



NYC DEPT. OF BUILDINGS  
PW1 Plan Work Application  
RECEIVED  
Must be typewritten.

DEPT. BLDGS 11022223 Job Number  
SC131182027 Scan Code

2011 APR 28 PD 2:01

1 Location Information Required for all applications.

House No(s) 16 Street Name East 30th Street  
Borough Manhattan Block 859 Lot 75 BIN 1016943 C.B. No. 105  
Work on Floor(s) Apt. / Condo No(s)

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

Last Name Ashihara First Name Nobutaka Middle Initial  
Business Name Nobutaka Ashihara Associates Business Telephone 212.233.1783  
Business Address 132 Nassau Street Business Fax  
City New York State NY Zip 10038 Mobile Telephone  
E-Mail License Number 014870  
Choose one: ☐ P.E. ☒ R.A. ☐ Sign Hanger ☐ Other, please specify:

3 Filing Representative Complete only if different from applicant specified in section 2. Fax, mobile phone, and e-mail are optional info.

Last Name Tymecki/Conklin/Camino First Name Robert/James/Kevin Middle Initial  
Business Name Domani Consulting Inc Business Telephone 516.256.0317  
Business Address 226 E Merrick Rd Business Fax  
City Valley Stream State NY Zip 11580 Mobile Telephone  
E-Mail Registration Number

4 Filing Status Required for all applications. Choose one and provide specified associated information.

☐ Initial Filing 5, 7, 11, 12A, 25-26 ☐ Prior to Approval Actions 25-26 ☐ Reinstatement 24-26  
Review is requested under which Building Code? ☐ Amend Existing Filing 4A ☐ Withdrawal 26  
☐ 2008 ☐ 1968 ☐ Prior to 1968 ☐ Subsequent Filing 6-7, 8A (Alt-2 only), 11 ☐ Specified in 4A and 6  
Choose ☐ Standard Plan Examination or Review ☒ Post Approval Amendment (PAA) 4A, 6, 24-25 ☐ Entire Job  
one: ☐ Professional Certification PC1, POC1 Will PAA affect filing fees? ☐ Yes ☒ No 4A Indicate existing document number  
☐ Professional Cert. of Objections A11 ☐ New (Superseding) Applicant 4A, 25-26 affected by filing: 1

5 Job/Project Types Choose one and provide specified associated information.

☐ Alteration Type 1 6A-E, 8B-C, 9-10, 13C-F, 14 & ☐ Alteration Type 1, OT: "No Work" 8C, 9-10 & ☐ Full Demolition 6B, 8D, 9B-D, &  
18-20, 22, PW1A, PD1. select all that apply: 12, 13C-F, 14, 18-19, 22, PW1A, PD1 13D-E, 14, 21A, 22  
☐ Change in Exits ☐ Alteration Type 2 5A, 6A-D, 8A-B, 9-10, & ☐ Sign 5A, 6B-D, 9B, 22-23  
☐ Change in Number of Stories 13C-E, 14, 20, 22 ☐ Subdivision 9B, 12A-B  
☐ Change in Number of Dwelling Units ☐ Alteration Type 3 5A, 6B-F, 8C, 9-10, 13C-E, 22 ☐ Condominium ☐ Improved 17  
☐ Change in Occupancy / Use ☐ New Building 6A-E, 8F-G, 9A-C, 9L, 10, 12, 13A-E 5A Directive 14 acceptance requested?  
☐ Change inconsistent with current Cert. of Occup. (13B: 2008 Code only), 14, 18-20, PW1A, PD1 ☐ Yes ☐ No

6 Work Types Select all that apply but no more than allowed by job and filing type. "OT" required on all NB and Alteration 1 initial applications.

