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

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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

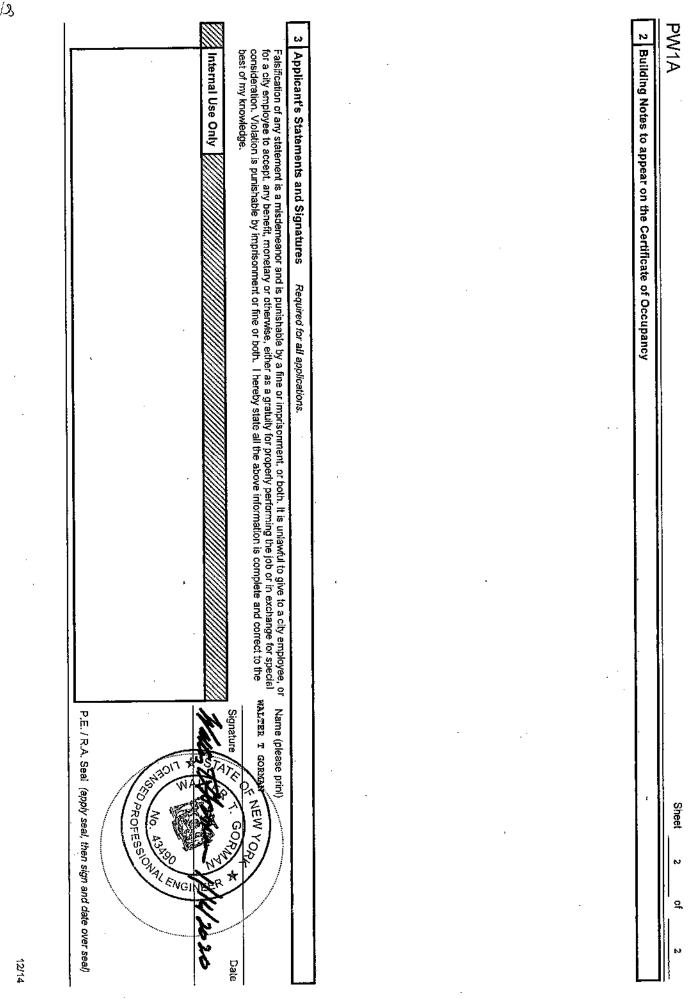


PW1A: Schedule A - Occupancy / Use Must be typewritten. Sheet <u>1</u> of <u>2</u>

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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					
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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
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 <								
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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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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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					· · · · · · · · · · · · · · · · · · ·		
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Image: Sign HVAC and service water heating equipment (IB3), (IIB3)	台			(iB2), (IB2)			········
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Image: A control of the second of the sec			K Electrical energy consumption				<u> </u>	
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	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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This form must be typewritten

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
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
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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.

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
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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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□ Little "E" or RD Site (list #s-max. 5): □ Ummapped/CCO Street □ Requesting legalization of work where no work without a permit violations have been issued LL Number □ © Other (please specify on line provided below): □ □ © Other (please specify on line provided below): □ □ © CRFN(s) Restrictive Declaration / Easement (max. 4): □ □ © CRFN(s) Zoning Exhibit (I, II, II, etc max. 4): □ 9E © SAC Calendar Numbers (max. 5): □ 9F © CPC Calendar Numbers (max. 5): □ 9G © Work includes modular construction under New York State jurisdiction 9I 9J Ø Structural peer review required per BC 16. If yes, provide NYS P.E. Incense number: □ 9K © Work includes permanent removal of standpipe, sprinkler or fire suppression related systems □ 9L © Structural stalitity affected by proposed work □ 9M © Work includes permanent removal of standpipe, sprinkler or fire suppression related systems □ 9L © Structural stalitity affected by proposed work □ 9M © Work includes perial anger common plan or development or sale that involves			
□ □	9D		(list the may 5):
Requesting legalization of work where no work without a permit violations have been issued LL Number Year Collection CRFN(s) Restrictive Declaration / Easement (max. 4): Laws (list #s-max. 2)			
without a permit violations have been issued LL Number Year			
□ Other (please specify on line provided below): □ □ Filing to comply with Local Laws (<i>list #s_max. 2</i>) □ □ CRFN(s) Restrictive Declaration / Easement (max. 4): □ □ □ CRFN(s) Zoning Exhibit (I, II, III, etc max. 4): □ 9E □ ∞ BSA Calendar Numbers (max. 5): □ 9G □ ∞ Work includes lighting fixture and/or controls, installation or replacement. [ECC §404 and §505] □ 9H □ ∞ Work includes modular construction under New York State jurisdiction □ 9J □ ∞ Structural peer review required per BC 16. If yes, provide NYS P.E. license number: □ 9K □ ∞ Work includes partial demolition as defined in AC §28-101.5, or the raising/moving of a building <i>If yes, 21B</i> □ □ ∞ Work includes partial demolition as defined in AC §28-101.5, or the raising/moving of a building <i>If yes, 21B</i> □ □ ∞ Work includes partial demolition as defined in AC §28-101.5, or the raising/moving of a building <i>If yes, 21B</i> □ □ ∞ Work includes partial demolition as defined in AC §28-101.5, or the raising/moving of a building <i>If yes, 21B</i> □ □ ∞ Work involves or will result in an amount of soil disturbance greater than or equal to one acre in an MS4 area □ □ Work involves or will result in an amount of soil disturbance greater than or equal to one acre in an MS4 area □ □ Work involves or will result on a director or sale that involves or will result in an amount of soil disturbance greater than or equa		1	the second state of the second s
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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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PV	V1						PAGE 4
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

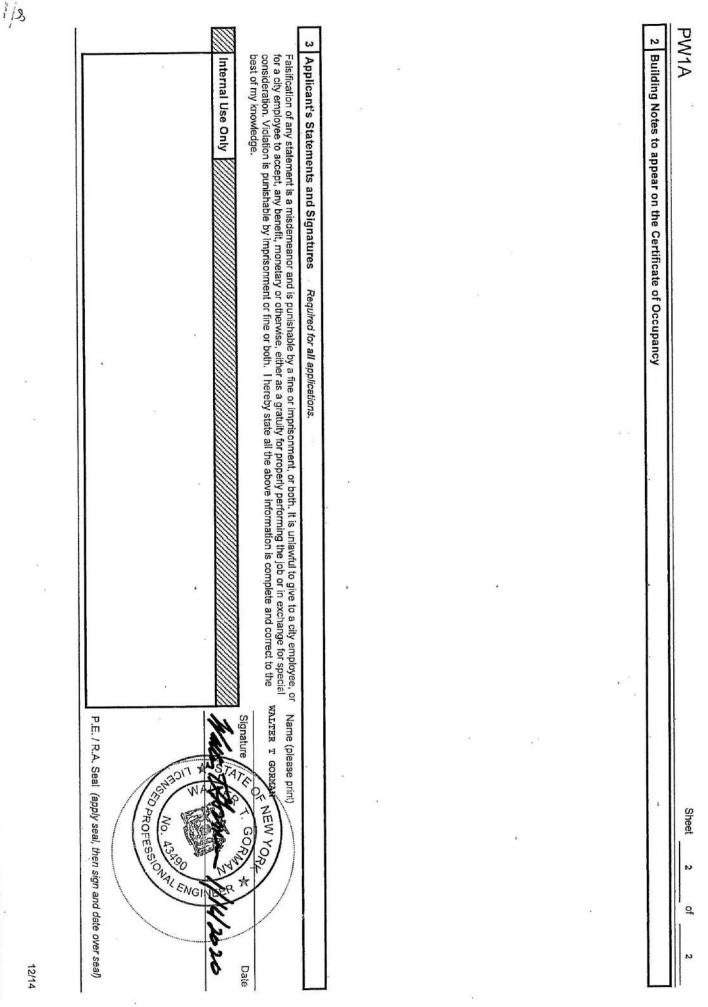
Buildings

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

tips



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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PAC	GE	2
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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
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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)			

1/17

			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	
☐ None of the ☐ Some of the designated I am aware of th	e inspections/tests indica e inspections/tests indica individual, as indicated e additional sanctions in	ated herein have been perfor	med by the pr	eviously	
None of the Some of th designated I am aware of th Name (please p	e inspections/tests indica e inspections/tests indica individual, as indicated e additional sanctions in rint)	ated herein have been perfor	med by the pr	eviously	
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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)

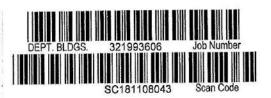
TR1	PAGE 3
6 Owner's Statement and Signature for Progress/Special Inspe	actor Required when inspection applicant identifies responsibilities.
I have reviewed the information provided herein and, to the best of my kn the responsible inspector. Falsification of any statement is a misdemeand give to a city 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
Category of Work*	/H)) Description of W Install exit and Replace exit of	Fire Pro Marque (Describ York d emergency lig	tection Plan (OT/Fl e (OT/MAR) be)	Area/U 3 2	nits	Exterior Re (Describe) Unit Cost (\$) 1000	Total Cost (\$) 3000	Work Category Total Cost
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

*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)	

4

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