



NYC DEPT. OF BUILDINGS
CERTIFICATE OF OCCUPANCY
RECEIVED *Must be typewritten.*

DEPT.BLDGS 110222223 Job Number



SC131182027

Scan Code

2011 APR 28 P 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
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
E-Mail		Mobile Telephone
Choose one: <input type="checkbox"/> P.E. <input checked="" type="checkbox"/> R.A. <input type="checkbox"/> Sign Hanger		License Number 014870
<input type="checkbox"/> 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/Carnino	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
E-Mail		Mobile Telephone
Registration Number		

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

<input type="checkbox"/> Initial Filing 5, 7, 11, 12A, 25-26	<input type="checkbox"/> Prior to Approval Actions 25-26	<input type="checkbox"/> Reinstate 24-26
Review is requested under which Building Code?	<input type="checkbox"/> Amend Existing Filing 4A	<input type="checkbox"/> Withdrawal 26
<input type="checkbox"/> 2008 <input type="checkbox"/> 1968 <input type="checkbox"/> Prior to 1968	<input type="checkbox"/> Subsequent Filing 6-7, 8A (Alt-2 only), 11	<input type="checkbox"/> Specified in 4A and 6
Choose <input type="checkbox"/> Standard Plan Examination or Review one: <input type="checkbox"/> Professional Certification PC1, POC1	<input checked="" type="checkbox"/> Post Approval Amendment (PAA) 4A, 6, 24-25	<input type="checkbox"/> Entire Job
<input type="checkbox"/> Professional Cert. of Objections AI1	<input type="checkbox"/> Will PAA affect filing fees? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	4A Indicate existing document number affected by filing: 1
	<input type="checkbox"/> New (Superseding) Applicant 4A, 25-26	

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

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

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 <input type="checkbox"/> BL - Boiler PW1C	<input type="checkbox"/> FS - Fuel Storage PW1C	<input type="checkbox"/> PL - Plumbing PW1B	6E <input type="checkbox"/> CC - Curb Cut 16
<input type="checkbox"/> FA - Fire Alarm	<input type="checkbox"/> FP - Fire Suppression	<input type="checkbox"/> SD - Standpipe PW1B	6F <input type="checkbox"/> OT/ANT - Antenna
<input type="checkbox"/> FB - Fuel Burning PW1C	<input type="checkbox"/> MH - Mechanical	<input type="checkbox"/> SP - Sprinkler PW1B	<input type="checkbox"/> OT/BPP - Builders Pavement Plan 8D
6B <input type="checkbox"/> EQ - Construction Equipment 15	6C <input checked="" type="checkbox"/> OT/GC - General Construction	6D <input type="checkbox"/> OT - Other, describe	<input type="checkbox"/> OT/FPP - Fire Protection Plan
			<input type="checkbox"/> OT/MAR - Marquee 8E, 26B

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

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

8 **Additional Information**

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

9 **Additional Considerations, Limitations or Restrictions**

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"/> Other, specify: _____ <input type="checkbox"/> <input type="checkbox"/> Restrictive Declaration / Easement <i>If yes, 9M</i> <input type="checkbox"/> <input type="checkbox"/> Zoning Exhibit (I, II, III, etc.) <i>If yes, 9N</i> <input type="checkbox"/> <input type="checkbox"/> Requesting legalization of work where no work w/o a permit violations have been issued	9C	<input type="checkbox"/> <input type="checkbox"/> Adult Establishment <i>If yes, plot diagram (except DM)</i> <input type="checkbox"/> <input type="checkbox"/> Compensated Development (Inclusionary Housing) <input type="checkbox"/> <input type="checkbox"/> Low Income Housing (Inclusionary Housing) <input type="checkbox"/> <input type="checkbox"/> Single Room Occupancy (SRO) Multiple Dwelling <input type="checkbox"/> <input type="checkbox"/> Filing includes Lot Merger / Reapportionment <i>If yes, 17</i>	9D	<input type="checkbox"/> <input type="checkbox"/> Includes permanent removal of standpipe, sprinkler or fire suppression related systems	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	9F	Structural Peer Reviewer License No. P.E.
9G	<input type="checkbox"/> <input type="checkbox"/> Landmark <input type="checkbox"/> <input type="checkbox"/> "Little E" Hazmat Site <input type="checkbox"/> <input type="checkbox"/> Unmapped Street <input type="checkbox"/> <input type="checkbox"/> Filing to Address Violation(s) <i>If yes, 9H</i>		9H	9I	9J	9K	9L	9M	9N	9O	
9L	<input type="checkbox"/> <input type="checkbox"/> Work includes lighting fixture and/or controls, installation or replacement. [§ECC 404 and 505]		9M CRFN(s) <i>Restrictive Declaration / Easement (max. 4):</i>	9N CRFN(s) <i>Zoning Exhibit (I, II, III, etc. - max. 4):</i>	9O						