6A ☐ BL - Boiler PW1C ☐ FS - Fuel Storage PW1C ☐ PL - Plumbing PW1B ☐ CC - Curb Cut 16  
☐ FA - Fire Alarm ☐ FP - Fire Suppression ☐ SD - Standpipe PW1B ☐ OT/ANT - Antenna  
☐ FB - Fuel Burning PW1C ☐ MH - Mechanical ☐ SP - Sprinkler PW1B ☐ OT/SPP - Builders Pavement Plan 8D  
6B ☐ EQ - Construction Equipment 15 ☒ OT/GC - General Construction ☐ OT - Other, describe ☐ OT/PPP - Fire Protection Plan  
☐ OT/MAR - Marquee 8E, 26B

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

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

**8 Additional Information**

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

**9 Additional Considerations, Limitations or Restrictions**

Yes No	Yes No	9F Structural Peer Reviewer License No. P.E.
9A <input type="checkbox"/> <input type="checkbox"/> Structural peer review required per BC §1627 <i>If yes, 9F</i>		
9B <input type="checkbox"/> <input type="checkbox"/> Filed to Comply with Local Law <i>If yes, 9G</i>	<input type="checkbox"/> <input type="checkbox"/> Landmark	9G Local Law No(s) Year
<input type="checkbox"/> <input type="checkbox"/> Other, specify: _____	<input type="checkbox"/> <input type="checkbox"/> "Little E" Hazmat Site	
<input type="checkbox"/> <input type="checkbox"/> Restrictive Declaration / Easement <i>If yes, 9M</i>	<input type="checkbox"/> <input type="checkbox"/> Unmapped Street	9H Violation No(s)
<input type="checkbox"/> <input type="checkbox"/> Zoning Exhibit (I, II, III, etc.) <i>If yes, 9N</i>	<input type="checkbox"/> <input type="checkbox"/> Filing to Address Violation(s) <i>If yes, 9H</i>	
<input type="checkbox"/> <input type="checkbox"/> Requesting legalization of work where no work w/o a permit violations have been issued		9I BSA Calendar No(s)
9C <input type="checkbox"/> <input type="checkbox"/> Adult Establishment <i>If yes, plot diagram (except DM)</i>	<input type="checkbox"/> <input type="checkbox"/> Included in LMCCC	
<input type="checkbox"/> <input type="checkbox"/> Compensated Development (Inclusionary Housing)	<input type="checkbox"/> <input type="checkbox"/> Infill Zoning	9J CPC Calendar No(s)
<input type="checkbox"/> <input type="checkbox"/> Low Income Housing (Inclusionary Housing)	<input type="checkbox"/> <input type="checkbox"/> Loft Board	
<input type="checkbox"/> <input type="checkbox"/> Single Room Occupancy (SRO) Multiple Dwelling	<input type="checkbox"/> <input type="checkbox"/> Quality Housing	
<input type="checkbox"/> <input type="checkbox"/> Filing includes Lot Merger / Reapportionment <i>If yes, 17</i>	<input type="checkbox"/> <input type="checkbox"/> Site Safety Job/Project	
9D <input type="checkbox"/> <input type="checkbox"/> Includes permanent removal of standpipe, sprinkler or fire suppression related systems		9K High-Rise Team Tracking Number:
9E <input type="checkbox"/> <input type="checkbox"/> Work includes partial demolition as defined in AC §28-101.5 <i>If yes, 21B</i>		
<input type="checkbox"/> <input type="checkbox"/> Structural Stability affected by proposed work		
9L <input type="checkbox"/> <input type="checkbox"/> Work includes lighting fixture and/or controls, installation or replacement. [§ECC 404 and 505]		
9M CRFN(s) Restrictive Declaration / Easement (max. 4):		
9N CRFN(s) Zoning Exhibit (I, II, III, etc. - max. 4):		

**10 NYCECC Compliance** *New York City Energy Conservation Code*

☐ To the best of my knowledge, belief and professional judgment, all work under this application is in compliance with the NYCECC\*

☐ Energy analysis is on another job number: \_\_\_\_\_

Yes No

☐ ☐ This application is, or is part of, a project that utilizes trade-offs among different major systems  
☐ ☐ This application utilizes trade-offs within a single major system

☐ To the best of my knowledge, belief and professional judgment, all work under this application is exempt from the NYCECC\* in accordance with one of the following: *Choose one*

☐ The work is an alteration of a State or National historic building.  
☐ The scope of work is entirely in a "low-energy building" and is limited to the building envelope.  
☐ The scope of work does not affect the energy use of the building.  
☐ This is a post-approval amendment and exempt under a prior edition of the energy code. See statement of exemption on attached drawings.

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

**11 Job Description****11A Related DOB Job Numbers**

11B Primary application job no.

