



# PW1: Plan / Work Application

Must be typewritten.



## 1 Location Information Required for all applications.

House No(s) **16** Street Name **EAST 30TH STREET**

Borough **MANHATTAN** Block **00859** Lot **00075** BIN **1016943** C.B. No. **105**

Work on Floor(s) **1 to 20, SUB, CEL, ROF** 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) 000-0000**

Business Address **132 NASSAU STREET, 309**

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 **SULLIVAN/SILVES/TYME**

First Name **JOHN/JOE/ROB**

Middle Initial

Business Name **DOMANI CONSULTING, INC**

Business Telephone **(516) 256-0317**

Business Address **226 E MERRICK RD**

Business Fax **(516) 256-0335**

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

Review is requested under which Building Code?

2008  1968  Prior to 1968

Choose  Standard Plan Examination or Review one:  Professional Certification PC1, POC1

Self Certification of Objections AI1

Prior to Approval Actions 25-26

Amend Existing Filing 4A

Subsequent Filing 6-7, 8A (Alt-2 only), 11

Post Approval Amendment (PAA) 4A, 6, 24-25

Will PAA affect filing fees?  Yes  No

New Applicant 4A, 25-26

Reinstatement 24-26

Withdrawal 25-26

Specified in 4A and 6

Entire Job

4A Indicate existing document number affected by filing:

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

Alteration Type 1 6A-E, 8B-C, 9-10, 12, 13C-F & 14, 18-20, 22, PW1A, PD1, select all that apply:

12, 13C-F, 14, 18-19, PW1A, PD1

Change in Exits

Alteration Type 1, OT: "No Work" 8C, 9-10 &

Full Demolition 6B, 8D, 9B-D, & 13D-E, 14, 21A, 22

Change in Number of Stories

Alteration Type 2 5A, 6A-D, 8A-B, 9-10, &

Sign 5A, 6B-D, 9B, 22-23

Change in Number of Dwelling Units

Alteration Type 3 5A, 6B-F, 8C, 9-10, 13C-E, 22

Subdivision 9B, 12A-B

Change in Occupancy / Use

New Building 6A-E, 8F-G, 9A-C, 10, 12, 13A-E

Condominium  Improved 17

Change inconsistent with current Cert. of Occup.

(13B: 2008 Code only), 14, 18-20, PW1A, PD1

5A Directive 14 acceptance requested?

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

6E  CC - Curb Cut 16

FA - Fire Alarm

FP - Fire Suppression

SD - Standpipe PW1B

6F  OT/ANT - Antenna

FB - Fuel Burning PW1C

MH - Mechanical

SP - Sprinkler PW1B

OT/BPP - Builders Pavement Plan 8D

6B  EQ - Construction Equipment 15

6C  OT/GC - General Construction

6D  OT - Other, describe:  
**ZONING**

OT/FPP - Fire Protection Plan  
 OT/MAR - Marquee 8E, 26B

DOB Reference Number: T00000065703-000176

User Ref ID: 16E30THST

**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:
8G Total Construction Floor Area: 50984 sq. ft.			Additional Construction Floor Area: sq. ft.	
Project lead job no. _____				