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

<input type="checkbox"/> To the best of my knowledge, belief and professional judgment, all work under this application is in compliance with the NYCECC* <input type="checkbox"/> Energy analysis is on another job number: _____
Yes No <input type="checkbox"/> <input type="checkbox"/> This application is, or is part of, a project that utilizes trade-offs among different major systems <input type="checkbox"/> <input type="checkbox"/> This application utilizes trade-offs within a single major system
<input type="checkbox"/> To the best of my knowledge, belief and professional judgment, all work under this application is exempt from the NYCECC* in accordance with one of the following: <i>Choose one</i> <input type="checkbox"/> The work is an alteration of a State or National historic building. <input type="checkbox"/> The scope of work is entirely in a "low-energy building" and is limited to the building envelope. <input type="checkbox"/> The scope of work does not affect the energy use of the building. <input type="checkbox"/> This is a post-approval amendment and exempt under a prior edition of the energy code. See statement of exemption on attached drawings.

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

11	Job Description	11A	Related DOB Job Numbers
<hr/> <hr/> <hr/> <hr/>			

11B Primary application job no.

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

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

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

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

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

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

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

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

Yes No

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

The scope of work requires related asbestos abatement as defined in the regulations of the NYC Department of Environmental Protection (DEP).

The scope of work does not require related asbestos abatement as defined in the regulations of the NYC DEP.

The scope of work is exempt from the asbestos requirement as defined in the regulations promulgated by the NYC DEP (15 RCNY 1-23(b)).

23 Sign

Purpose:

Type:

Estimated Cost: \$

 Advertising Illuminated 23A

Total Square Feet:

 Non-Advertising Non-Illuminated

Height above Curb:

ft. in.

Location: Ground Roof 23B Wall

Height above Roof:

ft. in.

Yes No

Is sign inside building line? If no, sign projects by: ft. in.

Designed for changeable copy? If no, 23C

Does an OAC have an interest in this sign or location? If yes, 23G

Within 900' and within view of an arterial highway? If yes, 23D

Within 200' and within view of a park 1/2 acre or more? If yes, 23E

► If answer is "yes" to either of the above two questions and this is an advertising sign, OAC sign number is required in section 23F

23A Illuminated type: Direct Flashing Indirect

Yes No

 If sign projects beyond building line, is owner billed for annual permit? If no, specify in 26B23B Is roof sign tight, closed or solid?

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

23D Distance from Arterial Highway: ft.

23E Distance from Park 1/2 acre or more: ft.

23F OAC Sign Number:

23G OAC Registration Number

24 Comments Place additional comments on an AI-1 form. See Guide for proper incorporation of professional certification statements.

Filing PAA to amend plans

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

Falsification of any statement is a misdemeanor and is punishable by a fine or imprisonment, or both. It is unlawful to give to a city employee, or for a city employee to accept, any benefit, monetary or otherwise, either as a gratuity for 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 or 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. (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 supplemental 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

 For initial New Building and Alteration 1 applications filed under the 2008 NYC Building Code only: does this building qualify for high-rise designation? Directive 14 initial applications only: I certify that the construction documents submitted and all construction documents related to this application do not require a new or amended Certificate of Occupancy as there is no change in use, exits, or occupancy.Name (please print)
Nobutaka Ashihara

Signature

Date
Apr 25 '11

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

26 Property Owner's Statements and Signatures

Falsification of any statement is a misdemeanor and is punishable by a fine or imprisonment, or both. It is unlawful to give to a city employee, or for a city employee to accept, any benefit, monetary or otherwise, either as a gratuity for properly performing the job or in exchange for special consideration. Violation is punishable by imprisonment or fine or both. I understand that if I am found after hearing to have knowingly or negligently made a false statement or to have knowingly or negligently falsified or allowed to be falsified any certificate, form, signed statement, application, report or certification of the correction of a violation required under the provisions of this code or of a rule of any agency, I may be barred from filing further applications or documents with the Department. Furthermore, I understand that I am responsible for insuring that a final inspection be performed when the permitted work is complete, and that a satisfactory report of final inspection be submitted, along with all required submittal documents, so that the NYC Department of Buildings may issue a letter of completion or certificate of occupancy within the time prescribed by law

I have authorized the applicant to file this application for the work specified herein and all future amendments. I will not knowingly authorize any work that is not in compliance with the New York City Energy Conservation Code (NYCECC)

Yes No

Fee Deferred Request Statement

I hereby request a fee deferral for the work proposed on this application and understand that all fees must be paid before issuance of any Certificate of Occupancy or job sign off.

Fee Exemption Request Statement

In accordance with §28-112.1 of the NYC Administrative Code I hereby state that the proposed work involves a building or property owned or used exclusively for the purposes indicated in such section

Owner's Certifications Regarding Occupied Housing

The site of the building to be altered or demolished, or the site of the new building to be constructed, contains one or more occupied dwelling units that will remain occupied during construction. These occupied dwelling units have been clearly identified on the submitted construction documents

The site of the building to be altered or demolished, or the site of the new building to be constructed, contains occupied housing accommodations subject to rent control or rent stabilization under Chapters 3 and 4 of Title 26 of the New York City Administrative Code. *If yes, select one of the following:*

The owner is not required to notify the Division of Housing and Community Renewal (DHCR) of the owner's intention to file because the nature and scope of the work proposed, pursuant to DHCR regulations, does not require notification

The owner has notified the Division of Housing and Community Renewal (DHCR) of its intention to file such construction documents/apply for such permit and has complied with all requirements imposed by the regulations of such agency as preconditions for such (filing/application)

Provide date DHCR notified:

Owner's Certification for Adult Establishments

I authorize and intend to create, enlarge, or extend an establishment with adult activity and/or adult material as defined in ZR §12-10 "adult establishment" or related sign at the subject premises

Owner's Certification for Directive 14 Applications (if applicable)

I have read and am fully aware of the applicant's statement that the construction documents submitted and all construction documents related to this application will not require a new or amended Certificate of Occupancy as there is no change in use, exits, or occupancy. Furthermore, I understand that I am responsible for retaining a qualified design professional to perform a final inspection when the permitted work is complete and this professional must submit a satisfactory final inspection report to the NYC Department of Buildings within the time following inspection prescribed by Department rule

Owner type: Individual DCAS HHC NYCHA
 Partnership DOE HPD NYS
 Corporation 26A Other Government
 Condo Unit Owner or Co-Op Tenant-shareholder 26A

Is the owner a non-profit organization? Yes No

Name (please print):

Relationship to Owner:

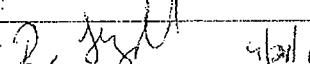
Business Name/Agency:

Street Address:

City: _____ State: _____ Zip: _____

Telephone Number: _____ Fax: _____

E-Mail Address: _____

Signature and Date  4/21/11

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

Name (please print):

Title: _____

Street Address:

City: _____ State: _____ Zip: _____

Telephone Number: _____ Fax: _____

E-Mail Address: _____

Signature and Date 

**Signature required for authorized representative of Condo or Co-Op board. Second officer signature not required for corporations.*

26B Lessee Responsible for Annual Sign or Marquee Permit

Name (please print):

Relationship to Owner:

Business Name/Agency:

Street Address:

City: _____ State: _____ Zip: _____

Telephone Number: _____ Fax: _____

E-Mail Address: _____

Internal Use Only

Pre-Filer Name

Pre-Filer Signature. _____ Date. _____

Cost Estimate: \$

Amount Due: \$ _____ Verified by Date

Initial Amount Paid: \$

Balance Due: \$

Stamps, Certifications and Notes