<b>12 Zoning Characteristics</b>										
12A District(s)				12B Street legal width: _____ ft.						
Overlay(s)				Street Status: <input type="checkbox"/> Public <input type="checkbox"/> Private						
Special Dist.(s)				If the zoning lot includes multiple tax lots, list all tax lots here ►						
Map Number										
12C Proposed: Use*	Zoning	Floor Area	District	FAR	Proposed Lot Details:			Proposed Yard Details:		
		sq. ft.			Lot Type: <input type="checkbox"/> Corner <input type="checkbox"/> Interior <input type="checkbox"/> Through			Check here if no yards: <input type="checkbox"/> or		
		sq. ft.			Lot Coverage _____ %			Front Yard _____ ft.		
		sq. ft.			Lot Area _____ sq. ft.			Rear Yard _____ ft.		
		sq. ft.			Lot Width _____ ft.			Rear Yard Equivalent _____ ft.		
		sq. ft.			Proposed Other Details:			Side Yard 1 _____ ft.		
		sq. ft.			Enclosed Parking? <input type="checkbox"/> Yes <input type="checkbox"/> No			Side Yard 2 _____ ft.		
<b>Proposed Totals</b>		sq. ft.			If yes, no. of parking spaces: _____					
<b>Existing Total</b>		sq. ft.			Perimeter Wall Height _____ ft.					

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

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

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

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

<b>17 Tax Lot Characteristics</b>										<b>18 Fire Protection Equipment</b>									
Original tax lots being merged or reapportioned (if applicable):										Existing Proposed									
										Yes No Yes No									
Tentative tax lot numbers (new tax lots only):										Fire Alarm <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>									
										Fire Suppression <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>									
										Sprinkler <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>									
										Standpipe <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>									

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

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

<b>22</b>	<b>Asbestos Abatement Compliance</b> <i>Choose one.</i>
<input type="checkbox"/> The scope of work requires related asbestos abatement as defined in the regulations of the NYC Department of Environmental Protection (DEP). <input type="checkbox"/> The scope of work does <b>not</b> require related asbestos abatement as defined in the regulations of the NYC DEP. <input type="checkbox"/> The scope of work is exempt from the asbestos requirement as defined in the regulations promulgated by the NYC DEP (15 RCNY 1-23(b)).	

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

<b>24</b>	<b>Comments</b> <i>Place additional comments on an AI-1 form. See Guide for proper incorporation of professional certification statements.</i>
Filing PAA to amend plans	

<b>25</b>	<b>Applicant's Statements and Signatures</b> <i>Required for all applications.</i>
Falsification of any statement is a misdemeanor and is punishable by a fine or imprisonment, or both. It is unlawful to give to a city employee, or for a city employee to accept, any benefit, monetary or otherwise, either as a gratuity for properly performing the job or in exchange for special consideration. Violation is punishable by imprisonment or fine or both. I understand that if I am found after hearing to have knowingly or negligently made a false statement or to have knowingly or negligently falsified or allowed to be falsified any certificate, form, signed statement, application, report or certification of the correction of a violation required under the provisions of this code or of a rule of any agency, I may be barred from filing further applications or documents with the Department. I prepared or supervised the preparation of the construction documents and specifications herewith submitted and to the best of my knowledge and belief, the construction documents and work shown thereon comply with the provisions of the NYC Administrative Code and other applicable laws and rules, <input type="checkbox"/> (I check here) except as set forth in the accompanying documents. I acknowledge that I have read and complied with all instructions pertaining to this application and supplementary schedules submitted. Cluster Development Statement (if applicable) I hereby state that all specifications relating to this job are identical to those previously filed under the group lead job number, except as specified herein.	
Yes No <input type="checkbox"/> <input type="checkbox"/> For initial New Building and Alteration 1 applications filed under the 2008 NYC Building Code only: does this building qualify for high-rise designation? <input type="checkbox"/> <input type="checkbox"/> Directive 14 initial applications only: I certify that the construction documents submitted and all construction documents related to this application do not require a new or amended Certificate of Occupancy as there is no change in use, lots or occupancy.	
Name (please print) _____ Nobutaka Ashihara Signature _____ Date _____ P.E. / R.A. Seal (apply seal, then sign and date over seal)	

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