## 9 Additional Considerations, Limitations or Restrictions

Yes No		Yes No		9F Structural Peer Reviewer License No. P.E.	
9A <input type="checkbox"/> <input checked="" type="checkbox"/> Structural peer review required per BC §1627 <i>If yes, 9F</i>					
9B <input type="checkbox"/> <input checked="" type="checkbox"/> Filed to Comply with Local Law <i>If yes, 9G</i>		<input type="checkbox"/> <input checked="" type="checkbox"/> Landmark		9G Local Law No(s)	
<input type="checkbox"/> <input checked="" type="checkbox"/> Other, specify: _____		<input type="checkbox"/> <input checked="" type="checkbox"/> "Little E" Hazmat Site		Year _____	
<input type="checkbox"/> <input checked="" type="checkbox"/> Restrictive Declaration / Easement <i>If yes, 9L</i>		<input type="checkbox"/> <input checked="" type="checkbox"/> Unmapped Street			
<input type="checkbox"/> <input checked="" type="checkbox"/> Zoning Exhibit (I, II, III, etc.) <i>If yes, 9M</i>		<input type="checkbox"/> <input checked="" type="checkbox"/> Filing to Address Violation(s) <i>If yes, 9H</i>		9H Violation No(s) _____	
<input type="checkbox"/> <input checked="" type="checkbox"/> Requesting legalization of work on or after Jan. 1, 1989 where no work w/o a permit violations have been issued					
9C <input type="checkbox"/> <input checked="" type="checkbox"/> Adult Establishment <i>If yes, plot diagram (except DM)</i>		<input type="checkbox"/> <input checked="" type="checkbox"/> Included in LMCCC		9I BSA Calendar No(s) _____	
<input type="checkbox"/> <input checked="" type="checkbox"/> Compensated Development (Inclusionary Housing)		<input type="checkbox"/> <input checked="" type="checkbox"/> Infill Zoning			
<input type="checkbox"/> <input checked="" type="checkbox"/> Low Income Housing (Inclusionary Housing)		<input checked="" type="checkbox"/> <input type="checkbox"/> Loft Board			
<input type="checkbox"/> <input checked="" type="checkbox"/> Single Room Occupancy (SRO) Multiple Dwelling		<input type="checkbox"/> <input checked="" type="checkbox"/> Quality Housing		9J CPC Calendar No(s) _____	
<input type="checkbox"/> <input checked="" type="checkbox"/> Filing includes Lot Merger / Reapportionment <i>If yes, 17</i>		<input checked="" 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 CRFN(s) <i>Restrictive Declaration / Easement (max. 4):</i>					
9M CRFN(s) <i>Zoning Exhibit (I, II, III, etc. - max. 4):</i>					

10 | **ECCCNYS Compliance** Energy Conservation Construction Code of NYS

**10A Specific Reason for ECCNYS Exemption**

To the best of my knowledge, belief and professional judgment, this application is in compliance with the ECCCNYS.\*

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

The work proposed in this application is exempt from the ECCCNYS because per Chapter 1 of the ECCCNYS it is:\*

- An alteration but not a substantial alteration
- Work in a historic building
- Work in an exempt building (specify category/reasons in 104)\*\*

\*I understand the Department may require supporting analyses and documentation.  
\*\*S101.5.2.1 of the ECCCNY only exempts thermal envelope provisions.

## 11 Job Description

## FILED ARCHITECTURAL AND ZONING

**11A Related DOB Job Numbers**


---

**11B Primary application job no.**

## 12 Zoning Characteristics

12A	District(s) C5 - 2		
Overlay(s)			
Special Dist.(s)			
Map Number 8D			

12B Street legal width: 60 ft.			
Street Status: <input checked="" type="checkbox"/> Public <input type="checkbox"/> Private			
If the zoning lot includes multiple tax lots, list all tax lots here ►			

12C Proposed: Use*	Zoning Floor Area	District	FAR
COMMERCIAL	37030 sq. ft.	C5 - 2	10
	sq. ft.		
Proposed Totals	37030 sq. ft.		10.0
Existing Total	sq. ft.		

Proposed Lot Details:	Proposed Yard Details:
Lot Type: <input type="checkbox"/> Corner <input checked="" type="checkbox"/> Interior <input type="checkbox"/> Through	Check here if no yards: <input type="checkbox"/> or
Lot Coverage 82 %	Front Yard 15 ft.
Lot Area 3 sq. ft.	Rear Yard 20 ft.
Lot Width 37 ft.	Rear Yard Equivalent 1 ft.
Proposed Other Details:	Side Yard 1 1 ft.
Enclosed Parking? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Side Yard 2 1 ft.
If yes, no. of parking spaces:	
Perimeter Wall Height 0 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.

13A Primary structural system, choose one:	<input type="checkbox"/> Masonry	<input checked="" 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 checked="" type="checkbox"/> Other
Structural Occupancy Category		2008 Code Designations?	Mixed use building? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Seismic Design Category		2008 Code Designations?	
13C Occupancy Classification*	<input type="checkbox"/> Yes <input type="checkbox"/> No	R-1 <input checked="" type="checkbox"/> Yes**	13E Existing Proposed
Construction Classification	<input type="checkbox"/> Yes <input type="checkbox"/> No	1-C <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Building Height ft. 196 ft.
Multiple Dwelling Classification		HAEB 	Building Stories 21
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.

