On-Site Private Sewage Disposal Systems | | BC 1704.22 | | | |
| | X Sprinkler Systems | | BC 1704.23 | | | <u> </u> |
| =† | X Standpipe Systems | | BC 1704.24 | | | |
| ٦t | X Heating Systems | | BC 1704.25 | | | |
| Ē1 | X Chimneys | | BC 1704.26 | | | · |
| \mathbf{X} | Fire-resistant Penetrations and Joints | | BC 1704.27 | | | |
| | X Aluminum Welding | | BC 1704.28 | | | |
| | Flood Zone Compliance (attach FEMA elevation/dr floodproofing certificate where applicable) | У | BC 1704.29 BC G105 | | | |
| | X Luminous Egress Path Markings | TR7 | BC 1704.30 BC 1024.8 | | | |
| ٦ĺ | Emergency and Standby Power Systems (Generate | ors) | BC 1704.31 | | | |
| | Post-installed Anchors (BB# 2014-018, 2014-019) | | 8C 1704.32 | | , | |
| | X Seismic Isolation Systems | | BC 1707.8 | | | |
| | X Concrete Design Mix | TR3 | BC 1905,3 BC 1913.5 | Subit | it TR3 to complete this it | <u>911</u> |
| | Concrete Sampling and Testing | TR2 | BC 1905.6 BC 1913.10 | Sular | it TR2 to complete this it | 9171. <u></u> |
| 4 | Progress Inspection Categories Requ | ired for all ap | plications. 📕 indicates | report required. | | |
| 4/ | ← 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 | Initia) & Date |
| | X Preliminary | | 28-116.2.1, BC 110.2 | | | |
| Õ | X Footing and Foundation | | BC 110.3.1 | | | |
| | Lowest Floor Elevation | | BC 110.3.2 | | | |
| | X Structural Wood Frame | | BC 110.3.3 | | | |
| | Energy Code Compliance Inspections | TR8 | BC 110.3.5 | Subm | is TRS to complete this if | <u>8110</u> |
| | Fire-Resistance Rated Construction | | BC 110.3.4 | | <u> </u> | |
| 11 | | | 28-116.2.2 | 1 | Į I | |
| | Public Assembly Emergency Lighting | | 28-116.2.4.2, BC 110.5, | | | |

5 Design Applicant's Statements and Signatures P.E./R.A. responsible for plans, choose both below and sign/seal.

I have identified all of the special inspections, progress inspections and tests required for compliance.

OF NEW YORY Name (please print) ć Walter T. Goman Date Signature œ IJ TO PROFESSIONAL Ō

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

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

| TR1 | PAGE 3 |
|---|---|
| 6 Owner's Statement and Signature for Progress/Special | Inspector Required when inspection applicant identifies responsibilities. |
| the responsible inspector. Falsification of any statement is a misde give to a city employee, or for a city employee to accept, any bene or in exchange for special consideration. Violation is punishable by to have knowingly or peoligently made a false statement or to have | my knowledge and belief, attest to its accuracy. I approve the identification of meanor and is punishable by a fine or imprisonment, or both. It is unlawful to fit, monetary or otherwise, either as a gratuity for properly performing the job a fine or imprisonment, or both. I understand that if I am found after hearing knowingly or negligently falsified or allowed to be falsified any certificate, rection of a violation required under the provisions of this code or of a rule of imments with the Department. |
| Name (print) T | tle |
| Signature D | ate |
| 7 Inspection Applicant's Identification of Responsibilities | |
| Check all that apply below: | |
| responsibility for conducting the inspections. I further certify that I the connection with special inspections as well as 1 RCNY 101-06 Rule anency meets those gualifications for each and every special inspections. | hat I am the principal/director of the special inspection agency accepting have read the applicable sections of the New York City Construction Codes in a which specifies the qualifications required for each inspection and that this ction for which I/we take responsibility. I agree that both I and the agency will and the Rule. I am aware of the additional sanctions imposed on false filings |
| indicated in section 3. Lassume the responsibility and Loersonally. | energy code inspections on the TR8 form, and/or concrete test items or where permitted by the New York City Construction Codes, qualified pections and tests on such forms and in such matter as the Department d on false filings by §28-211.1.2 of the Administrative Code. |
| inspection that all work substantially conforms to approved constru- performance of progress inspections and other inspections has bee 101-10, I will perform the final inspection within 1 year from the exp | n documented before I report the work complete. As prescribed by 1 RCNY ration of the last valid permit of the work. |
| Upon completion of the work and within 30 days of my final inspect completed in accordance with the approved construction document | on, I will file a certification attesting to the fact that all work was performed and a laws and rules, except as reported otherwise. |
| I understand that my failure to file a certification of completion one year from expiration of the last valid permitmay result in t | or to notify the Department of my withdrawal of responsibilities within he loss of my privileges to file under Directives 2 and 14 of 1975 or Inctions imposed on false filings by §28-211.1.2 of the Administrative |
| Change of Applicant: I am a newly designated individual response | |
| None of the inspections/tests indicated herein have been performed | prmed to date by the previously designated individual. |
| Some of the inspections/tests indicated herein have been peridesignated individual, as indicated in the attached report. | ormed by the previously |
| I am aware of the additional sanctions imposed on false filings by § Name (please print) | 28-211.1.2 of the Administrative Code. |
| Signature | ite |
| P.E. / R.A. Seal (apply seal, then sign and date over seal) | |
| 8 Inspection Applicant's Certification of Partial Completion | 9 Inspection Applicant's Certification of Full Completion |
| I have completed the items specified herein and certify that all work performed substantially conforms to approved construction documents and has been performed in accordance with applica ble provisions of the New York City Construction Codes and other designated rules and regulations, except as indicated in t attached report. Withdrawal of Applicant: I am withdrawing responsibility for the items of special/progress inspections and/or tests indicated here in and herewith submit the results or status of the work perform to date. I am aware of the additional sanctions imposed on false filings by §: 211.1.2 of the Administrative Code. | applicable provisions of the New York City Construction Codes and other designated fules and regulations. I am aware of the additional sanctions imposed on false fillings by §28-211.1.2 of the Administrative Code. Name (please print) ed Signature |
| | ate |
| P.E. / R.A. Seal (apply seal, then sign and date over seal) | — |

August 2016

TR1



PW3: Cost Affidavit

Must be typewritten.



| Reason for filing cost Initial Filing 2-7 Prior to Approval Action Post Approval Amendr To obtain Sign-off 2-3, | ns 1A, 2-7 nent (PAA) 1A, 2-7 ; 5, 7 | Estimated co Estimated co Estimated co Actual constr | ation provided n est of construction est of construction est of construction ruction cost of cor | 1 1 1 | - | 1A Indicate ex affected by | _ | ent number |
|---|---|--|--|----------------------------------|-----------------------------------|--|---|-------------------------------------|
| 2 Location Informati | • | | | | | | | |
| House No(s) 89 | | Name Shephe | erd Ave, | | | | | |
| Borough Bro | | Block 4521 | Lot 1 | BIN 332 | 7505 | C.B. No | <u>. 305</u> | |
| 3 Cost Details Requi | red for all application | ns. | | | | | | |
| and labor; work shall inclu ances. Indirect costs, inclu reflected in the unit costs e can show detailed estimat "No" <u>must</u> be specified f Categories of Work (i Yes No | iding but not limited to g shown. If in the opinion es to meet the approva for each "Category of | general conditions, in of the Department, I) of the Department Work" listed below | nsurance, and an all the valuation is und t. The Initial, amend 7. | lowance for pr lerestimated c | offit and overh n the applicat | ead shall be adde lon, the permit sh valuation shall b | ed to direct work all be denied, u | costs and shall nless the applic |
| Boiler (BL) | (FB) (FS) ion (FP) | | r (SP) G) | | | Structural V | notilion usal Demolition Vork novation | |
| Plumbing (PL) | • | 🔲 Marqı | voleoson Plan (OT/ uee (OT/MAR) xibe) | /FPP) | | Exterior Re | | , |
| Category of Work* | Description of W | Marqu Desc | uee (OT/MAR) xibe) | | Area/Units | Unit Cost (\$) | Total Cost (\$) | Work Categor Total Cost |
| Plumbing (PL) | Description of W Install exit and | Marqi (Desc fork d emergency | uee (OT/MAR) xibe) | | 3 | Unit Cost (\$) 1000 | Total Cost (\$) 3000 | Categor |
| Category of Work* | Description of W Install exit and Replace exit of | fork demergency l loors | ighting | | 3 2 | Unit Cost (\$) 1000 1500 | Total Cost (\$) 3000 3000 | Categor |
| Category of Work* | Description of W Install exit and | fork demergency l loors | ighting | | 3 | Unit Cost (\$) 1000 | Total Cost (\$) 3000 | Categor |
| Category of Work* | Description of W Install exit and Replace exit of | fork demergency l loors | ighting | | 3 2 | Unit Cost (\$) 1000 1500 | Total Cost (\$) 3000 3000 | Categor Total Cost |
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| Category of Work* | Description of W Install exit and Replace exit of | fork demergency l loors | ighting | | 3 2 | Unit Cost (\$) 1000 1500 | Total Cost (\$) 3000 3000 | Categor Total Cost |
| Category of Work* | Description of W Install exit and Replace exit of | fork demergency l loors | ighting | | 3 2 | Unit Cost (\$) 1000 1500 | Total Cost (\$) 3000 3000 | Categor Total Cost |

*List ALL Categories of Work specified "Yes" above. Use more than one line for Categories of Work that involve multiple unit costs, See PW3 Form Instructions for a sample of completed Section 3 Cost Details.

PW₃ PAGE 2 **Design Applicant Information** Last Name Gorman First NameWalter Middle Initial T Business Name Walter T. Gorman, PE., PC. Business Phone 212-532-5970 **Business Fax** Business Address 420 W 45th Street, 6th Floor Mobile Phone **CityNew York** StateNY Zip 10036 E-Mailwalter.t.gorman@wtgpepc License Number 043490 Choose One: XP.E. R.A. Sign Hanger Other (specify) 5 **Owner/Lease Holder Information** Last Name Knisley First Name Curtis Middle Initial Business Name Sharps Compliance, INC Business Phone 713-660-3544 **Business Fax** Business Address 9220 Kirby Dr., Suite 500 Mobile Phone **City Houston** State TX Zip 77054 E-Mail cknisley@sharpsinc.com 6 **Design Applicant's Statements and Signatures** I hereby state the information on this form is correct and complete to the best of my knowledge. I understand falsification of any statement is emissible nt is semisdemeaning and punishable by a fine, imprison-view eiti@ras a fractury of property performing the job or ring to have knowingly or begugenty made a false state-castilication of the @rection of a violation required under I hereby state the information on this form is correct and complete to the best of my knowledge. I understand faisification of any statement, ment, or both. I also understand it is unlawful to give to a city employee, or for a city employee to accept, any benefit, monetary or otherwise in exchange for special consideration. Violation is punishable by imprisonment or fine or both. I understand that if I am found after hearing ment or to have knowingly or negligently falsified or allowed to be falsified any certificate, form, signed statement, application, report of or 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 cert 5 * VGINEER 官 LICENST Name (print) PROFESSION PAR Signature Walter T. Gorman, PE P.E. / R.A. Seal (apply seal, then sign and date over seal) Owner's/Lease Holder's Statements and Signatures Notary only required when submitting to obtain sign-off. 7 I hereby state the information on this form is correct and complete to the best of my knowledge. I understand falsification of any statement is a misdemeanor and is punishable by a fine or I hereby state the information on this form is correct and complete to the best of my knowledge. I understand taisincation or any statement is a misdemeanor and is punishable by a little or imprisonment, or both. I also understand 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 this if a m 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) Notarization Notary Seal State of New York, County of: **Curtis Knisley** Signature Sworn to or affirmed under penalty of perjury day of 20 Date Notary Public Signature 2020

| Internal Use Only | | | |
|--------------------------|--------------------------------------|---------------------------------------|----------|
| Work Area | PW3 Cost Details Validation | Comments (May include cost guidance.) | Initials |
| Plan Examination: | Accept Original Revised Cost Needed | | |
| C of O: | Accept Original Revised Cost Needed | | |
| Plan Examination/C of O: | Accept Revised Submission (Resolved) | | |

12/14

17/m

NEW YORK CITY BOARD OF STANDARDS AND APPEALS

REGULAR MEETING

TUESDAY MORNING, SEPTEMBER 10, 2019

10:00 A.M.

| APPEALS – DECISIONS | | |
|----------------------------|------------|---|
| | | Cozen O'Connor |
| <mark>5.</mark> | 2019-45-A | 10002 Farragut Road, Brooklyn |
| | | Appeal of the DOB interpretation (dated 1/31/2019) that motor freight |
| | | station for regulated medical waste use at the premises constitutes a UG 18 use |
| | | pursuant to ZR § 42-15 and seeks the Board's confirmation that such use |
| | | constitutes a UG 16 use pursuant to ZR § 32-25. |
| | | Community Board #18BK |
| | | Project Manager: Gjela Prenga (212) 386-0067 |
| | 10:02 A.M. | Status: Granted – 9/10/19 |

| | | PPEALS – CONTINUED HEARINGS |
|--|------------|--|
| | | NYC Department of Buildings |
| 6. | 2017-310-A | 10002 Farragut Road, Brooklyn |
| | | Pursuant to § 645 of the New York City Charter, the Department of Buildings |
| | | (the Department") respectfully submits to the Board of Standards and Appeals |
| | | (the "Board") this statement in support of its application to modify certificate |
| | | of occupancy 321114450F dated September 1, 2015. |
| | | Community Board #18BK |
| Project Manager: Gjela Prenga (212) 386-0067 | | Project Manager: Gjela Prenga (212) 386-0067 |
| | 10:05 A.M. | Status: Adjourned, Continued Hearing – 12/10/19 |
| | | City Club of New York |
| 7. | 2019-89-A | 36 West 66th Street aka 50 West 66th Street, Manhattan |
| 1. | | Appeal of a New York City Department of Buildings challenging the validity |
| | | of a building permit dated April 11, 2019. C4-7, R8 Special Lincoln Square |
| | | District. |
| | | Community Board #7M |
| | | Project Manager: Toni Matias (212) 386-0084 |
| | 10:08 A.M. | Status: Closed, Decision – 9/17/19 |
| | | Landmark West |
| 8. | 2019-94-A | 36 West 66th Street aka 50 West 66th Street, Manhattan |
| 0. | | Appeal of a New York City Department of Buildings challenging the validity |
| | | of a building permit dated April 11, 2019. C4-7 and R8 Special Lincoln |
| | | Square District. |
| | | Community Board #7M |
| | | Project Manager: Toni Matias (212) 386-0084 |
| | 10:08 A.M. | Status: Closed, Decision – 9/17/19 |

This information is provided in draft form and is a public service courtesy only. Although the BSA endeavors to ensure that the information is as current and accurate as possible, errors do occasionally occur, and the schedule may change due to withdrawals and adjournments. Therefore, the BSA cannot guarantee the accuracy of the information. Readers should, where possible, verify the information before acting on it.

LAWRENCE R. SCHILLINGER

ATTORNEY AND COUNSELOR AT LAW

PO BOX 11182 ALBANY NY 12211

TEL: 518 459-0600 FAX: 518 677-1053 lschillinger@msn.com

April 2, 2020

Denise Grattan Environmental Analyst NYS DEC Region 2 47-40 21st Street Long Island City NY 11101

Re: Sharps Compliance, Inc. Application ID: 2-6105-00889/00001

Dear Ms. Grattan,

I write in response to the Notice of Incomplete Application (NOIA) dated February 26, 2020 as it pertains to a pending application filed by Sharps Compliance, Inc. for a permit to operate a solid waste management facility authorizing short-term storage and truck-to-truck transfer of regulated medical waste.

Specifically, I address the first numbered paragraph of the NOIA which asks for an "explanation" re: Applicant's conduct of 10-day hazardous waste storage/transfer operations pursuant to the existing Certificate of Occupancy and the status of an FDNY permit.

With regard to the existing Certificate of Occupancy, please note that the facility site is zoned M-1 and is assigned Use Group 17. Pursuant to the NYC Zoning Resolution operation of a Truck Terminal within Use Group 17 is "As-of-Right.". The NYC Board of Standard and Appeals recently opined that a comparable facility is tantamount to a truck terminal, rather than a Solid Waste Transfer Station the operation of which would require a Use Group 18 designation.

At the request of Sharps Compliance the New York City Fire Department (FDNY) inspected the facility in late 2019, at which time it was determined that a permit from the FDNY for the storage of certain flammable materials is required.

Denise Grattan April 2, 2020 Page 2

Sharps thereafter promptly retained the services of a qualified firm to assist in the preparation of the requisite FDNY permit application. It was determined that certain physical improvements would be needed to meet FDNY standards for permit issuance, as follows:

- 1. Install NYC approved type emergency lighting and exit signs
- 2. Install New fire rated door to street sides (Stanley Ave.).
- 3. Install new stair door and repair the stair wall enclosure.
- 4. Repair any holes or openings within stair enclosure.
- 5. Cover all exposed steel columns to with concrete.
- 6. Remove and "fire stop" all penetrations to the adjacent.
- 7. Change of swing of existing door to stair from 1st floor to direction of exit.
- 8. Replace door to have a UL Label for 1 ½ hr. rated door.
- 9. Add lighting and enclosure walls to utility room.
- 10. Remove outside rolling gate on exit door

An application for a building alterations permit ("Alt-1") was filed with the NYC Department of Buildings on or about January 9, 2020 for approval to make the above-itemized building improvements and concurrently to amend the Certificate of Occupancy so as to more specifically reference the use of the premises as a facility for the truck-to-truck transfer and short-term storage of regulated medical waste and hazardous waste.

The Department of Building issued the requested "Alt-1" building permit on or about February 26, 2020. Sharps is seeking bids from qualified contractor(s) to perform the itemized facility improvements, *supra*.

Please advise should the Department require further response or documentation.

Very truly yours,

Lawrence R. Schillinger

Enc.

cc. Curtis Knisley, Sharps Compliance Hong Sima, PhD, P.E.



EF1: eFiling Job Application Cover Sheet Generated by the eFiling application.



You are almost done!

All documents generated by this eFiling must be signed and sealed appropriately and submitted with all other filing requirements to the borough office.

| Filing At: BROOKLYN - 893 SHEPHERD AVENUE | |
|--|--|
| Validated On: 01/09/2020 1:30 PM Forms Generated: PW1, a | chedule A |
| Filing Type: ALTERATION 1 (A1) - INITIAL | |
| Filing Fee Estimation The following fee estimation is based on information | provided by the applicant. |
| COST FEE = ((10 - 3)* 10.3) + 280 = 352.1 | Building Type: OTHER |
| | Fee Status: STANDARD |
| | Directive 14: NO |
| | Computed Total Filing Fee: \$352.10 |
| | Minimum Required Payment: \$280.00 |
| | Computed Civil Penalty: \$0.00 |
| | Records Management Fee: \$165.00 |
| | STANDARD PLAN EXAM |
| | Number of Stories: 1 Total Building Square |
| ÷ | Footage: 32450 sq. ft. |
| | a . |
| 8 | Work Type(s) - |
| PD-1 (Plot Diagram) must be manually completed for this application. | |
| а. Эл | □ FP □ SD □ SP □ FA □ EQ |
| | CC CONT- GENERAL CONSTRUCTION |
| ι. Έ | Energy Compliance Review Fee: \$220.00 |
| | 1 |
| | |
| | |
| Other Important Information | |
| en an en | ing for completeness and accuracy. The submitted documents |

Though eFiling checks all applications for errors, other issues may prevent the Department from accepting this filing.

 4
 Where to File This application must be filed in-person in the borough where the proposed work is to occur, or electronically.

 Office Location:
 210 JORALEMON STREET BROOKLYN, NY 11201

 Phone:
 (718) 802-3675

 Hours:
 8:30 AM - 4:30 PM



DOB Reference Number: T00002244985-000070 User Ref ID: SHEPHERD

12/14

72



PW1: Plan / Work Application

Must be typewritten



| | • |
|--|---|
| 1 Location Information Required for all applications. | |
| House No(s) 893 Street Name SHEPHERD AVENUE | · · |
| Borough BROOKLYN Block 04521 Lot 00001 BIN 33 | 327505 C.B. No. 305 |
| Work on Floor(s) 001, MEZ | Apt. / Condo No(s) |
| 2 Applicant Information Required for all applications. Fax, mobile telephone and e-r | mail address are optional information. |
| Last Name GORMAN First Name WALTER | Middle Initial T |
| Business Name WALTER T. GORMAN, P.E., P.C. | Business Telephone (212) 532-5970 |
| Business Address 420 WEST 45 STREET, 6TH FLOOR | Business Fax (212)725-3690 |
| City NEW YORK State NY Zip 10036 | Mobile Telephone |
| E-Mail WALTER.T.GORMAN@WTGPEPC.COM | License Number 043490 |
| Choose one: X P.E. R.A. Sign Hanger R.L.A. | Other: |
| 3 Filing Representative Complete only if different from applicant specified in section | 2. Fax, mobile phone, and e-mail are optional info. |
| Last Name GORMAN/SEM/GAR/KH First Name WALTER/SH/J/L | 🖕 , Middle Initial T 🧳 🗉 |
| Business Name WALTER T. GORMAN, P.E., P.C. | Business Telephone (212) 532-5970 |
| Business Address 420 WEST 45 STREET, 6TH FLOOR | Business Fax |
| City NEW YORK State NY Zip 10036 | Mobile Telephone |
| E-Mail WALTER.T.GORMAN@WTGPEPC.COM | Registration Number N10467 |
| | |
| 4 Filing Status Required for all applications. Choose one and provide specified assoc | iated information. |
| Initial Filing 5, 7, 11, 12A, 25-26 | And the second se |
| Choose only one: □ Amend Existing Filing 4A □ Subsequent Filing 6-7, 8A (A □ Subsequent Filing 6-7, 8A | Withdrawal 26 Mit-2 only), 11 Specified in 4A and 6 |
| Standard Plan Examination of Review Subsequent Plang 67, 64 (A Professional Certification PC1, POC1 Post Approval Amendment (PA | |
| Professional Certification of Objections Al1 Will PAA affect filing fees? | Yes No 4A Indicate existing document number |
| 5 Job/Project Types Choose one and provide specified associated information. | |
| X Alteration Type 1 or Alteration Type 1 required Alteration Type 2 5A, 6A-D, 8A-D, 8A | |
| | |
| 6 Work Types Select all that apply but no more than allowed by job and filing type. "O | |
| | |
| 6A BL - Boiler PW1C DFS - Fuel Storage PW1C DFL - Plumbing PV | |
| □ FA - Fire Alarm □ FP - Fire Suppression □ SD - Standpipe Pl | W1B OT/LAN - Landscape |
| □ FA - Fire Alarm □ FP - Fire Suppression □ SD - Standpipe Pl □ FB - Fuel Burning PW1C □ MH - Mechanical □ SP - Sprinkler Pl | W1B OT/LAN - Landscape W1B 6F OT/ANT - Antenna |
| □ FA - Fire Alarm □ FP - Fire Suppression □ SD - Standpipe Pl □ FB - Fuel Burning PW1C □ MH - Mechanical □ SP - Sprinkler PV | W1B OT/LAN - Landscape W1B 6F OT/ANT - Antenna |

| 7 Plans/Construction Documents Submitted Plans are required for most applications. Are plans being submitted with this PM17 Qi Yen No If yes, do the plans include: PO — Foundation EN — Energy Analysis 8 Additional Information Bit is a building enlargement proposed Bit Estimated Job Cost 310000 Bit State Trontage: Innart, 9 Additional Considerations, Limitations or Restrictions Bit Is a building color Area: sq. ft Bit Is a building color Area: sq. ft Bit Is a building color Area: sq. ft 9 Additional Considerations, Limitations or Restrictions Bit Is a building color Area: sq. ft Bit Is a building color Area: sq. ft 9 Additional Considerations, Limitations or Restrictions Bit Is a building color Area: sq. ft Bit Is a building color Area: sq. ft 9 Additional Consideration area more how Publiding color Area: sq. ft Bit Is a building color Area: sq. ft 9 Additional Consideration area more nearge for the state Area area area area area area area are | PV | ٧1 | PAGE |
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| 8 Additional Information 8A WT Cost WT Cost 9A diditional Construction Floor Areas 9A diditional Considerations, Limitations or Restrictions 9A Additional Considerations, Limitations or Restrictions 9A Review is requested under which building code? 2014 2008 Xehration is a major charage to exist. 9B Construction Floor Areas 23 Society Construction Floor Areas 9C WT Costing is a major charage to exist. Yet No 9C WT Costing is a major charage to exist. Yet No 9C WT Costing is a major charage to exist. Yet No 9C WT Costing is a major charage to exist. Yet No 9C Componised Development (Incustonary Housing) Yet No 9C State St | Ar | e pla | being submitted with this PW1? 🕱 Yes 🗌 No If yes, do the plans include: 🗌 FO — Foundation 🗌 EN — Energy Analysis |
| BA WT Cost WT Cost WT Cost BB is a building enlargement is proposed? BC Estimated Job Cost 3::0000 BA WT Cost WT Cost WT Cost BB is a building enlargement is proposed? BC Estimated Job Cost 3::0000 BA WT Cost WT Cost WT Cost BT Cost 3::0000 BC Estimated Job Cost 3::0000 BA | 8 | Ac | |
| SINe enlargement is proposed BO Street Frontage: linear ft. SINe enlargement is proposed SINe enlargement is proposed BE Height: ft. Width: ft. SINe enlargement is proposed SINe enlargement is proposed BE Height: ft. Width: ft. SINe enlargement is proposed | | _ | |
| Image: Second | 8A | VVI | |
| B Additional Construction Florational B Additional Construction Florational Construction Flora Area: sq. ft aq. ft SA Additional Construction Flora Area: sq. ft aq. ft SA Additional Construction Flora Area: sq. ft aq. ft SA Additional Construction Flora Area: sq. ft aq. ft SA Additional Construction Flora Area: SA Compensated Development (Industional Y Housing) SA Additional Construction Flora Area: SA Single Ream Occupancy (SRO) Multiple Dwelling SA Single Ream Area: SA Single Ream Area: SA Additional Area: SA Additional Area: SA Additional Area: SA | | | |
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| 9A Review is requested under which building code? 2014 2008 1968 2017 1968 1967 1968 | 9 | Ad | ional Considerations, Limitations or Restrictions |
| Yes No Yes No Yes No Yes Charge in number of dwelling units Yes No Yes Adult Establishment If yes, plot diagram (except DM) Yes No Income Fousing (nucleosary Housing) Yes Charge in number of stories Yes No Income Fousing (nucleosary Housing) Yes No Work includes: Yes No Income Noticity (nucleosary Housing) Yes No Hourse Notices Yes No Income Noticity (nucleosary Housing) Yes Notice Notices Yes Single Room Occupancy (SRO) Multiple Dwelling Yes Notices violations Yes Notice Income Noticity (Notice Notice Notice Notice Notice Notices Notice N | 94 | | |
| ges ist Alteration required to meet New Building ist Change in number of dwelling units ges ist Change in number of dwelling units ist Change in number of dwelling units ges ist Change in number of dwelling units ist Change in number of stories ist ist Change in number of stories ist ist ist Adult Establishment <i>If yes, 10d diagram (except DM)</i> ist Infill Zoning ist Prefab wood I-joists ist ist Infill Zoning ist Structural cold-formed steel ist Structural cold-formed steel ist ist ist Structural cold-formed steel ist Structural cold-formed steel ist ist ist ist Structural cold-formed steel ist ist Ist ist ist ist ist ist ist ist Ist ist < | | | |
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| Code Compliance Path (choose one): | | _ | |
| Energy Analysis (choose one): ⊠ Tabular Analysis □REScheck □COMcheck □Energy Modeling (EN1) □ 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 the work is entirely in a "low-energy building" and is limited to the building envelope. □ The entire scope of work involves a temporary structure and/or one or more of the following work types: FA, FP, SD, SP, FS, EQ, CC, OT/BPP, OT/FPP. Other work types are not exempt. | X | Tot | |
| 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> The work is an alteration of a State or National historic building. The scope of the work is entirely in a "low-energy building" and is limited to the building envelope. The entire scope of work involves a temporary structure and/or one or more of the following work types: FA, FP, SD, SP, FS, EQ, CC, OT/BPP, OT/FPP. Other work types are not exempt. | | | |
| one of the following (choose one): The work is an alteration of a State or National historic building. The scope of the work is entirely in a "low-energy building" and is limited to the building envelope. The entire scope of work involves a temporary structure and/or one or more of the following work types: FA, FP, SD, SP, FS, EQ, CC, OT/BPP, OT/FPP. Other work types are not exempt. | П | Tot | |
| The scope of the work is entirely in a "low-energy building" and is limited to the building envelope. The entire scope of work involves a temporary structure and/or one or more of the following work types: FA, FP, SD, SP, FS, EQ, CC, OT/BPP, OT/FPP. Other work types are not exempt. | | | one of the following (choose one): |
| The entire scope of work involves a temporary structure and/or one or more of the following work types: FA, FP, SD, SP, FS, EQ, CC, OT/BPP, OT/FPP. Other work types are not exempt. | | | |
| FA, FP, SD, SP, FS, EQ, CC, OT/BPP, OT/FPP. Other work types are not exempt. | | | |
| This is a post-approval amendment and exempt under a prior edition of the energy code. See statement of exemption on attached drawings. | | | , FP, SD, SP, FS, EQ, CC, OT/BPP, OT/FPP. Other work types are not exempt. |
| DOB Reference Number: T00002244985-000070 | | C | |

PW1

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| PW1 | PAGE |
|---|--|
| 11 Job Description | 11A Related DOB Job Numbers |
| PROPOSED TO CHANGE OCCUPANCY GROUP AND AMEND THE USE GROU "TRUCKING TERMINAL AND STORAGE OF SEALED MEDICAL/ HAZARDO WASTE", PROPOSE TO INSTALL EXIT/EMERGENCY LIGHTING AND F EXIT DOOR, ALL AS PER PLAN. | DUS |
| | |
| | |
| | 11B Primary application job no. |
| 12 Zoning Characteristics | |
| 12A District(s) M1-1 12B Street legal width: | 60 ft. |
| Overlay(s) Street Status: | X Public Private |
| Special Dist.(s) If the zoning | lot includes multiple |
| Map Number 17D tax lots, li | ist all tax lots here 🎽 |
| 12C Proposed: Use* Zoning Floor Area District FAR Proposed Lot Details: | Proposed Yard Details: |
| MANUFACTURING 32450 sq. ft. M1-1 0 .98 Lot Type: X Corner | |
| sq. ft. Lot Coverage | 99 % Front Yard |
| sq. ft. Lot Area | 33080 sq. ft. Rear Yard |
| sq. ft. Lot Width | 175 ft. Rear Yard Equivalent Side Yard 1 |
| | Parking? XYes No Side Yard 2 |
| Proposed Totals 32450 sq. ft. 0.98 If yes, no: of parking a | |
| Existing Total 32450 sq. ft. Perimeter Wall | and the second |
| *Use can be one of the following: residential, commercial, manufacturing, or community | v facility. List only one use per line. |
| 13A Primary structural system, choose one: Masonry Concrete (CIP) Wood Steel (Structural) 13B Existing Proposed | Concrete (Precast) Steel (Cold-Formed) Steel (Encased in Concrete 13D Building Type: 1, 2, or 3 Family X Other |
| Structural Occupancy/Risk Cat. 2014 Code 2014 Code 2014 Code | Mixed use building? [‡] Yes X No |
| | 13E Existing Proposed . Building Height 17 ft. 17 ft |
| 13C Occupancy Classification* D-2 Yes XNo S-1 XYes** Construction Classification 1 Yes XNo 1 Yes XNo | Building Height 17 ft. 17 ft. Building Stories 1 1 |
| Multiple Dwelling Classification | Dwelling Units |
| 13F Building was originally erected pursuant to which Building Code: | 014 2008 1968 X Prior to 1968 |
| The earliest Code with which this building or any part of it is required to comply: | 2014 2008 🛛 1968 🗌 Prior to 1968 |
| 14 Fill Choose one. | |
| X Not Applicable On-Site Off-Site Under 300 cubi | ic yards |
| 15 Construction Equipment | 16 Curb Cut Description |
| Chute Sidewalk Shed Construction Material: | Size of cut (with splays): |
| Fence Size: linear ft. BSA/MEA Approval No. | Distance to nearest corner: |
| Supported Scaffold Other: | to street: |
| 17 Tax Lot Characteristics | 18 Fire Protection Equipment |
| Original tax lots being merged or reapportioned (if applicable): | Existing Propose |
| | Yes No Yes No |
| | Fire Alarm 🗌 🕱 🗋 🕱 |
| Tantalius tax lat numbers (any tax late and A | |
| Tentative tax lot numbers (new tax lots only): | Fire Suppression 🗌 🕱 🗍 |
| Tentative tax lot numbers (new tax lots only): | Fire Suppression |

DOB Reference Number: T00002244985-000070 8/19 User Ref ID: SHEPHERD 8/19

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|---------|---|---|---|---|--|--|---|
| 19 | Open Space | s | | | | and the second s | |
| Self2se | | Existing | Proposed | ••• #100-#11222612 - postpilinia- | | Existing | Proposed |
| | Plaza Area | 0 sq. ft. | 0 sq. ft. | Α | rcade Area | 0 sq. ft. | 0 sq. ft. |
| | Parking Area | 0 sq. ft. | 2680 sq. ft. | P | arking Spaces | 0 | 10 |
| | Loading Berths | 600 sq. ft. | 600 sq. ft. | ī | oading Berths | 1 | 1 |
| 20 | Site Charact | eristics | | | 204 | Flood Hazard Area | Information |
| | | Vetlands I Erosion Hazard Area strict | Yes No Yes No X Freshwater X Vrban Ren X Flood Haza | | ;, 20A | Yes No Yes No Substantial im Substantially c Floodshields p | |
| 21 | Demolition D | etails *Mechanical eq | uipment other than handhe | ld devices to be | e used for demo | olition or removal of debris | s (BC §3306.4). |
| 21B | Mechan Mechan Mechan Mechan Demolil Demolil The sco Asbestos Ab The scope of two The scope of the DEP ACP-5 Cor | nical means* from out of nical means* from within tion work affects the ext ope of work involves rais atement Complianc ork requires related asbes o work is not an asbesto introl No. | building? If yes, des erior building envelope ing/moving of a building e Choose one. stos abatement as defined s project as defined in the r | anical means w cribe equipment in the regulatic egulations of th | ill demolish: at proposed: ons of the NYC ne NYC DEP. | Department of Environme DEP Control # is required | l. |
| X | The scope of wo or is an alterati | ork is exempt from the a on to a building constru | sbestos requirement as deficted pursuant to plans subr | ined in the regunited for approximately approximately in the second second second second second second second s | lations promulg | ated by the NYC DEP (1) | 5 RCNY 1-23(b)) ce with <i>§ 28-106 1</i> |
| 23 | Sign | | | | | | 00 marg 20 100.1. |
| | ocation: Gro | Type: Illuminated 23A Non-Illuminated and Roof 23B | Estimated Cost: \$ Total Square Feet: Height above Curb: all Height above Roof: | ft. in. ft. in. | Yes No | If sign projects beyond t billed for annual permit? | uilding line, is owner If no, specify in 26B |
| | Design | inside building line? ned for changeable copy an OAC have an interes | If no, sign projects by: ? If no, 23C t in this sign or location? If | ft. in. | | Is roof sign tight, closed rding. If extensive, provid | |
| ſ | | | an arterial highway? If yes | | 23D Distance | e from Arterial Highway: | |
| 1 | | | a park 1/2 acre or more? / | | | e from Park 1/2 acre or m | and the second |
| 65 | T | | ne above two questions and | 459 0 | 23F OAC SI | gn Number: | |
| | | | mber is required in section : | | 23G OAC Re | egistration Number: | |
| 24 | Comments P | lace additional commen | ts on an Al-1 form. See Gu | uide for proper l | incorporation of | professional certification | statements. |

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| P | W1 | | | PAGE 5 | 5 |
|----|---|--|---|---|------------------------------|
| 2! | | 833 | cant's Statements and Signatures Required for all a | | 1 |
| | ban sub app this thos For Cod Dire all c Occ | red fro mitted licable applic se pre- initia le ont ective onstru upanc | The second seco | No Name (print) WALTER T GORMAN UT | 1 |
| 26 | P | ope | rty Owner's Statements and Signatures | | 1 |
| | ben und certi barri pern issu | efit, m erstan ficate, ed from nitted e a let | cnetary or otherwise, either as a gratuity for properly performing the job or in d that if I am found after hearing to have knowingly or negligently made a fal form, signed statement, application, report or certification of the correction m filing further applications or documents with the Department. Furthermore, work is complete, and that a satisfactory report of final inspection be submitt ter of completion or certificate of occupancy within the time prescribed by law | | |
| | and | all fut | horized the applicant to file this application for the work specified herein ure amendments. I will not knowingly authorize any work that is not in | Owner Individual Partnership NYCHA / HHC Type: X Other Government NYC Agency | |
| | | No No | e with all applicable laws, rules, and regulations. | Condo Unit Owner or Co-Op Tenant-shareholder 26A | |
| | | | Fee Exemption Request (Non-Profit Owned and Operated) | Is the deed holder a non-profit organization? | |
| | | | In accordance with Administrative Code §28-112.1, Exception 1, I certify that the deed holder is a corporation or association organized and | Name (please print): ISSAC TURKIEH | |
| | | | operated exclusively for the purposes indicated in such section, and that the property is used exclusively by such entity for such purposed. | Relationship to Owner: | |
| | | | Fee Exemption Request (NYCHA/HHC, NYC Agency, or Other | Business Name/Agency: SIT REALTY LLC | |
| | | | Government Owned and Operated) The building or any part thereof to be constructed, renovated, altered or demolished is owned and | Street Address: 2266 E 2ND STREET | • |
| | | | operated exclusively for the purposes of the NYC Agency, NYC Authority, NYS Agency, Federal Government or any other government envity. | City: BROOKLYN State: NY Zip: 11223 | • |
| | | X | Owner's Certifications Regarding Occupied Housing The site of the building to be altered or demolished, or the site of the new | Telesbaue Muselan and a second Frid | - |
| | | | building to be constructed, contains one or more occupied dwelling units that will remain occupied during construction. These occupied dwelling | E-Mail Address: ARYEHREALTY@YAHOO.COM | |
| | | | units have been clearly identified on the submitted construction | | - 11 2010/01/02/02 |
| | | 1971 | documents. The site of the building to be altered or demolished, or the site of the new | Signature and Date | 090 |
| ÷) | | MOA! | subject to rent control or rent stabilization under Chapters 3 and 4 of Title | 26A Condo/Co-Op Board See note in bottom left corner of page. | |
| | | | 26 of the New York City Administrative Code. If yes, select one of the following: | Name (please print): | |
| | | | The owner is not required to notify the New York State Homes and | Title: | -01 |
| | | | Community Renewal (NYSHCR) of the owner's intention to file because the nature and scope of the work proposed, pursuant to | Street Address: | 7 55 |
| | | | NYSHCR regulations, does not require notification. | City: State: Zip: | • |
| | | | The owner has notified the New York State Homes and Community Renewal (NYSHCR) of its intention to file such construction | Telephone Number: Fax: | |
| | | | documents/apply for such permit and has complied with all requirements imposed by the regulations of such agency as | E-Mail Address: | |
| | | | preconditions for such [filing/application]. Provide date NYSHCR notified: | Signature and Date | |
| | | | | | |
| | | | Owner's Certification for Directive 14 Applications (if applicable) I have read and am fully aware of the applicant's statement that the | 26B Lessee Responsible for Annual Sign or Marquee Permit | |
| | | | construction documents submitted and all construction documents related to this application will not require a new or amended Certificate of | Name (please print): | |
| | | | Occupancy as there is no change in use, exits, or occupancy and the work is not inconsistent with the current certificate of occupancy. | Relationship to Owner: | |
| | | | Furthermore, I understand that I am responsible for retaining a qualified design professional to perform a final inspection when the permitted work | Business Name/Agency: | |
| | | | is complete and this professional must submit a satisfactory final inspection report to the NYC Department of Buildings within the time | Street Address: | 51 51 |
| | | | following inspection prescribed by Department rule. | City: State: Zip: | |
| | Note | s for s | Section 26A: Section required if unit owner signed Section 26. equired for authorized representative of Condo or Co-Op board. | Telephone Number: Fax: | * |
| | | | a waivers, please see the PW1 User Guide | E-Mail Address: | 5 |
| | | | | numeral and a second | |

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DOB Reference Number: T00002244985-000070 User Ref ID: SHEPHERD

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| alsifi | | | | ~ | | | MEZ | MEZ | TOO | TOO | Floor | |
|--|-------------|----------|-------------|--------------|-------------|------|------------------------|-----------|---|----------|--------------------------------------|--|
| 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 | Description | | Description | | Description | | Description OPFICES | 4 | Description | 30 | Maximum Number of Persons | Existing Legal Use |
| statem | | | | | | | CES | 120 | ICATIO | OG | Live Load (psf) | igal Us |
| ent is a misde | | □Yes □No | | | 10 | | | □Yes IXNo | PABRICATION OF METAL TUBING, | □Yes XNo | 2014 Code Designa- tions? | D |
| Ealerification of any statement is a misdemeanor and is nunishable by a fine or imprisonment or both. It is unlawful to give to a city | t. | 0 | | 0 | 16 | 0 | 22 | 0-2 | UBING, INTERIOR LOADING BERTH | ם-2 | Building Code Occupancy Group(s) | |
| | | | | | Νč | | r. | | BERTH | | Dwelling/ Rooming Units (BC) | |
| risonment or hoth | Ð | | | | al I | | | 17 | | 17 | Zoning Use Group(s) | |
| | | | t. | | | | | | | | | |
| which to nive | Description | | Description | | Description | | Description | 4 | Description | 30 | Maximum Number of Persons | Proposed Use |
| | | | | - | R) | | ACCESSORY | 120 | TRUCKING T | 0G | Live Load (psf) | aso |
| | | ⊠Yes | | X Yes | | ⊠Yes | OFFICES | ⊠Yes | ERMINAL FOR | ⊠Yes | 2014 Code Designa- tions only | |
| And the Manage Andrews and the | | | | | 4 | | | S-1 | ERMINAL FOR TRANSFER MEDICAL/ HAZARDOUS WASTE | S-1 | Building Code Occupancy Group(s)* | . MUSI F |
| U m | A LICENS | 1 / 22 | 1 | | | | | | | | Dwelling/ Rooming Units (BC) | ISE 2014 OCCU |
| Revenue and | AMARON X | PLUF MA | | | | | | 170 | (NO PROCESSING OR | 170 | Zoning Use Group(s) | - Must use 2014 occupancy classification codes |

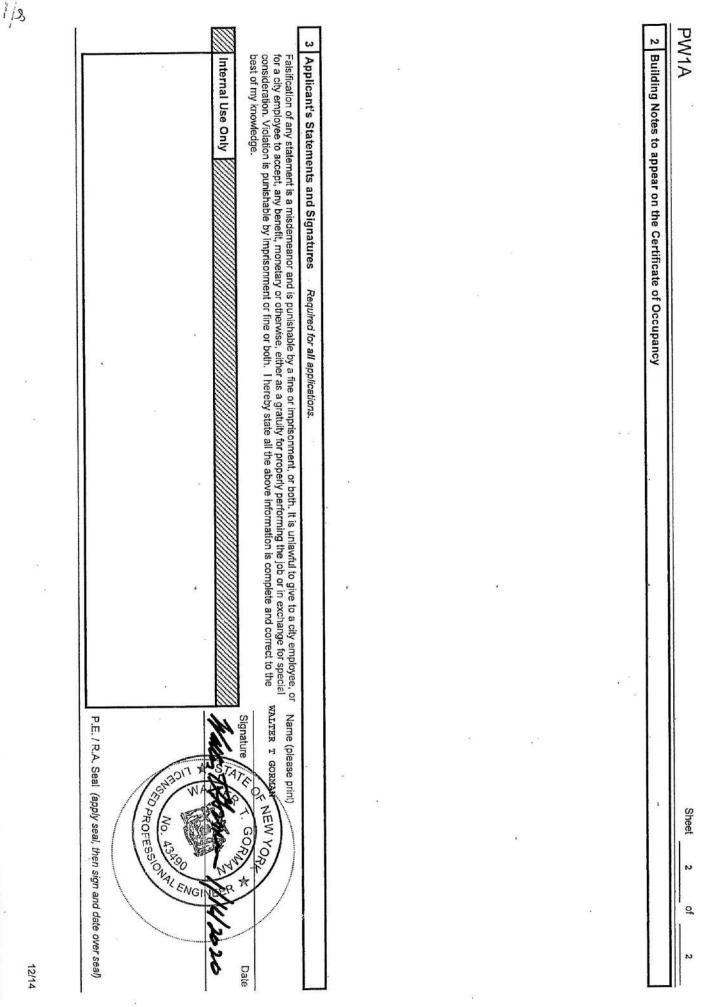
Buildings

PW1A: Schedule A - Occupancy / Use

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DEPT. BLDGS. 321993606 Job Number SC181108023 Scan Code

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DOB Reference Number: T00002244985-000070 User Ref ID: SHEPHERD

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ST-1: Street Tree Checklist

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| Location Information Requi | red for all applications. | · · · · · · · · · · · · · · · · · · · | | | |
|----------------------------|---------------------------|---------------------------------------|-------------|--------------|--|
| House No(s) 893 | Street Name Shephe | erd Ave. | BIS Job No. | | |
| Borough Brooklyn | Block 5421 | Lot 1 | BIN 3327505 | C.B. No. 305 | |

| Last Name Gorman | Firs | st Name Walter | | Middle Initial T. | |
|---------------------------------|--------------|-----------------------------------|--------------|-----------------------|---------|
| Business Name Walter T. Gorm | an, PE., PC. | Business Telephone (212) 532-5970 | | | |
| Business Address 420 W 45 Stree | 1.618 | | Business Fax | | |
| City New York State NY Zip10 | | | , | Mobile Telephone | |
| E-Mail walter.t.gormar | @wtapepc.com | | ÷., | License Number 043490 | Type PE |

3 Certifications Required for all applications. If proposed work is exempt from tree requirements, proceed to section 4

I herby certify this application complies with all street tree requirements specified in the NYC Zoning Resolution, as well as NYC Department of Transportation, NYC Department of Parks and Recreation ("Parks") and all other applicable rules and regulations unless appropriate waivers are obtained. Below is summary information pertaining to these requirements and in addition I have included a complete zoning calculation supporting this summary within the drawing set submitted as part of this application.

Total Required Trees

| Street frontage is ►. |
|--|
| Minus allowable deduction (use group 16B, 16C and 16D only) |
| Total applicable street frontage > |
| |
| Total above divided by 25 feet = Total Required Trees ► |
| ractions equal to or greater than one-half resulting from this calculation shall be considered to be one tree (ZR § 26-41)) |
| tal Proposed Trees |
| Number of existing trees to be removed (requires Parks Tree Removal permit prior to job approval) |
| |
| |
| Number of existing street trees to be preserved at the location (on-site) |
| |
| Number of existing street trees to be preserved at the location (on-site) |
| Number of existing street trees to be preserved at the location (on-site) Number of new street trees to be planted at the location (on-site) |
| Number of existing street trees to be preserved at the location (on-site) Number of new street trees to be planted at the location (on-site) Number of new trees to be planted at an alternate location (off-site) |
| |

ST-1

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| - | | | | |
|------------------------|--|---|--|--|
| 4 E | xemptions | | | • |
| l h | ereby certify this application is exempt from all s | street tree requirements s | pecified in NYC Zoning | Resolution because (choose one): |
| \boxtimes | The building's proposed dominant use group is understand that any future changes to the domi street tree compliance. | 17 or 18 and is exempt fr nant use group of the bui | om street tree requirem Idings must be submitte | ents as per NYC Zoning Resolution. 1 d to the Department and may require full |
| С | This is an Enlargement of a single or two family not an enlargement of 20% or more pursuant to | residence that is not loca the Quality Housing Prog | ited in one of the specia gram. | I districts specified in ZR § 23-03 and |
| Γ | Proposed work is EXEMPT because (select all | | | |
| | This is not an Enlargement exceeding 20% | | | |
| | This is not a Change of Use to Residential | | | -05, 33-03) |
| | \Box This is <u>not</u> a detached garage that is 400 s | quare feet or greater (ZR | §23-03, 33-03) | |
| | e. | | | |
| | | | | |
| . | i o' da l'anta | Desired and Owners F | Demuired for all applicati | |
| 5 S | tatements and Signatures: Applicant of | Record and Owner P | lequired for all applicau | s |
| re W | pplicant of Record: I understand that I must inf evised form reflecting those changes. I understa ith this application must be consistent with the in owner: I hereby certify I am the owner of the abo | nd the information provide formation provided on thi | ed on the Builders Pave is form. Lunderstand that failure | ment Plan application submitted in conjunctio |
| p n | revent the issuance of permits, sign-offs or Certi amed. | ficates of Occupancy. Tu | nderstand this form mus | STATE OF NEW 2001 15 |
| p n O Is | revent the issuance of permits, sign-offs or Certi amed. wner Name (please print) sac Turkieh | Notarization of Owner's S New York, County of: | Signature State of App | icant of Record Name please print |
| p n O Is | revent the issuance of permits, sign-offs or Certi amed. wner Name (please print) | Notarization of Owner's S New York, County of: Swom to or affirmed und | Signature State of App | icant of Record Name please print |
| p n O Is | revent the issuance of permits, sign-offs or Certi amed. wner Name (please print) sac Turkieh | Notarization of Owner's S New York, County of: Swom to or affirmed und | Signature State of App | ter T. German |
| p n O is S | revent the issuance of permits, sign-offs or Certi amed. wner Name (please print) sac Turkieh ignature | Notarization of Owner's S New York, County of: Sworn to or affirmed und | Signature State of App | ter T. German |
| p n O Is S | revent the issuance of permits, sign-offs or Certi amed. wher Name (please print) sac Turkieh ignature pate (13/3-020 | Notarization of Owner's S New York, County of: Sworn to or affirmed und | Signature State of App Lucens er penalty of perjury NUARY 20 20 Sign | ter T. German |
| pn Ols S | revent the issuance of permits, sign-offs or Certi amed. wner Name (please print) sac Turkieh ignature | Notarization of Owner's S New York, County of: Sworn to or affirmed und | Signature State of App Lucens er penalty of perjury NUARY 20 20 Sign | ter T. German |
| p n O Is S | revent the issuance of permits, sign-offs or Certi amed. where Name (please print) sac Turkieh ignature pate //2 / 2 0 0 totary Seal for Owner's Signature Required WASIM AKRAM BACCHUS Notary Public - State of New York NO. 01BA6389973 Ouslified in Owners County | Notarization of Owner's S New York, County of: Sworn to or affirmed und | Signature State of App Lucens er penalty of perjury NUARY 20 20 Sign | ter T. German |
| pn O Is S | revent the issuance of permits, sign-offs or Certi amed. where Name (please print) sac Turkieh ignature pate //2 / 2 0 0 totary Seal for Owner's Signature Required WASIM AKRAM BACCHUS Notary Public - State of New York NO. 01BA6389973 Ouslified in Owners County | Notarization of Owner's S New York, County of: Sworn to or affirmed und | Signature State of App Lucens er penalty of perjury NUARY 20 20 Sign | ter T. German |
| | revent the issuance of permits, sign-offs or Certi amed. where Name (please print) sac Turkieh ignature pate //2 / 2 0 0 totary Seal for Owner's Signature Required WASIM AKRAM BACCHUS Notary Public - State of New York NO. 01BA6389973 Ouslified in Owners County | Notarization of Owner's S New York, County of: Sworn to or affirmed und | Signature State of App Lucens er penalty of perjury NUARY 20 20 Sign | ter T. German HE 11 A 43490 |



TR8: Technical Report Statement of Responsibility for Energy Code Progress Inspections



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This form must be typewritten

| 1 | Location Information Required for all applications. | | | |
|----|---|--|---|---|
| | House No(s) 893 Street Name Shepherd Ave. | | | |
| | Work on Floor(s) 1, Mez. | | | |
| | •••••••••••••••••••••••••••••••••••••• | | | |
| 2 | Applicant Information Required for all applications. | wante date are all the second | | aan in the second |
| | Choose all that apply: Design Applicant 3A, 4 Progress Inspections Applicant 3A, 4 | oplicant 3B-D, 5-6 | | |
| | Last Name Gorman First Name Walter | | Middle Initial T. | * |
| | Business Name Walter T. Gorman, PE, PC. | | Business Telephone (21 | 2) 532-5970 |
| | Business Address 420 W 45th Street, 6th Floor | | Business Fax | |
| | City New York State NY Zip 10036 | | Mobile Telephone | |
| | License Type choose one: X P.E. R.A. | | License Number 043 | 3490 |
| | | | | in the second |
| 3 | Energy Code Progress Inspection Required for applications where Energy | y Code Compliance | Progress Inspection is ma | rked Yes on TR1 |
| 3/ | | 3B Identification of Responsibilities | 3C Certificate of Complete Inspections / Tests | 3D Withdraw Responsibilities |
| Υİ | N Progress Inspections Table Reference in 1RCNY §5000-01(h) (1) and (2) | Initial & Date | Initial & Date | Initial & Date |
| _ | Protection of exposed foundation insulation (IA1), (IA1) | | | |
| - | Insulation placement and R values (IA2), (IIA2) | | | 4,000 |
| | Fenestration u-factor and product rating (IA3), (IIA3) | | | |
| | Enestration air leakage (IA4), (IIA4) | | | |
| 司 | X Fenestration areas (IA5), (IIA5) | | | |
| 司 | X Air sealing and insulation — visual (IA6), (IIA6) | | | |
| | X Air sealing and insulation — testing (IA7), (IIA7) | | | |
| | X Loading deck weather seals (IIA8) | 11122/ 1122 <u></u> | | |
| | X Vestibules (IIA9) | | | |
| | A Fileplaces | | | |
| | X Shutoff dampers (IB2), (IIB2) X HVAC and service water heating equipment (IB3), (IIB3) | | | |
| _ | X HVAC and service water heating system controls (IB4), (IIB4) | | | |
| | X HVAC and service water heating system controls (U-9) (UB5) X HVAC insulation and sealing (IB5), (IB5) | | | |
| | X HVAC institution and seeiing X Duct leakage testing (IB6), (IIB6) | | | |
| | X Electrical energy consumption (IC1), (IIC1) | | | |
| 늵 | X Lighting in dwelling units (IIC2) | | | |
| 늼 | X Interior lighting power (IC2), (IIC3) | | | |
| 늼 | X Exterior lighting power (IIC4) | | | |
| | Lighting controls (IIC5) | | | |
| | Electrical motors (IIC6) | | | |
| | X Maintenance information (ID1), (IID1) | | | and the second |
| | Permanent certificate (ID2) | | | and the second |
| | Solar Ready Requirements (ID3) | | | |

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| | | | a las as | Name (please prin | A THE OF NO. |
|---|--|--|---|--|--|
| I have identified f required for comp | erein all of the progress pliance and determined v | inspections, and commission whether commissioning is req | quired. | Walter T. Gorn | SAN |
| Commissioning is 6.7.2.4 requires o | s required for application commissioning. Check o | ns where C408 or ASHRAE 9 ne: | 0.1 Section | Signature | Shine 3 |
| This project certification | requires commissioning will be provide prior to s | and a preliminary commissio | oning report | ED. | PORESSIONALENO |
| X This project | does not require commi | ssioning. | | P.E. / R.A. Seal (a | apply seal then sign and |
| | unligent's Identificat | ion of Responsibilities | | | |
| | | on or Responsibilities | | | |
| Check all that | | above in section 3 and identi | | | |
| applicable section 101-07, which spectra and the section every progress in City Construction Code. | ns of the New York City becifies the qualifications rspection for which I/we r Codes and the Rules. | sponsibility for conducting the Construction Codes and 1 R s required for each progress i take responsibility. I agree to I am aware of the additional s | CNY 5000-01 inspector, and hat both I and sanctions impo | that this agency meet the agency will comp osed on false filings by | ts those qualifications for ly with all provisions of the y §28-211.1.2 of the Adm |
| Change of App | icant: I am a newly des | ignated individual responsibl | le for the items | s specified herein and | I hereby state that: |
| _ change of App | | | | | nated individual |
| None of the | e inspections/tests indica | ted herein have been perform | | | nated manufadar. |
| □ None of the □ Some of the designated | e inspections/tests indica e inspections/tests indic individual, as indicated | ated herein have been perfor | med by the pr | eviously | |
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Sep



TR1: Technical Report Statement of Responsibility



This form must be typewritten

| 1 | Location Information Required for all applications. | | | | | |
|-------|---|--|--|--|--|--|
| | House No(s) 893 Street Name Sheph | nerd Ave. | | | | |
| . 7 | Work on Floor(s) 001, Mez | | | | | |
| 2 | Applicant Information Required for all applications. | | | | | |
| | Choose all that apply: X Design Applicant 3A, 4A, 5 | Special Inspections Apr | licant 3B-D, 6-9 | Progress Inspections Ap | plicant 4B-D, 6-9 | |
| | | First Name Walter | | Middle Initial | | |
| 5 | Last Name Gorman | And a second | | and the second | | |
| - | Business Name Walter T. Gorman, PE., PC. | | Business Telephone (212) 53 | | | |
| | Business Address 420 W 45th Street, 6th Floo | r | | Business Fax | | |
| - | City New York State NY | Zip 10036 | | Mobile Telephone | | |
| ð | License Type choose one: X P.E. C R. | P.C.W | ar dominist direct | License Number 0434 | 90 | |
| - | | | 01 10 | Special Inspection Agency Number 0002 | 68 | |
| 3 | Special Inspection Categories Required for all app | lications, continued on p | age 2; 📕 indicates i | report required. | | |
| 3A | ← Identification of Requirement | | 3B Identification of Responsibilities | 3C Certificate of Complete Inspections / Tests | 3D Withdraw Responsibilities | |
| YN | Special Inspections | Code/Section | Initial & Date | Initial & Date | Initial & Date | |
| | Structural Steel – Welding | BC 1704.3.1 | | | | |
| | Structural Steel – Details | BC 1704.3.2 | (| | | |
| | Structural Steel – High Strength Bolting | BC 1704.3.3 | | | | |
| | Structural Cold-Formed Steel | BC 1704.3.4 | | | | |
| - | Concrete Cast-In-Place | BC 1704.4 | ******* | | and a state of the | |
| | Concrete - Precast | BC 1704.4 | | | | |
| _ | Concrete – Prestressed | BC 1704.4 | | | | |
| - | The second | BC 1704.5 | | | | |
| _ | | BC 1704.6.1 | | 200 | | |
| | Wood – Installation of High-Load Diaphragms Vood – Installation of Metal-Plate-Connected Trusses | BC 1704.6.2 | | | | |
| | Wood – Installation of Prefabricated I-Joists | BC 1704.6.3 | | | <u>k si</u> | |
| - | Subgrade Inspection | BC 1704.7.1 | | | | |
| | | BC 1704.7.2 | | | | |
| 10.00 | Density | BC 1704.7.3 | | and the second | | |
| | X Subsurface Investigations (Borings/Test Pits) TR4 X Deep Foundation Elements TR5 | BC 1704.7.4 BC 1704.8 | | 16-1 | | |
| | Helical Piles (BB # 2014-020) TR5H | BC 1704.8.5 | | • • • • • • • • • • • • • • • • • • • | | |
| | Vertical Masonry Foundation Elements | BC 1704.9 | | | 14 | |
| | Wall Panels, Curtain Walls, and Veneers | BC 1704.10 | | | | |
| | Sprayed fire-resistant materials | BC 1704.11 | | | | |
| | Mastic and Intumescent Fire-resistant Coatings | BC 1704.12 | | | | |
| | Exterior Insulation and Finish Systems (EIFS) | BC 1704.13 | | | | |
| JE | Alternative Materials - OTCR Buildings Bulletin # | BC 1704.14 | | | | |
| | Smoke Control Systems | BC 1704.15 | | | | |
| | X Mechanical Systems | BC 1704.16 | | | | |
| | Fuel-Oll Storage and Fuel-Oll Piping Systems | BC 1704.17 | | | | |
| | High-Pressure Steam Piping (Welding) | BC 1704.18 BC 1704.18 | | | | |
| | High Temperature Hot Water Piping (Welding) | BC 1704.18 BC 1704.19 | | | | |
| | X High-Pressure Fuel-Gas Piping (Welding) X Structural Stability – Existing Buildings | BC 1704.19 | | | | |
| - | | BC 1704.20.2 | | | | |
| | Excavations—Sheeting, Shoring, and Bracing | BC 1704.20.2 BC 1704.20.3 | | | | |
| JD | Inderpinning | BC 1704.20.5 BC 1814 | | | | |
| _ | K Mechanical Demolition | BC 1704.20.4 | | | | |



TR1: Technical Report Statement of Responsibility

This form must be typewritten

| 3/ | A ← 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 | Initial & Date |
| | X Raising and Moving of a Building | | BC 1704.20.5 | | | |
| | Soil Percolation Test - Private On-Site Storm Water Drainage Disposal Systems, and Detention Facilitie | s I | BC 1704.21.1.2 | | | |
| | Systems, and Detention Facilities Installation | | BC 1704.21.2 | | | |
| | Individual On-Site Private Sewage Disposal System | s | BC 1704.22 | | | • |
| | Soil Percolation Test - Individual On-Site Private Sewage Disposal Systems | | BC 1704.22 | | | |
| ב | Sprinkler Systems | | BC 1704.23 | | | |
| ב | IX Standpipe Systems | | BC 1704.24 | | | |
| | X Heating Systems | | BC 1704.25 | | | |
| | Chimneys | | BC 1704.26 | | | |
| × | Fire-resistant Penetrations and Joints | | BC 1704.27 | | | |
| 7 | Aluminum Welding | | BC 1704.28 | | | |
| | Flood Zone Compliance (attach FEMA elevation/dr floodproofing certificate where applicable) | 1 | BC 1704.29 BC G105 | | - Haddan | |
| | Luminous Egress Path Markings | TR7 | BC 1704.30 BC 1024.8 | | | |
| | Emergency and Standby Power Systems (Generato | rs) | BC 1704.31 | | | |
| | Post-installed Anchors (BB# 2014-018, 2014-019) | | BC 1704.32 | | | |
| | Seismic Isolation Systems | | BC 1707.8 | | | |
| | Concrete Design Mix | TR3 | BC 1905.3 BC 1913.5 | Subm | A TRA to complete this i | bernt |
| | Concrete Sampling and Testing | TR2 | BC 1905.6 BC 1913.10 | Subm | it TR2 to complete this i | 16477 |
| 4 | 4 Progress Inspection Categories Requi | red for all ap | plications. 📕 indicates | report required. | | |
| 4. | A ← Identification of Requirement | india contra | | 4B Identification of Responsibilities | 4C Certificate of Complete Inspections / Tests | 4D Withdraw Responsibilities |
| Y | N Progress Inspections | | Code/Section | Initial & Date | Initial & Date | Initial & Date |
| Π | X Preliminary | | 28-116.2.1, BC 110.2 | | | |
| Ē | X Footing and Foundation | | BC 110.3.1 | | | |
| | X Lowest Floor Elevation | | BC 110.3.2 | | | |
| | X Structural Wood Frame | | BC 110.3.3 | | | |
| П | | TR8 | BC 110.3.5 | Suba | is TR8 to complete shis i | ខេភា |
| П | Fire-Resistance Rated Construction | | BC 110.3.4 | | | |
| _ | X Public Assembly Emergency Lighting | | 28-116.2.2 | | | |
| | | | 28-116.2.4.2, BC 110.5, | | | |

5 Design Applicant's Statements and Signatures P.E./R.A. responsible for plans, choose both below and sign/seal.

I have identified all of the special inspections, progress inspections and tests required for compliance.

Walter T. Goman, RE T. Go YORY Date Signature α Xra TO PROFESSIONAL 6

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

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

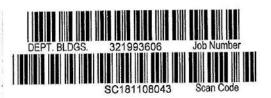
| TR1 | PAGE 3 |
|--|---|
| 6 Owner's Statement and Signature for Progress/Special Inspe | actor Required when inspection applicant identifies responsibilities. |
| I have reviewed the information provided herein and, to the best of my kn the responsible inspector. Falsification of any statement is a misdemeand give to a city employee, or for a city employee to accept, any benefit, mor or in exchange for special consideration. Violation is punishable by a fine to have knowingly or negligently made a false statement or to have know form, signed statement, application, report or certification of the correction any agency, I may be barred from filing further applications or documents | or and is punishable by a fine or imprisonment, or both. It is unlawful to netary or otherwise, either as a gratuity for properly performing the job e or imprisonment, or both. I understand that if I am found after hearing ringly or negligently falsified or allowed to be falsified any certificate, on of a violation required under the provisions of this code or of a rule of |
| Name (print) Title | |
| Signature Date | |
| 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 a responsibility for conducting the inspections. I further certify that I have reconnection with special inspections as well as 1 RCNY 101-06 Rule, whice agency meets those qualifications for each and every special inspection for comply with all provisions of the New York City Construction Codes and the by §28-211.1.2 of the Administrative Code. | ead the applicable sections of the New York City Construction Codes in ch specifies the qualifications required for each inspection and that this for which I/we take responsibility. I agree that both I and the agency will |
| For the progress inspections indicated above in section 4, except energy indicated in section 3, I assume the responsibility and I personally, or whe personnel under my direct supervision, will perform the required inspection requires or requests. I am aware of the additional sanctions imposed on far | ere permitted by the New York City Construction Codes, qualified ons and tests on such forms and in such matter as the Department |
| Final Inspection: i will make final inspection of the construction work, including those inspection inspection that all work substantially conforms to approved construction d performance of progress inspections and other inspections has been doct 101-10, I will perform the final inspection within 1 year from the expiration | locuments and applicable laws and rules. I will confirm that the umented before I report the work complete. As prescribed by 1 RCNY |
| Upon completion of the work and within 30 days of my final inspection, I v completed in accordance with the approved construction documents, laws | vill file a certification attesting to the fact that all work was performed and s and rules, except as reported otherwise. |
| ☐ I understand that my failure to file a certification of completion or to one year from expiration of the last valid permit may result in the los issuance of a violation, or both. I am aware of the additional sanction Code. | as of my privileges to file under Directives 2 and 14 of 1975 or |
| Change of Applicant: I am a newly designated individual responsible fo | or the items specified herein and I hereby state that: |
| □ None of the inspections/tests indicated herein have been performed | |
| Some of the inspections/tests indicated herein have been performed designated individual, as indicated in the attached report. | |
| I am aware of the additional sanctions imposed on false filings by §28-21 Name (please print) | 1.1.2 of the Administrative Code. |
| Signature Date | |
| P.E. / R.A. Seal (apply seal, then sign and date over seal) | |
| 8 Inspection Applicant's Certification of Partial Completion | 9 Inspection Applicant's Certification of Full Completion |
| I have completed the items specified herein and certify that 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. Withdrawal of Applicant: I am withdrawing responsibility for the items of special/progress inspections and/or tesis indicated herein and herewith submit the results or status of the work performed to date. I am aware of the additional sanctions imposed on false filings by §28-211.1.2 of the Administrative Code. | All work performed substantially conforms to approved construc- tion documents and has been performed in accordance with applicable provisions of the New York City Construction Codes and other designated rules and regulations. I am aware of the additional sanctions imposed on false filings by §28-211.1.2 of the Administrative Code. Name (please print) Signature P.E. / R.A. Seal (apply seal, then sign and date over seal) |
| Name (please print) | |
| Signature P.E. / R.A. Seal (apply seal, then sign and date over seal) | |

TR1 August 2016



PW3: Cost Affidavit

Must be typewritten.



| Beenen for filing oos | t officients | Cost informati | an analidad m | at he head ou | | A Indianta a | define de sum | and muscle an |
|---|--|--|---|---------------------|---------------------------|---|------------------------------------|--------------------------------|
| | Reason for filing cost affidavit: Cost information provided Initial Filing 2-7 Estimated cost of construction | | | ist be based on | 1 | | kisting docum | ent number |
| Prior to Approval Actio | | Estimated cost | | | | affected by | y ming: | |
| Prior to Approval Actio | | | | | | | | |
| To obtain Sign-off 2-3 | | | a state of the second second second second | alatad wask | | | | |
| and the second se | | Mark Selection and an other selection of the | tion cost of com | pieled work | | | | والمراجعين المحالة |
| 2 Location Informati | Non-the Statement of the second s | | | | | and the second secon | | |
| House No(s) 89 | Construction of the second sec | Name Shephero | d Ave. | | | | | |
| Borough Bro | ooklyn | Block 4521 | Lot 1 | BIN 3327505 | | C.B. N | o. 305 | |
| Cost Details Requi | ired for all application | ns. | | | 10000000 | | | |
| ances. Indirect costs, indu reflected in the unit costs can show detailed estimat "No" <u>must</u> be specified if Categories of Work (| shown. If in the opinion les to meet the approva for each "Category of I | of the Department, the I of the Department. T Work" listed below. | e valuation is unde The initial, amended | restimated on the a | plicatio | n, the permit sh | all be denied, u | nless the applic |
| Yes No | | Yes No | | Y | s No | | | |
| Boiler (BL) | | Standpipe | (SD) | E. | General Construction (OT) | | | |
| Fire Alarm (FA | A) | Sprinkler (| 1000 | | | | | |
| Fuel Burning (| 239 | Signs (SG) | | | | | ural Demolition | |
| X Fuel Storage | | Other (OT) | | | | Structural V | | |
| Fuel Storage (FS) IX Fire Suppression (FP) | | | | | | | | |
| I IAI Fire Suppress | ion (FP) | L Antenna | (OT/ANT) | | | X Interior Rep | novation | |
| | | Fire Pro | tection Plan (OT/FI | PP) | | Exterior Re | novation | |
| Mechanical (N | ИH) | Fire Pro | tection Plan (OT/Fl e (OT/MAR) | PP) | | Exterior Re | | |
| | ИH) | Fire Pro | tection Plan (OT/Fl e (OT/MAR) | PP) | | Exterior Re | novation | |
| Mechanical (N | ИH) | Fire Pro | tection Plan (OT/Fl e (OT/MAR) | PP) | | Exterior Re | novation | Work |
| Mechanical (M | ин) | Fire Pro Marque (Describ | tection Plan (OT/Fl e (OT/MAR) | | | Exterior Re (Describe) | Total | Work Category |
| Category of Work* | //H)) Description of W | Grik | tection Plan (OT/Fl e (OT/MAR) be) | Area/U | | Exterior Re (Describe) Unit Cost (\$) | Total Cost (\$) | Work |
| Mechanical (M | //H)) Description of W Install exit and | Fire Pro Marque (Describ York d emergency lig | tection Plan (OT/Fl e (OT/MAR) be) | Area/U 3 | | Exterior Re (Describe) Unit Cost (\$) 1000 | Total Cost (\$) 3000 | Work Category |
| Category of Work* | /H)) Description of W Install exit and Replace exit of | Fire Pro Marquee (Describ York d emergency lig loors | tection Plan (OT/Fl e (OT/MAR) be) | Area/U 3 2 | nits | Unit Cost (\$) 1500 | Total Cost (\$) 3000 3000 | Work Category |
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| Category of Work* | /H)) Description of W Install exit and Replace exit of | Fire Pro Marquee (Describ York d emergency lig loors | tection Plan (OT/Fl e (OT/MAR) be) | Area/U 3 2 | nits | Unit Cost (\$) 1500 | Total Cost (\$) 3000 3000 | Work Category |
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| Category of Work* | /H)) Description of W Install exit and Replace exit of | Fire Pro Marquee (Describ York d emergency lig loors | tection Plan (OT/Fl e (OT/MAR) be) | Area/U 3 2 | nits | Unit Cost (\$) 1500 | Total Cost (\$) 3000 3000 | Work Category Total Cost |
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| Category of Work* | /H)) Description of W Install exit and Replace exit of | Fire Pro Marquee (Describ York d emergency lig loors | tection Plan (OT/Fl e (OT/MAR) be) | Area/U 3 2 | nits | Unit Cost (\$) 1500 | Total Cost (\$) 3000 3000 | Work Category Total Cost |
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*List ALL Categories of Work specified "Yes" above. Use more than one line for Categories of Work that involve multiple unit costs. See PW3 Form Instructions for a sample of completed Section 3 Cost Details.

| V3 | | | | | | |
|---|--|---|---|--|--|--|
| Design Applicant Information | | | | | | |
| Last Name Gorman | F | irst NameW | alter | Middle Initial T | | |
| Business Name Walter T. Gorman, Pl | E., PC. Busine | ss Phone 21 | 2-532-5970 | Business Fax | | |
| Business Address 420 W 45th Street, 6t | h Floor | | | Mobile Phone | | |
| cityNew York | StateNY | Zip 10 | 0036 | E-Mailwalter.t.gorman@ | | |
| License Number 043490 Choos | e One: XP.E. | R.A. | Sign Hange | Other (specify) | | |
| Owner/Lease Holder Information | | | | | | |
| Last Name Knisley | Fi | rst Name Cu | urtis | Middle Initial | | |
| Business Name Sharps Compliance, | and the second states of the s | | | Business Fax | | |
| Business Address 9220 Kirby Dr., Suite | 500 | | | Mobile Phone | | |
| City Houston | State TX | Zip 77 | 7054 | E-Mail cknisley@sharps | | |
| Design Applicant's Statements and Sig | gnatures | | | | | |
| in exchange for special consideration. Violation is punishable ment or to have knowingly or negligently falsified or allowed to the provisions of this code or of a rule of any agency, I may be Name (print) Nalter T. Gorman, PE | by imprisonment or fine o o be faisified any certificat barred from filing further a | r both. 1 unders: e, form, signed s applications or de | Signature | ther hearing to have knowingly of beilgenity mad appling to participation of the Grosson of a vibiation internet. | | |
| Owner's/Lease Holder's Statements an | d Signatures No | otarv onlv n | | | | |
| I hereby state the information on this form is correct and complete to the best of my knowledge. I understand falsification of any statement is a misdemeanor and is punishab imprisonment, or both. I also understand 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 prope 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 negli- failse statement or to have knowingly or negligently faisified or allowed to be faisified any certificate, form, signed statement, application, report or certification of the correction 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. | | | | | | |
| | | County of: | | Notary Seal | | |
| Signature | Sworn to or affirmed | under penalty | of perjury | | | |
| Cint | day of | | 20 | | | |
| Date 01/09/2020 | Notary Public Signat | ure | | | | |
| | Design Applicant Information Last Name Gorman Business Name Walter T. Gorman, Pl Business Address 420 W 45th Street, 6t CityNew York License Number 043490 Choos Owner/Lease Holder Information Last Name Knisley Business Name Sharps Compliance, Business Name Sharps Compliance, Business Address 9220 Kirby Dr., Suite City Houston Design Applicant's Statements and Si Ihereby state the information on this form is correct and comment or to have knowingly or negligently faisified or allowed the provisions of this code or of a rule of any agency, I may be Name (print) Valter T. Gorman, PE Owner's/Lease Holder's Statements and commensionment, or both. 1 also understand it is unlawful to give to a city be or in exchange for special consideration. Violation is paise statement or to have knowingly or negligently faisified or allowed to the provisions of this code or of a rule of any agency, I may be Name (print) Valter T. Gorman, PE Dereby state the information on this form is correct and commensionment, or both. 1 also understand it is unlawful to give to a city age age age statement or to have knowingly or negligently faisified or envisions of this code or of a rule of any age age age age age age statement or to have knowingly or negligently faisified or envisions of this code or of a rule of any age age age age age age age | Design Applicant Information File Last Name Gorman File Business Name Walter T. Gorman, PE., PC. Busine Business Address 420 W 45th Street, 6th Floor City/New York State NY License Number 043490 Choose One: Image: P.E. Owner/Lease Holder Information East Name Knisley Last Name Knisley File Business Name Sharps Compliance, INC Busines Business Address 9220 Kirby Dr., Suite 500 City Houston City Houston State TX Design Applicant's Statements and Signatures Interest state the Information on this form is correct and complete to the best of my knoment, or boh. I also understand it is unlawful to give to a city employee, or for a city employee | Design Applicant Information Last Name Gorman First Name W Business Name Walter T. Gorman, PE., PC. Business Phone 27 Business Address 420 W 45th Street, 6th Floor City New York State NY Zip 10 License Number 043490 Choose One: P.E. R.A. Owner/Lease Holder Information Last Name Knisley First Name Co Business Name Sharps Compliance, INC Business Phone 71 Business Address 9220 Kirby Dr., Suite 500 City Houston State TX Zip 77 Design Applicant's Statements and Signatures Incredue to accept in exhaust of its unformation of bits form is correct and complete to the best of my knowledge. I under method by the patient of bits considered and complete to the best of my knowledge. I under method by a patient of a city employee, or for a city employee. If a city employee, or for a city employee to accept in exhaust of its unformation its purplete to the best of my knowledge. I under method to a special consideration its purplete to a city employee, or for a city employee, quick cinde or a cithe of any egeney, I may be barred from fil | Design Applicant Information Last Name Gorman First NameWalter Business Name Walter T. Gorman, PE., PC. Business Phone 212-532-5970 Business Address 420 W 45th Street, 6th Floor City New York State NY City New York State NY Zip 10036 License Number 043490 Choose One: P.E. R.A. Sign Hange Owner/Lease Holder Information Business Name Knisley First Name Curtis Business Name Sharps Compliance, INC Business Phone 713-660-3544 Business Name Sharps Compliance, INC Business Phone 713-660-3544 Business Address 9220 Kirby Dr., Suite 500 City Houston State TX Zip 77054 Design Applicant's Statements and Signatures Indextand falsification of any ment, of both. 1 also understand the or both. Indextand falsification, of an exhange for special consideration. Visation is punishable by punishable by indextand falsifications or documents with the Dep Materian falsification, of any ment, or both. Indextand falsification, or any suphishable by indextand falsifications or documents with the Dep Materian falsification of any ment, or bake knowingly or negligently falsified or allowed to be falsified any carificate, form, signed statement, application, or the provisions of this code or of a rule of any agency, I may be barred from filing further applications or documents with the Dep Materian falsification of any discrete and complete to theave falsification of any discrete and complete to the baset of my | | |

| Work Area | PW3 Cost Details Validation | Comments (May include cost guidance.) |
|--------------------------|--------------------------------------|---------------------------------------|
| Plan Examination: | Accept Original Revised Cost Needed | |
| C of O: | Accept Original Revised Cost Needed | |
| Plan Examination/C of O: | Accept Revised Submission (Resolved) | |

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NEW YORK CITY BOARD OF STANDARDS AND APPEALS

REGULAR MEETING

TUESDAY MORNING, SEPTEMBER 10, 2019

10:00 A.M.

| | | APPEALS – DECISIONS |
|----|------------|---|
| 5. | 2019-45-A | Cozen O'Connor 10002 Farragut Road, Brooklyn Appeal of the DOB interpretation (dated 1/31/2019) that motor freight station for regulated medical waste use at the premises constitutes a UG 18 use pursuant to ZR § 42-15 and seeks the Board's confirmation that such use constitutes a UG 16 use pursuant to ZR § 32-25. Community Board #18BK |
| | | Project Manager: Gjela Prenga (212) 386-0067 |
| | | Status: Granted – 9/10/19 |
| | 10:02 A.M. | |

| | A | P 'EALS – CONTINUED HEARINGS |
|----|------------|--|
| 6. | 2017-310-A | NYC Department of Buildings 10002 Farragut Road, Brooklyn Pursuant to § 645 of the New York City Charter, the Department of Buildings (the Department") respectfully submits to the Board of Standards and Appeals (the "Board") this statement in support of its application to modify certificate of occupancy 321114450F dated September 1, 2015. Community Board #18BK |
| | | Project Manager: Gjela Prenga (212) 386-0067 |
| | 10:05 A.M. | Status: Adjourned, Continued Hearing – 12/10/19 |
| 7. | 2019-89-A | City Club of New York 36 West 66th Street aka 50 West 66th Street, Manhattan Appeal of a New York City Department of Buildings challenging the validity of a building permit dated April 11, 2019. C4-7, R8 Special Lincoln Square District. Community Board #7M |
| | | Project Manager: Toni Matias (212) 386-0084 |
| | 10:08 A.M. | Status: Closed, Decision – 9/17/19 |

| 8. | 2019-94-A | Landmark West 36 West 66th Street aka 50 West 66th Street, Manhattan Appeal of a New York City Department of Buildings challenging the validity of a building permit dated April 11, 2019. C4-7 and R8 Special Lincoln Square District. Community Board #7M |
|----|------------|--|
| | 10:08 A.M. | Project Manager: Toni Matias (212) 386-0084 Status: Closed, Decision – 9/17/19 |

This information is provided in draft form and is a public service courtesy only. Although the BSA endeavors to ensure that the information is as current and accurate as possible, errors do occasionally occur, and the schedule may change due to withdrawals and adjournments. Therefore, the BSA cannot guarantee the accuracy of the information. Readers should, where possible, verify the information before acting on it.

Sharps Compliance, Inc. Response to NOIA Application ID: 2-6105-00889/00001 April 3, 2020

ATTACHMENT B

Revised Engineering Report as of April 3, 2020