Not Applicable  On-Site  Off-Site  Under 300 cubic yards

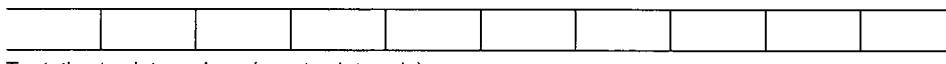
## 15 Construction Equipment

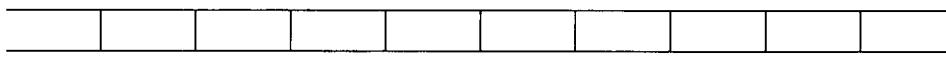
<input type="checkbox"/> Chute	<input type="checkbox"/> Sidewalk Shed	Construction Material: _____
<input type="checkbox"/> Fence	Size: _____ linear ft.	BSA/MEA Approval No. _____
<input type="checkbox"/> Supported Scaffold	<input type="checkbox"/> Other: _____	

## 16 Curb Cut Description

Size of cut (with splays): \_\_\_\_\_ ft.  
Distance to nearest corner: \_\_\_\_\_ ft.  
on street: \_\_\_\_\_

## 17 Tax Lot Characteristics

Original tax lots being merged or reapportioned (if applicable):  


Tentative tax lot numbers (new tax lots only):  


## 18 Fire Protection Equipment

Existing	Proposed
Yes	No
<input type="checkbox"/> Fire Alarm	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input checked="" type="checkbox"/>
<input type="checkbox"/> Fire Suppression	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input checked="" type="checkbox"/>
<input type="checkbox"/> Sprinkler	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input checked="" type="checkbox"/>
<input type="checkbox"/> Standpipe	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input checked="" type="checkbox"/>

## 19 Open Spaces

Plaza Area	Existing	Proposed	Arcade Area	Existing	Proposed
	sq. ft.	sq. ft.		sq. ft.	sq. ft.
Parking Area	sq. ft.	sq. ft.	Parking Spaces		
Loading Berths	sq. ft.	sq. ft.	Loading Berths		

## 20 Site Characteristics

Yes No  
  Tidal / Fresh Water Wetlands  
  Urban Renewal  
  Fire District  
  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(a)).
**23 Sign**

Purpose:	Type:	Estimated Cost: \$
<input type="checkbox"/> Advertising	<input type="checkbox"/> Illuminated 23A	Total Square Feet:
<input type="checkbox"/> Non-Advertising	<input type="checkbox"/> Non-Illuminated	Height above Curb: ft. in.
Location: <input type="checkbox"/> Ground <input type="checkbox"/> Roof 23B <input type="checkbox"/> 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.

**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 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 understand or supervise the preparation of the construction documents and specifications herewith submitted and to the best of my knowledge and belief, the construction documents and work shown thereon comply with the provisions of the NYC Administrative Code and other applicable laws and rules,  (←check here if) except as set forth in the accompanying documents. I acknowledge that I have read and complied with all instructions pertaining to this application and supplementary 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

ASHIBARA

Signature

Date

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

DOB Reference Number: T00000065703-000176

User Ref ID: 16E30THST

## 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, may be barred from filing further applications or documents with the Department.

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 Energy Conservation Construction Code of NYS (ECCCNYS).

Yes No

**Energy Conservation Construction Code of NYS**  
Does the proposed work constitute part or all of a replacement of 50% or more of a system or subsystem at this location in any consecutive 12 month period?

**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 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): **DANNY LEOPOLD**

Relationship to Owner:

Business Name/Agency: **LHG, LLC**

Street Address: **62 W 45TH STREET, 8TH FLOOR**

City: **NEW YORK** State: **NY** Zip: **10036**

Telephone Number: **(347) 203-1634** Fax:

E-Mail Address:

Signature and Date ► *Danny Leopold* 6/24/08

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

Name (please print): **DAVID DABAKAROV**

Title: **AUTH. SIGNATOR**

Street Address: **62 WEST 45TH STREET, 8 FLOOR**

City: **NEW YORK** State: **NY** Zip: **10036**

Telephone Number: **(347) 203-1634** Fax:

E-Mail Address:

Signature and Date\* ► *Danny Leopold* 6/24/08

*\*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: