

CITY OF NEW YORK

MANHATTAN COMMUNITY BOARD FOUR

330 West 42nd Street, 26th floor New York, NY 10036
tel: 212-736-4536 fax: 212-947-9512
www.nyc.gov/mcb4

Delores Rubin
Chair

Jesse Bodine
District Manager

Rick Chandler
Commissioner
NYC Department of Buildings
280 Broadway
New York, NY 10007

June 21, 2016

**Re: 317 West 35th Street (Block 759 Lot 30)
And 319 West 35th Street (Block 759 Lot 31)
Illegal Demolition of Residential Buildings**

Dear Commissioner Chandler:

At Manhattan Community Board 4's (MCB4) June 1, 2016 Board members discussed 317-319 West 35th Street, two five story residential buildings located in the Special Garment Center District.

This is the fifth site on which MCB4 has seen illegal demolition since December 2015. **These sites encompass nine buildings and 90 units and span through the Garment Center, West Chelsea, Hudson Yards, and Clinton Special Zoning Districts.** The affordable housing stock of our neighborhoods is under threat. The Special District Zoning text prohibits demolition of residential buildings, as a means of preserving affordable housing for the long-term community residents of those buildings. The lack of enforcement from the Department of Buildings (DOB) allowed for the loss of at least 90 affordable apartments in the past 6 months.

By a vote of 41 in favor, 0 opposed, 0 abstaining and 0 present but not eligible to vote, MCB4 voted to request that DOB immediately place a Stop Work Order on 317 and 319 West 35th Street and conduct an audit of these buildings.

Background

317 and 319 West 35th Street are both five story tenement buildings in the Special Garment Center District. 317 West 35th Street contains 18 units, and 319 West 35th Street contains 10 units. On May 31, 2016, MCB4 received a notice of demolition from a demolition contractor stating that these buildings were going to be demolished.¹ The Board conducted research on DOB's Building Information System (BIS) and found that 317 and 319 West 35th Street had both been approved for demolition under job numbers 122659088 and 122659097, respectively. These buildings are located in Sub Area P-2 of the Garment Center Special District, where

¹ See Appendix A – Notice of Demolition, dated May 25, 2016

residential buildings cannot be demolished. This is the fifth time since December that DOB has approved a building demolition within Community District 4, where it is not permitted.

Protections against Demolition of Residential Buildings

Under provisions of the Special Garment Center Zoning District, 317 and 319 West 35th Street are subject to demolition restrictions, per Section 121-50 of the City’s Zoning Resolution. These restrictions were agreed to as part of the Hudson Yards Rezoning in 2005, were resolved as part of the Western Rail Yards negotiations in 2009, certified for ULURP in 2010, and adopted on October 27, 2010.

As per those regulations, buildings exempt from this requirement must be:

- under an active government-funded program or
- a hotel or
- a school dormitory or
- a clubhouse

317-319 West 35th Street, being in none of the above categories, would not be exempt.

Buildings can also be demolished if they:

- have received a Certificate of No Harassment, **and**
- have been deemed unsafe or
- cannot feasibly be rehabilitated through any government funding program

A Certificate of No Harassment could not be found for the property. Furthermore, the buildings were not deemed structurally unsound.

False and Contradictory DOB Filings

On March 1, 2016, the owner of 317 and 319 West 35th Street filed two job applications for the demolition of both buildings. Each of these applications included two PW1 forms which withheld different pieces of information². In both cases, the second PW1 form was filed as a Post Approval Action (PAA) but was submitted on the same day.

Address	Job Number	Issues/Contradictions with PW1 Filings	
317 West 35 th Street	122659088	1 st	<ul style="list-style-type: none"> • Did not state change in the number of dwelling units, occupancy, or number of stories • Stated that the demolition would only be for part of the structure • Stated that the scope would require asbestos abatement • Stated that there are no occupied units subject to Rent Control or Rent Stabilization
		2 nd	<ul style="list-style-type: none"> • Did not state change in the number of dwelling units, occupancy, or number of stories • Did not provide Occupancy Classification • Did not include building height, stories, or dwelling units • Did not include demolition details (mechanical means, entire structure of part of structure)

² See Appendix B PW1 forms dated February 29, 2016

			<ul style="list-style-type: none"> • Did not provide information about asbestos • Did not answer question regarding occupied units subject to Rent Control or Rent Stabilization
319 West 35 th Street	122659097	1 st	<ul style="list-style-type: none"> • Did not state change in the number of dwelling units, occupancy, or number of stories • Stated that the building is in the SGCD • Stated that the scope would require asbestos abatement • Stated that there are no occupied units subject to Rent Control or Rent Stabilization
		2 nd	<ul style="list-style-type: none"> • Did not list any zoning information • Did not provide Occupancy Classification • Did not include building height, stories, or dwelling units • Did not include demolition details (mechanical means, entire structure of part of structure) • Did not provide information about asbestos • Did not answer question regarding occupied housing subject to Rent Control or Rent Stabilization

Despite the inconsistency and lack of information in the forms submitted by the owner, DOB approved both applications on the same day in which they were submitted.

Conclusion

MCB4 has written to DOB every time another protected residential building that has come under threat by an owner attempting to circumvent the requirements of the Zoning Resolution that prohibit demolition.

In response to this latest case, the Board informed John Waldman at DOB and contacted Senator Brad Hoylman, Assembly Member Richard Gottfried, and Councilmember Corey Johnson and was told that the demolition had not been approved. However, BIS clearly indicates that the demolition of both buildings received DOB approval on March 1, 2016³. DOB has responded that the file is being audited. **What is there to audit? The demolition of a residential building in Subarea P-2 of the Garment Center Special Zoning District is prohibited, unless unsafe.**

The Board requests that DOB rescind plan approval, revoke any permits issued by DOB, and commence an audit on the buildings.

Sincerely,



Delores Rubin
Board Chair



Jean Daniel Noland
Chair, Clinton/Hell’s Kitchen Land
Use Committee

³ See Appendix C and D – DOB BIS screenshots, dated June 2, 2016

cc: Senator B. Hoylman
Assembly Member R. Gottfried
Borough President G. Brewer
Councilmember C. Johnson
V. Been, HPD
M. Rebholz, DOB
D. Rand, HPD

Expedite-Dem Inc.
99 Darcey Avenue
Staten Island, New York 10314
Telephone: 718-477-4444

RECEIVED MAY 25 REC'D

COMMUNITY BOARD NOTIFICATION

CERTIFIED MAIL: 7013 2250 0002 0957 5590

CITY OF NEW YORK DEPARTMENT OF BUILDINGS

APPLICANT'S STATEMENT OF NOTIFICATION TO COMMUNITY BOARD

ADDRESS: 317 West 35th St
Manhattan NY 10001
Block: 759 Lot: 30

BOROUGH: Manhattan

We hereby state that, in accordance with Department Of Buildings Code Section 3306.3.2, we are notifying Community Board **04** Borough of **Manhattan** regarding the demolition project under their jurisdiction.

SIGNED:



Sharon Compton

Expedite-Dem Inc.
99 Darcey Avenue
Staten Island, New York 10314
Telephone: 718-477-4444

RECEIVED MAY 25 REC'D

COMMUNITY BOARD NOTIFICATION

CERTIFIED MAIL: 7013 2250 0002 0957 5651

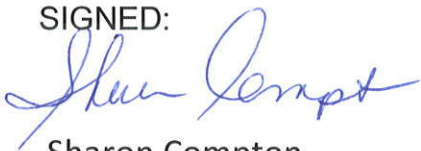
CITY OF NEW YORK DEPARTMENT OF BUILDINGS
APPLICANT'S STATEMENT OF NOTIFICATION TO COMMUNITY BOARD

ADDRESS: 319 West 35th St
Manhattan, NY 10001
Block: 759 Lot: 29

BOROUGH: Manhattan

We hereby state that, in accordance with Department Of Buildings Code Section 3306.3.2, we are notifying Community Board **04** Borough of **Manhattan** regarding the demolition project under their jurisdiction.

SIGNED:



Sharon Compton



PW1: Plan / Work Application

Must be typewritten.



41

1 Location Information Required for all applications.

House No(s) 317 Street Name WEST 35TH STREET
Borough MANHATTAN Block 00759 Lot 00030 BIN 1013573 C.B. No. 104
Work on Floor(s) 001 to 005 Apt. / Condo No(s)

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

Last Name WANG First Name JIEMING Middle Initial
Business Name LMW ENGINEERING GROUP, LLC Business Telephone (908) 862-7600
Business Address 125 LEXINGTON AVENUE Business Fax (908) 862-8998
City LINDEN State NJ Zip 07036 Mobile Telephone
E-Mail JWANG@LMW-ENG.COM License Number 074354
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 SWITA First Name HENRY Middle Initial
Business Name EXPEDITE DEM INC. Business Telephone (718) 477-4444
Business Address 99 DARCEY AVENUE Business Fax (718) 477-5512
City STATEN ISLAND State NY Zip 10314 Mobile Telephone
E-Mail EXPEDITEDEMINC@AOL.COM Registration Number 002099

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

[X] Initial Filing 5, 7, 11, 12A, 25-26
Choose only one:
[] Standard Plan Examination or Review
[] Professional Certification PC1, POC1
[] Professional Certification of Objections A11
[] 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 (Superseding) Applicant 4A, 25-26
[] Reinstatement 24-26
[] Withdrawal 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 or Alteration Type 1 required to meet New Building requirements (28-101.4.5) 14, 20, 22
6A-E, 8B-C, 9-10, 12, 13C-F, 14, 18-20, 22 & PW1A, PD1
[] Alteration Type 2 5A, 6A-D, 8A-B, 9-10, 13C-E, & 14, 20, 22
[] Alteration Type 3 5A, 6B-F, 8C, 9-10, 13C-E, 20, 22
[] New Building 6A-E, 8F-G, 9A, 9C-K, 10, 12 & 13A-E, 14, 18-20, PW1A, PD1
[] Sign 5A, 6B-D, 9A, 9D, 22-23
[X] Full Demolition 6B, 8D, 9A & 9C-D, 9K, 13D-E, 14, 21A, 22
[] Subdivision 9A, 9D, 12A-B
[] Condominium [] Improved 17
5A Directive 14 acceptance requested? [] Yes [X] 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
[] FA - Fire Alarm [] FP - Fire Suppression [] SD - Standpipe PW1B
[] FB - Fuel Burning PW1C [] MH - Mechanical [] SP - Sprinkler PW1B
6B [X] EQ - Construction Equipment 15
6C [] OT/GC - General Construction
6D [] OT - Other, describe:
6E [] CC - Curb Cut 16
[] OT/LAN - Landscape
6F [] OT/ANT - Antenna
[] OT/BPP - Builders Pavement Plan 8D
[] OT/FPP - Fire Protection Plan
[] OT/MAR - Marquee 8E, 26B

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

Are plans being submitted with this PW1? Yes No *If yes, do the plans include:* FO — Foundation EN — Energy Analysis

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: 25 linear ft.
								<input type="checkbox"/> Yes 12, PD1	8E	Height: ft. Width: ft.
								<input type="checkbox"/> Horizontal <input type="checkbox"/> Vertical	8F	Total Construction Floor Area: sq. ft.
								Additional Construction Floor Area: sq. ft.		

9 Additional Considerations, Limitations or Restrictions

9A Review is requested under which building code? 2014 2008 1968 Prior to 1968

9B	<input type="checkbox"/> Alteration required to meet New Building requirements (28-101.4.5) <i>If yes, 13A-B</i>	<input type="checkbox"/> Change in number of dwelling units
	<input type="checkbox"/> Alteration is a major change to exits	<input type="checkbox"/> Change in occupancy / use
9C	<input checked="" type="checkbox"/> Façade Alteration	<input type="checkbox"/> Change is inconsistent with current certificate of occupancy
	<input checked="" type="checkbox"/> Adult Establishment <i>If yes, plot diagram (except DM)</i>	<input type="checkbox"/> Change in number of stories
	<input checked="" type="checkbox"/> Compensated Development (Inclusionary Housing)	<input type="checkbox"/> Infill Zoning
	<input checked="" type="checkbox"/> Low Income Housing (Inclusionary Housing)	<input type="checkbox"/> Loft Board
	<input checked="" type="checkbox"/> Single Room Occupancy (SRO) Multiple Dwelling	<input type="checkbox"/> Quality Housing
	<input type="checkbox"/> Filing includes Lot Merger / Reapportionment <i>If yes, 17</i>	<input type="checkbox"/> Site Safety Job/Project
9D	<input checked="" type="checkbox"/> Landmark	<input type="checkbox"/> Included in LMCCC
	<input checked="" type="checkbox"/> Little "E" or RD Site	<input type="checkbox"/> Filing to address violations (list #s—max. 5):
	<input checked="" type="checkbox"/> Unmapped/CCO Street	
	<input checked="" type="checkbox"/> Requesting legalization of work where no work without a permit violations have been issued	
	<input type="checkbox"/> Other (please specify on line provided below):	<input type="checkbox"/> Filing to comply with Local Laws (list #s—max. 2)
	<input type="checkbox"/> CRFN(s) Restrictive Declaration / Easement (max. 4):	
	<input type="checkbox"/> CRFN(s) Zoning Exhibit (I, II, III, etc. - max. 4):	
9E	<input checked="" type="checkbox"/> BSA Calendar Numbers (max. 5):	
9F	<input checked="" type="checkbox"/> CPC Calendar Numbers (max. 5):	
9G	<input type="checkbox"/> Work includes lighting fixture and/or controls, installation or replacement. [ECC §404 and §505]	
9H	<input type="checkbox"/> Work includes modular construction under New York State jurisdiction	9I High Rise Team tracking #:
	<input type="checkbox"/> Work includes modular construction under New York City jurisdiction	
9J	<input type="checkbox"/> Structural peer review required per BC 16. <i>If yes, provide NYS P.E. license number.</i>	
9K	<input checked="" type="checkbox"/> Work includes permanent removal of standpipe, sprinkler or fire suppression related systems	
9L	<input type="checkbox"/> Work includes partial demolition as defined in AC §28-101.5, or the raising/moving of a building <i>If yes, 21B</i>	
	<input type="checkbox"/> Structural stability affected by proposed work	

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): NYCECC ASHRAE
Energy Analysis (choose one): Tabular Analysis REScheck COMcheck Energy Modeling (EN1)

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

- The work is an alteration of a State or National historic building.
- The scope of the work is entirely in a "low-energy building" and is limited to the building envelope.
- The entire scope of work involves a temporary structure and/or one or more of the following work types: FA, FP, SD, SP, FS, EQ, CC, OT/BPP, OT/FPP. Other work types are not exempt.
- This is a post-approval amendment and exempt under a prior edition of the energy code. See statement of exemption on attached drawings.

11 Job Description	11A Related DOB Job Numbers
---------------------------	------------------------------------

FULL DEMOLITION OF FIVE STORY APARTMENT BUILDING, USING HAND AND MECHANICAL MANES.

11B Primary application job no.

12 Zoning Characteristics

<p>12A District(s) C6-4M</p> <p>Overlay(s)</p> <p>Special Dist.(s) GC</p> <p>Map Number 8D</p>	<p>12B Street legal width: _____ ft.</p> <p>Street Status: <input type="checkbox"/> Public <input type="checkbox"/> Private</p> <p><i>If the zoning lot includes multiple tax lots, list all tax lots here ▶</i></p>																																													
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th style="width:15%;">12C Proposed: Use*</th> <th style="width:15%;">Zoning</th> <th style="width:15%;">Floor Area</th> <th style="width:15%;">District</th> <th style="width:15%;">FAR</th> </tr> <tr> <td> </td> <td> </td> <td style="text-align: center;">sq. ft.</td> <td> </td> <td> </td> </tr> <tr> <td> </td> <td> </td> <td style="text-align: center;">sq. ft.</td> <td> </td> <td> </td> </tr> <tr> <td> </td> <td> </td> <td style="text-align: center;">sq. ft.</td> <td> </td> <td> </td> </tr> <tr> <td> </td> <td> </td> <td style="text-align: center;">sq. ft.</td> <td> </td> <td> </td> </tr> <tr> <td> </td> <td> </td> <td style="text-align: center;">sq. ft.</td> <td> </td> <td> </td> </tr> <tr> <td> </td> <td> </td> <td style="text-align: center;">sq. ft.</td> <td> </td> <td> </td> </tr> <tr> <td>Proposed Totals</td> <td> </td> <td style="text-align: center;">sq. ft.</td> <td style="background-color: #cccccc;"></td> <td> </td> </tr> <tr> <td>Existing Total</td> <td> </td> <td style="text-align: center;">sq. ft.</td> <td style="background-color: #cccccc;"></td> <td> </td> </tr> </table>	12C Proposed: Use*	Zoning	Floor Area	District	FAR			sq. ft.					sq. ft.					sq. ft.					sq. ft.					sq. ft.					sq. ft.			Proposed Totals		sq. ft.			Existing Total		sq. ft.			<p>Proposed Lot Details:</p> <p>Lot Type: <input type="checkbox"/> Corner <input type="checkbox"/> Interior <input type="checkbox"/> Through</p> <p>Lot Coverage _____ %</p> <p>Lot Area _____ sq. ft.</p> <p>Lot Width _____ ft.</p> <p>Proposed Other Details:</p> <p>Enclosed Parking? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p><i>If yes, no. of parking spaces:</i> _____</p> <p>Perimeter Wall Height _____ ft.</p>
12C Proposed: Use*	Zoning	Floor Area	District	FAR																																										
		sq. ft.																																												
		sq. ft.																																												
		sq. ft.																																												
		sq. ft.																																												
		sq. ft.																																												
		sq. ft.																																												
Proposed Totals		sq. ft.																																												
Existing Total		sq. ft.																																												
<p>Proposed Yard Details:</p> <p>Check here if no yards: <input type="checkbox"/> or</p> <p>Front Yard _____ ft.</p> <p>Rear Yard _____ ft.</p> <p>Rear Yard Equivalent _____ ft.</p> <p>Side Yard 1 _____ ft.</p> <p>Side Yard 2 _____ ft.</p>																																														

*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 2014 Code equivalents only. †Residential w/other use.

<p>13A Primary structural system, choose one:</p> <p><input type="checkbox"/> Masonry <input type="checkbox"/> Concrete (CIP) <input type="checkbox"/> Concrete (Precast)</p> <p><input type="checkbox"/> Wood <input type="checkbox"/> Steel (Structural) <input type="checkbox"/> Steel (Cold-Formed) <input type="checkbox"/> Steel (Encased in Concrete)</p>	<p>13D Building Type: <input type="checkbox"/> 1, 2, or 3 Family <input checked="" type="checkbox"/> Other</p> <p>Mixed use building?† <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>																																								
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th style="width:30%;">13B</th> <th style="width:20%;">Existing</th> <th style="width:20%;">Proposed</th> <th style="width:30%;">2014 Code Designations?</th> </tr> <tr> <td>Structural Occupancy/Risk Cat.</td> <td> </td> <td> </td> <td> </td> </tr> <tr> <td>Seismic Design Cat.</td> <td> </td> <td> </td> <td> </td> </tr> <tr> <td>13C Occupancy Classification*</td> <td>RES</td> <td><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</td> <td><input checked="" type="checkbox"/> Yes**</td> </tr> <tr> <td>Construction Classification</td> <td>3</td> <td><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</td> <td><input type="checkbox"/> Yes <input type="checkbox"/> No</td> </tr> <tr> <td>Multiple Dwelling Classification</td> <td> </td> <td style="background-color: #cccccc;"></td> <td style="background-color: #cccccc;"></td> </tr> </table>	13B	Existing	Proposed	2014 Code Designations?	Structural Occupancy/Risk Cat.				Seismic Design Cat.				13C Occupancy Classification*	RES	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Yes**	Construction Classification	3	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	Multiple Dwelling Classification				<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th style="width:30%;">13E</th> <th style="width:20%;">Existing</th> <th style="width:20%;">Proposed</th> <th style="width:30%;">ft.</th> </tr> <tr> <td>Building Height</td> <td>60</td> <td> </td> <td> </td> </tr> <tr> <td>Building Stories</td> <td>5</td> <td> </td> <td> </td> </tr> <tr> <td>Dwelling Units</td> <td>18</td> <td> </td> <td> </td> </tr> </table>	13E	Existing	Proposed	ft.	Building Height	60			Building Stories	5			Dwelling Units	18		
13B	Existing	Proposed	2014 Code Designations?																																						
Structural Occupancy/Risk Cat.																																									
Seismic Design Cat.																																									
13C Occupancy Classification*	RES	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Yes**																																						
Construction Classification	3	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No																																						
Multiple Dwelling Classification																																									
13E	Existing	Proposed	ft.																																						
Building Height	60																																								
Building Stories	5																																								
Dwelling Units	18																																								
<p>13F Building was originally erected pursuant to which Building Code: <input type="checkbox"/> 2014 <input type="checkbox"/> 2008 <input type="checkbox"/> 1968 <input type="checkbox"/> Prior to 1968</p> <p>The earliest Code with which this building or any part of it is required to comply: <input type="checkbox"/> 2014 <input type="checkbox"/> 2008 <input type="checkbox"/> 1968 <input type="checkbox"/> Prior to 1968</p>																																									

14 Fill Choose one.

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

15 Construction Equipment

Chute Sidewalk Shed Construction Material: **WOOD**

Fence Size: _____ linear ft. BSA/MEA Approval No. _____

Supported Scaffold Other: _____

16 Curb Cut Description

Size of cut (with spays): _____ 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):

--	--	--	--	--	--	--	--	--	--

18 Fire Protection Equipment

	Existing	Proposed
	Yes	No
Fire Alarm	<input type="checkbox"/>	<input type="checkbox"/>
Fire Suppression	<input type="checkbox"/>	<input type="checkbox"/>
Sprinkler	<input type="checkbox"/>	<input type="checkbox"/>
Standpipe	<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		
Loading Berths	sq. ft.	sq. ft.	Loading Berths		

20 Site Characteristics

20A Flood Hazard Area Information

- | | | |
|--|--|---|
| Yes No
<input type="checkbox"/> <input type="checkbox"/> Tidal Wetlands
<input type="checkbox"/> <input type="checkbox"/> Coastal Erosion Hazard Area
<input type="checkbox"/> <input type="checkbox"/> Fire District | Yes No
<input type="checkbox"/> <input type="checkbox"/> Freshwater Wetlands
<input type="checkbox"/> <input type="checkbox"/> Urban Renewal
<input type="checkbox"/> <input type="checkbox"/> Flood Hazard Area <i>If yes, 20A</i> | Yes No
<input type="checkbox"/> <input type="checkbox"/> Substantial improvement?
<input type="checkbox"/> <input type="checkbox"/> Substantially damaged?
<input type="checkbox"/> <input type="checkbox"/> Floodshields part of proposed work? |
|--|--|---|

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
 The scope of work involves raising/moving of a building

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 the work is not an asbestos project as defined in the regulations of the NYC DEP. DEP Control # is required.~~
 DEP ACP-5 Control No. _____
 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)) or is an alteration to a building constructed pursuant to plans submitted for approval on or after April 1, 1987, in accordance with § 28-106.1.

23 Sign

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.	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>
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 checked="" 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>	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: _____

.....▶ *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*

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 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, (-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.

For initial New Building and Alteration 1 applications filed under the 2008 or 2014 NYC Building Code only: does this building qualify for high-rise designation? Yes No

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. Yes No

Name (print): JENNIFER [Signature]
Sign and Date: [Signature]
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 all applicable laws, rules, and regulations.

Yes No

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 purposes. ★

Fee Exemption Request (NYCHA/HHC, NYC Agency, or Other Government Owned and Operated) The building or any part thereof to be constructed, renovated, altered or demolished is owned and operated exclusively for the purposes of the NYC Agency, NYC Authority, NYS Agency, Federal Government or any other government entity. ★

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 New York State Homes and Community Renewal (NYSHCR) of the owner's intention to file because the nature and scope of the work proposed, pursuant to NYSHCR regulations, does not require notification.

The owner has notified the New York State Homes and Community Renewal (NYSHCR) 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 NYSHCR notified: _____

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 and the work is not inconsistent with the current certificate of 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.

Notes for Section 26A: Section required if unit owner signed Section 26. Signature required for authorized representative of Condo or Co-Op board.

★ For fee waivers, please see the PW1 User Guide

Owner Individual Partnership NYCHA / HHC
Type: Corporation Other Government NYC Agency
 Condo Unit Owner or Co-Op Tenant-shareholder 26A

Is the deed holder a non-profit organization? Yes No

Name (please print): MARK ROSEN

Relationship to Owner: MANAGER

Business Name/Agency: M317-319 REALTY LLC

Street Address: 101 BROADWAY, 602

City: NEW YORK State: NY Zip: 11211

Telephone Number: (718) 781-9483 Fax: _____

E-Mail Address: REALTYONLINE@GMAIL.COM

Signature and Date [Signature] 2/29/16

26A Condo/Co-Op Board See note in bottom left corner of page.

Name (please print): _____

Title: _____

Street Address: _____

City: _____

State: _____

Zip: _____

Telephone Number: _____

Fax: _____

E-Mail Address: _____

Signature and Date [Signature]

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: _____



PW1: Plan / Work Application

Must be typewritten.



#2

1 Location Information Required for all applications.

House No(s) 317 Street Name W 35TH STREET
Borough MANHATTAN Block 00759 Lot 00030 BIN 1013573 C.B. No. 104
Work on Floor(s) 001 to 005 Apt. / Condo No(s)

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

Last Name WANG First Name JIEMING Middle Initial
Business Name LMW ENGINEERING GROUP, LLC Business Telephone (908) 862-7600
Business Address 125 LEXINGTON AVENUE Business Fax (908) 862-8998
City LINDEN State NJ Zip 07036 Mobile Telephone
E-Mail JWANG@LMW-ENG.COM License Number 074354
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 SWITA First Name HENRY Middle Initial
Business Name EXPEDITE DEM INC. Business Telephone (718) 477-4444
Business Address 99 DARCEY AVENUE Business Fax (718) 477-5512
City STATEN ISLAND State NY Zip 10314 Mobile Telephone
E-Mail EXPEDITEDEMINC@AOL.COM Registration Number 002099

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

[] Initial Filing 5, 7, 11, 12A, 25-26
[] Standard Plan Examination or Review
[] Professional Certification PC1, POC1
[] Professional Certification of Objections A11
[X] Prior to Approval Actions 25-26
[] Amend Existing Filing 4A
[X] 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 (Superseding) Applicant 4A, 25-26
[] Reinstatement 24-26
[] Withdrawal 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 or Alteration Type 1 required to meet New Building requirements (28-101.4.5) 14, 20, 22
6A-E, 8B-C, 9-10, 12, 13C-F, 14, 18-20, 22 & PW1A, PD1
[] Alteration Type 2 5A, 6A-D, 8A-B, 9-10, 13C-E, & 14, 20, 22
[] Alteration Type 3 5A, 6B-F, 8C, 9-10, 13C-E, 20, 22
[] New Building 6A-E, 8F-G, 9A, 9C-K, 10, 12 & 13A-E, 14, 18-20, PW1A, PD1
[] Sign 5A, 6B-D, 9A, 9D, 22-23
[X] Full Demolition 6B, 8D, 9A & 9C-D, 9K, 13D-E, 14, 21A, 22
[] Subdivision 9A, 9D, 12A-B
[] Condominium [] Improved 17
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
[] FA - Fire Alarm [] FP - Fire Suppression [] SD - Standpipe PW1B
[] FB - Fuel Burning PW1C [] MH - Mechanical [] SP - Sprinkler PW1B
6B [X] EQ - Construction Equipment 15
6C [] OT/GC - General Construction
6D [] OT - Other, describe:
6E [] CC - Curb Cut 16
[] OT/LAN - Landscape
6F [] OT/ANT - Antenna
[] OT/BPP - Builders Pavement Plan 8D
[] OT/FPP - Fire Protection Plan
[] OT/MAR - Marquee 8E, 26B

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

Are plans being submitted with this PW1? Yes No *If yes, do the plans include:* FO — Foundation EN — Energy Analysis

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 \$
									8D	Street Frontage: _____ linear ft.
									8E	Height: _____ ft. Width: _____ ft.
									8F	Total Construction Floor Area: _____ sq. ft.

9 Additional Considerations, Limitations or Restrictions

9A Review is requested under which building code? 2014 2008 1968 Prior to 1968

9B	<input type="checkbox"/> Alteration required to meet New Building requirements (28-101.4.5) <i>If yes, 13A-B</i> <input type="checkbox"/> Alteration is a major change to exits	<input type="checkbox"/> Change in number of dwelling units <input type="checkbox"/> Change in occupancy / use <input type="checkbox"/> Change is inconsistent with current certificate of occupancy <input type="checkbox"/> Change in number of stories
9C	<input type="checkbox"/> Façade Alteration <input type="checkbox"/> Adult Establishment <i>If yes, plot diagram (except DM)</i> <input type="checkbox"/> Compensated Development (Inclusionary Housing) <input type="checkbox"/> Low Income Housing (Inclusionary Housing) <input checked="" type="checkbox"/> Single Room Occupancy (SRO) Multiple Dwelling <input type="checkbox"/> Filing includes Lot Merger / Reapportionment <i>If yes, 17</i>	<input type="checkbox"/> Infill Zoning <input type="checkbox"/> Loft Board <input type="checkbox"/> Quality Housing <input checked="" type="checkbox"/> Site Safety Job/Project <input type="checkbox"/> Included in LMCCC
9D	<input checked="" type="checkbox"/> Landmark <input type="checkbox"/> Little "E" or RD Site <input type="checkbox"/> Unmapped/CCO Street <input type="checkbox"/> Requesting legalization of work where no work without a permit violations have been issued <input type="checkbox"/> Other (please specify on line provided below): _____ <input type="checkbox"/> CRFN(s) <i>Restrictive Declaration / Easement (max. 4):</i> _____ <input type="checkbox"/> CRFN(s) <i>Zoning Exhibit (I, II, III, etc. - max. 4):</i> _____	<input type="checkbox"/> Filing to address violations (list #s—max. 5): _____ <input type="checkbox"/> Filing to comply with Local Laws (list #s—max. 2)

9E BSA Calendar Numbers (max. 5): _____

9F CPC 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
 Work includes modular construction under New York City jurisdiction

9I High Rise Team tracking #: _____

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

9L Work includes partial demolition as defined in AC §28-101.5, or the raising/moving of a building *If yes, 21B*
 Structural stability affected by proposed work

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): NYCECC ASHRAE
Energy Analysis (choose one): Tabular Analysis REScheck COMcheck Energy Modeling (EN1)

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

- The work is an alteration of a State or National historic building.
- The scope of the work is entirely in a "low-energy building" and is limited to the building envelope.
- The entire scope of work involves a temporary structure and/or one or more of the following work types: FA, FP, SD, SP, FS, EQ, CC, OT/BPP, OT/FPP. Other work types are not exempt.
- This is a post-approval amendment and exempt under a prior edition of the energy code. See statement of exemption on attached drawings.

11 Job Description	11A Related DOB Job Numbers
---------------------------	------------------------------------

SUBSEQUENT FILING FOR MECHANICAL MEANS PERMIT, TO BE USED AT TIME OF DEMOLITION.

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*	Zoning Floor Area	District	FAR	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.
	sq. ft.				
	sq. ft.				
	sq. ft.				
	sq. ft.				
	sq. ft.				
	sq. ft.				
Proposed Totals	sq. 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 2014 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/Risk Cat.			Mixed use building?† <input type="checkbox"/> Yes <input type="checkbox"/> No		
Seismic Design Cat.	2014 Code Designations?	2014 Code Designations?	13E		
Occupancy Classification*	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes**	Existing	Proposed	
Construction Classification	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	Building Height	ft.	ft.
Multiple Dwelling Classification			Building Stories		
13F Building was originally erected pursuant to which Building Code: <input type="checkbox"/> 2014 <input type="checkbox"/> 2008 <input type="checkbox"/> 1968 <input type="checkbox"/> Prior to 1968			13E Dwelling Units		
The earliest Code with which this building or any part of it is required to comply: <input type="checkbox"/> 2014 <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

Chute
 Sidewalk Shed
 Construction Material: **MACHINES**

Fence
 Size: _____ linear ft.
 BSA/MEA Approval No. _____

Supported Scaffold
 Other: **SKIDSTEERLOADER**

16 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):

--	--	--	--	--	--	--	--	--	--

18 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		
Loading Berths	sq. ft.	sq. ft.	Loading Berths		

20 Site Characteristics

20A Flood Hazard Area Information

- | | | |
|--|--|---|
| Yes No
<input type="checkbox"/> <input type="checkbox"/> Tidal Wetlands
<input type="checkbox"/> <input type="checkbox"/> Coastal Erosion Hazard Area
<input type="checkbox"/> <input type="checkbox"/> Fire District | Yes No
<input type="checkbox"/> <input type="checkbox"/> Freshwater Wetlands
<input type="checkbox"/> <input type="checkbox"/> Urban Renewal
<input type="checkbox"/> <input type="checkbox"/> Flood Hazard Area <i>If yes, 20A</i> | Yes No
<input type="checkbox"/> <input type="checkbox"/> Substantial improvement?
<input type="checkbox"/> <input type="checkbox"/> Substantially damaged?
<input type="checkbox"/> <input type="checkbox"/> Floodshields part of proposed work? |
|--|--|---|

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
 The scope of work involves raising/moving of a building

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 the work is not an asbestos project as defined in the regulations of the NYC DEP. *DEP Control # is required.*
 DEP ACP-5 Control No. _____
 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)) or is an alteration to a building constructed pursuant to plans submitted for approval on or after April 1, 1987, in accordance with § 28-106.1.

23 Sign

- | | | | |
|---|---|--|---|
| 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. | 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> |
| Location: <input type="checkbox"/> Ground <input type="checkbox"/> Roof 23B <input type="checkbox"/> Wall | | | 23B <input type="checkbox"/> <input type="checkbox"/> Is roof sign tight, closed or solid? |
| 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> | | | 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: _____ |
-▶ *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*

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 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. (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 the job are identical to those previously filed under the group lead job number, except as specified herein.

For Initial New Building and Alteration 1 applications filed under the 2008 or 2014 NYC Building Code only: does this building qualify for high-rise designation? Yes No

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. Yes No

Name (print): JIEBING WANG
Sign and Date: 2/29/16
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 all applicable laws, rules, and regulations.

Yes No

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 purpose. ★

Fee Exemption Request (NYCHA/HHC, NYC Agency, or Other Government Owned and Operated) The building or any part thereof to be constructed, renovated, altered or demolished is owned and operated exclusively for the purposes of the NYC Agency, NYC Authority, NYS Agency, Federal Government or any other government entity. ★

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 New York State Homes and Community Renewal (NYSHCR) of the owner's intention to file because the nature and scope of the work proposed, pursuant to NYSHCR regulations, does not require notification.

The owner has notified the New York State Homes and Community Renewal (NYSHCR) 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 NYSHCR notified: _____

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 and the work is not inconsistent with the current certificate of 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.

Notes for Section 26A: Section required if unit owner signed Section 26. Signature required for authorized representative of Condo or Co-Op board.

★ For fee waivers, please see the PW1 User Guide

Owner Individual Partnership NYCHA / HHC
Type: Corporation Other Government NYC Agency
 Condo Unit Owner or Co-Op Tenant-shareholder 26A

Is the deed holder a non-profit organization? Yes No

Name (please print): MARK ROSEN

Relationship to Owner: MANAGER

Business Name/Agency: M317-319 REALTY LLC

Street Address: 101 BROADWAY, 602

City: NEW YORK State: NY Zip: 11211

Telephone Number: (718) 781-9483 Fax: _____

E-Mail Address: REALTYONLINE@GMAIL.COM

Signature and Date 2/29/16

26A Condo/Co-Op Board See note in bottom left corner of page.

Name (please print): _____

Title: _____

Street Address: _____

City: _____

State: _____

Zip: _____

Telephone Number: _____

Fax: _____

E-Mail Address: _____

Signature and Date 2/29/16

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: _____



PW1: Plan / Work Application

Must be typewritten.



DEPT BLDGS. 122659097 Job Number



SC150505001 Scan Code

#1

1 Location Information Required for all applications.

House No(s) 319 Street Name WEST 35TH STREET
Borough MANHATTAN Block 00759 Lot 00029 BIN 1013572 C.B. No. 104
Work on Floor(s) 001 to 005 Apt. / Condo No(s)

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

Last Name WANG First Name JIEMING Middle Initial
Business Name LMW ENGINEERING GROUP, LLC Business Telephone (908) 862-7600
Business Address 125 LEXINGTON AVENUE Business Fax (908) 862-8998
City LINDEN State NJ Zip 07036 Mobile Telephone
E-Mail JWANG@LMW-ENG.COM License Number 074354
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 SWITA First Name HENRY Middle Initial
Business Name EXPEDITE DEM INC. Business Telephone (718) 477-4444
Business Address 99 DARCEY AVENUE Business Fax (718) 477-5512
City STATEN ISLAND State NY Zip 10314 Mobile Telephone
E-Mail EXPEDITEDEMINC@AOL.COM Registration Number 002099

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

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

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

[] Alteration Type 1 or Alteration Type 1 required to meet New Building requirements (28-101.4.5) 14, 20, 22 [X] Full Demolition 6B, 8D, 9A & 9C-D, 9K, 13D-E, 14, 21A, 22
6A-E, 8B-C, 9-10, 12, 13C-F, 14, 18-20, 22 & PW1A, PD1 [] Alteration Type 3 5A, 6B-F, 8C, 9-10, 13C-E, 20, 22 [] Subdivision 9A, 9D, 12A-B
[] Alteration Type 1, OT: "No Work" 8C, 9-10 & 13A-E, 14, 18-20, PW1A, PD1 [] Condominium [] Improved 17
12, 13C-F, 14, 18-19, 22, PW1A, PD1 [] Sign 5A, 6B-D, 9A, 9D, 22-23 5A Directive 14 acceptance requested?
[] Yes [X] 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 [] OT/LAN - Landscape
[] FB - Fuel Burning PW1C [] MH - Mechanical [] SP - Sprinkler PW1B 6F [] OT/ANT - Antenna
6B [X] EQ - Construction Equipment 15 6C [] OT/GC - General Construction [] OT/BPP - Builders Pavement Plan 8D
[] OT/FPP - Fire Protection Plan
[] OT/MAR - Marquee 8E, 26B

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

Are plans being submitted with this PW1? Yes No *If yes, do the plans include:* FO — Foundation EN — Energy Analysis

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 \$ 8D Street Frontage: 25 linear ft. 8E Height: _____ ft. Width: _____ ft. 8F Total Construction Floor Area: _____ sq. ft.

9 Additional Considerations, Limitations or Restrictions

9A Review is requested under which building code? 2014 2008 1968 Prior to 1968

9B	<input type="checkbox"/> Alteration required to meet New Building requirements (28-101.4.5) <i>If yes, 13A-B</i>	<input type="checkbox"/> Change in number of dwelling units
	<input type="checkbox"/> Alteration is a major change to exits	<input type="checkbox"/> Change in occupancy / use
9C	<input checked="" type="checkbox"/> Façade Alteration	<input type="checkbox"/> Change is inconsistent with current certificate of occupancy
	<input type="checkbox"/> Adult Establishment <i>If yes, plot diagram (except DM)</i>	<input type="checkbox"/> Change in number of stories
	<input type="checkbox"/> Compensated Development (Inclusionary Housing)	<input type="checkbox"/> Infill Zoning
	<input type="checkbox"/> Low Income Housing (Inclusionary Housing)	<input type="checkbox"/> Loft Board
	<input type="checkbox"/> Single Room Occupancy (SRO) Multiple Dwelling	<input type="checkbox"/> Quality Housing
	<input type="checkbox"/> Filing includes Lot Merger / Reapportionment <i>If yes, 17</i>	<input type="checkbox"/> Site Safety Job/Project
9D	<input type="checkbox"/> Landmark	<input type="checkbox"/> Included in LMCCC
	<input checked="" type="checkbox"/> Little "E" or RD Site	<input type="checkbox"/> Filing to address violations (list #s—max. 5):
	<input type="checkbox"/> Unmapped/CCO Street	
	<input type="checkbox"/> Requesting legalization of work where no work without a permit violations have been issued	
	<input type="checkbox"/> Other (please specify on line provided below):	<input type="checkbox"/> Filing to comply with Local Laws (list #s—max. 2)
	<input type="checkbox"/> CRFN(s) Restrictive Declaration / Easement (max. 4):	
	<input type="checkbox"/> CRFN(s) Zoning Exhibit (I, II, III, etc. - max. 4):	
9E	<input type="checkbox"/> BSA Calendar Numbers (max. 5):	
9F	<input type="checkbox"/> CPC Calendar Numbers (max. 5):	
9G	<input type="checkbox"/> Work includes lighting fixture and/or controls, installation or replacement. [ECC §404 and §505]	
9H	<input type="checkbox"/> Work includes modular construction under New York State jurisdiction	9I High Rise Team tracking #:
	<input type="checkbox"/> Work includes modular construction under New York City jurisdiction	
9J	<input type="checkbox"/> Structural peer review required per BC 16. <i>If yes, provide NYS P.E. license number:</i>	
9K	<input type="checkbox"/> Work includes permanent removal of standpipe, sprinkler or fire suppression related systems	
9L	<input type="checkbox"/> Work includes partial demolition as defined in AC §28-101.5, or the raising/moving of a building <i>If yes, 21B</i>	
	<input type="checkbox"/> Structural stability affected by proposed work	

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): NYCECC ASHRAE
 Energy Analysis (choose one): Tabular Analysis REScheck COMcheck Energy Modeling (EN1)

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

- The work is an alteration of a State or National historic building.
- The scope of the work is entirely in a "low-energy building" and is limited to the building envelope.
- The entire scope of work involves a temporary structure and/or one or more of the following work types: FA, FP, SD, SP, FS, EQ, CC, OT/BPP, OT/FPP. Other work types are not exempt.
- This is a post-approval amendment and exempt under a prior edition of the energy code. See statement of exemption on attached drawings.

11 Job Description	11A Related DOB Job Numbers
---------------------------	------------------------------------

FULL DEMOLITION OF FIVE STORY RESIDENTIAL AND COMMERCIAL MIXED BUILDING. PARTIAL MECHANICAL WILL BE USED AT TIME OF DEMOLITION.

11B Primary application job no.

12 Zoning Characteristics

12A District(s) C6-4M Overlay(s) Special Dist.(s) GC Map Number 8D	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*	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.
			sq. ft.			If yes, no. of parking spaces: _____	
			sq. ft.			Perimeter Wall Height _____ ft.	
Proposed Totals			sq. 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 2014 Code equivalents only. †Residential w/other use.

13A Primary structural system, choose one: Masonry Concrete (CIP) Concrete (Precast)
 Wood Steel (Structural) Steel (Cold-Formed) Steel (Encased in Concrete)

13B	Existing	Proposed	2014 Code Designations?	2014 Code Designations?	13D Building Type: <input type="checkbox"/> 1, 2, or 3 Family <input checked="" type="checkbox"/> Other Mixed use building?† <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
	Structural Occupancy/Risk Cat.				
	Seismic Design Cat.				
13C	Occupancy Classification*	RES	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Yes**	13E
	Construction Classification	3	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	Existing
	Multiple Dwelling Classification				Proposed
					Building Height 60 ft.
					Building Stories 5
					Dwelling Units 10

13F Building was originally erected pursuant to which Building Code: 2014 2008 1968 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.

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

15 Construction Equipment

Chute Sidewalk Shed Construction Material: **WOOD**
 Fence Size: _____ linear ft. BSA/MEA Approval No. _____
 Supported Scaffold Other: _____

16 Curb Cut Description

Size of cut (with plays): _____ 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):

18 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		
Loading Berths	sq. ft.	sq. ft.	Loading Berths		

20 Site Characteristics **20A Flood Hazard Area Information**

- | | | |
|--|--|---|
| Yes No
<input type="checkbox"/> <input type="checkbox"/> Tidal Wetlands
<input type="checkbox"/> <input type="checkbox"/> Coastal Erosion Hazard Area
<input type="checkbox"/> <input type="checkbox"/> Fire District | Yes No
<input type="checkbox"/> <input type="checkbox"/> Freshwater Wetlands
<input type="checkbox"/> <input type="checkbox"/> Urban Renewal
<input type="checkbox"/> <input type="checkbox"/> Flood Hazard Area <i>If yes, 20A</i> | Yes No
<input type="checkbox"/> <input type="checkbox"/> Substantial improvement?
<input type="checkbox"/> <input type="checkbox"/> Substantially damaged?
<input type="checkbox"/> <input type="checkbox"/> Floodshields part of proposed work? |
|--|--|---|

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
 The scope of work involves raising/moving of a building

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 the work is not an asbestos project as defined in the regulations of the NYC DEP. *DEP Control # is required.*
 DEP ACP-5 Control No. _____
 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)) or is an alteration to a building constructed pursuant to plans submitted for approval on or after April 1, 1987, in accordance with § 28-106.1.

23 Sign

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

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 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, (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 building identical to those previously filed under the group lead job number, except as specified herein.

For Initial New Building and Alteration 1 applications filed under the 2008 or 2014 NYC Building Code only: does this building qualify for high-rise designation? Yes No

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. Yes No

Name (print): **JIEMING WANG**
Sign and Date: *2/15/16*
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 all applicable laws, rules, and regulations.

Yes No

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 purpose. ★

Fee Exemption Request (NYCHA/HHC, NYC Agency, or Other Government Owned and Operated) The building or any part thereof to be constructed, renovated, altered or demolished is owned and operated exclusively for the purposes of the NYC Agency, NYC Authority, NYS Agency, Federal Government or any other government entity. ★

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 New York State Homes and Community Renewal (NYSCHR) of the owner's intention to file because the nature and scope of the work proposed, pursuant to NYSCHR regulations, does not require notification.

The owner has notified the New York State Homes and Community Renewal (NYSCHR) 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].

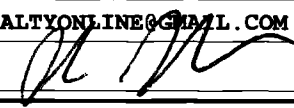
Provide date NYSCHR notified: _____

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 and the work is not inconsistent with the current certificate of 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.


Notes for Section 26A: Section required if unit owner signed Section 26. Signature required for authorized representative of Condo or Co-Op board.

★ For fee waivers, please see the PW1 User Guide

Owner Individual Partnership NYCHA / HHC
Type: Corporation Other Government NYC Agency
 Condo Unit Owner or Co-Op Tenant-shareholder 26A
Is the deed holder a non-profit organization? Yes No

Name (please print): **MARK ROSEN**
Relationship to Owner: **MANAGER**
Business Name/Agency: **M317-319 REALTY LLC**
Street Address: **101 BROADWAY, 602**
City: **NEW YORK** State: **NY** Zip: **11211**
Telephone Number: **(718) 781-9483** Fax:
E-Mail Address: **REALTYONLINE@GMAIL.COM**
Signature and Date  **2/29/16**

26A Condo/Co-Op Board See note in bottom left corner of page.

Name (please print): _____
Title: _____
Street Address: _____
City: _____ State: _____ Zip: _____
Telephone Number: _____ Fax: _____
E-Mail Address: _____
Signature and Date 

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: _____



PW1: Plan / Work Application

Must be typewritten.



#2

1 Location Information Required for all applications.

House No(s) 319 Street Name WEST 35TH ST
Borough MANHATTAN Block 00759 Lot 00029 BIN 1013572 C.B. No. 104
Work on Floor(s) 001 to 005 Apt. / Condo No(s)

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

Last Name WANG First Name JIEMING Middle Initial
Business Name LMW ENGINEERING GROUP, LLC Business Telephone (908) 862-7600
Business Address 125 LEXINGTON AVENUE Business Fax (908) 862-8998
City LINDEN State NJ Zip 07036 Mobile Telephone
E-Mail JWANG@LMW-ENG.COM License Number 074354
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 SWITA First Name HENRY Middle Initial
Business Name EXPEDITE DEM INC. Business Telephone (718) 477-4444
Business Address 99 DARCEY AVENUE Business Fax (718) 477-5512
City STATEN ISLAND State NY Zip 10314 Mobile Telephone
E-Mail EXPEDITEDEMINC@AOL.COM Registration Number 002099

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

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

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

[] Alteration Type 1 or Alteration Type 1 required to meet New Building requirements (28-101.4.5) 14, 20, 22 [X] Full Demolition 6B, 8D, 9A & 9C-D, 9K, 13D-E, 14, 21A, 22
6A-E, 8B-C, 9-10, 12, 13C-F, 14, 18-20, 22 & PW1A, PD1 [] Alteration Type 3 5A, 6B-F, 8C, 9-10, 13C-E, 20, 22 [] Subdivision 9A, 9D, 12A-B
[] Alteration Type 1, OT: "No Work" 8C, 9-10 & 12, 13C-F, 14, 18-19, 22, PW1A, PD1 [] New Building 6A-E, 8F-G, 9A, 9C-K, 10, 12 & 13A-E, 14, 18-20, PW1A, PD1 [] Condominium [] Improved 17
5A Directive 14 acceptance requested?
[] Sign 5A, 6B-D, 9A, 9D, 22-23 [] 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/LAN - Landscape
[] FB - Fuel Burning PW1C [] MH - Mechanical [] SP - Sprinkler PW1B
6B [X] EQ - Construction Equipment 15 6C [] OT/GC - General Construction 6D [] OT - Other, describe:
6F [] OT/ANT - Antenna [] OT/BPP - Builders Pavement Plan 8D
[] OT/FPP - Fire Protection Plan [] OT/MAR - Marquee 8E, 26B

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

Are plans being submitted with this PW1? Yes No *If yes, do the plans include:* FO — Foundation EN — Energy Analysis

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 \$
								8D Street Frontage: _____ linear ft.
								8E Height: _____ ft. Width: _____ ft.
								8F Total Construction Floor Area: _____ sq. ft.

9 Additional Considerations, Limitations or Restrictions

9A Review is requested under which building code? 2014 2008 1968 Prior to 1968

9B <input type="checkbox"/> <input type="checkbox"/> Alteration required to meet New Building requirements (28-101.4.5) <i>If yes, 13A-B</i> <input type="checkbox"/> <input type="checkbox"/> Alteration is a major change to exits	9C <input type="checkbox"/> <input type="checkbox"/> Façade Alteration <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 checked="" 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 checked="" type="checkbox"/> Landmark <input checked="" type="checkbox"/> <input type="checkbox"/> Little "E" or RD Site <input type="checkbox"/> <input type="checkbox"/> Unmapped/CCO Street <input type="checkbox"/> <input type="checkbox"/> Requesting legalization of work where no work without a permit violations have been issued <input type="checkbox"/> <input type="checkbox"/> Other (please specify on line provided below): _____ <input type="checkbox"/> <input type="checkbox"/> CRFN(s) Restrictive Declaration / Easement (max. 4): _____ <input type="checkbox"/> <input type="checkbox"/> CRFN(s) Zoning Exhibit (I, II, III, etc. - max. 4): _____	9E <input type="checkbox"/> <input type="checkbox"/> BSA Calendar Numbers (max. 5): _____ 9F <input type="checkbox"/> <input type="checkbox"/> CPC Calendar Numbers (max. 5): _____ 9G <input type="checkbox"/> <input type="checkbox"/> Work includes lighting fixture and/or controls, installation or replacement. [ECC §404 and §505] 9H <input type="checkbox"/> <input type="checkbox"/> Work includes modular construction under New York State jurisdiction <input type="checkbox"/> <input type="checkbox"/> Work includes modular construction under New York City jurisdiction 9J <input type="checkbox"/> <input type="checkbox"/> Structural peer review required per BC 16. <i>If yes, provide NYS P.E. license number:</i> _____ 9K <input type="checkbox"/> <input type="checkbox"/> Work includes permanent removal of standpipe, sprinkler or fire suppression related systems 9L <input type="checkbox"/> <input type="checkbox"/> Work includes partial demolition as defined in AC §28-101.5, or the raising/moving of a building <i>If yes, 21B</i> <input type="checkbox"/> <input type="checkbox"/> Structural stability affected by proposed work	9I High Rise Team tracking #: _____ <table border="1"> <thead> <tr> <th>LL Number</th> <th>Year</th> </tr> </thead> <tbody> <tr> <td></td> <td></td> </tr> <tr> <td></td> <td></td> </tr> <tr> <td></td> <td></td> </tr> </tbody> </table>	LL Number	Year						
LL Number	Year											

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): NYCECC ASHRAE
 Energy Analysis (choose one): Tabular Analysis REScheck COMcheck Energy Modeling (EN1)

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

- The work is an alteration of a State or National historic building.
- The scope of the work is entirely in a "low-energy building" and is limited to the building envelope.
- The entire scope of work involves a temporary structure and/or one or more of the following work types: FA, FP, SD, SP, FS, EQ, CC, OT/BPP, OT/FPP. Other work types are not exempt.
- This is a post-approval amendment and exempt under a prior edition of the energy code. See statement of exemption on attached drawings.

11 Job Description	11A Related DOB Job Numbers
---------------------------	------------------------------------

SUBSEQUENT FILING FOR A MECHANICAL MEANS PERMIT, IN CONJUNCTION WITH FULL DEMOLITION.

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*	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.				Side Yard 2 _____ ft.
Proposed Totals			sq. ft.			Enclosed Parking? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Existing Total			sq. ft.			<i>If yes, no. of parking spaces:</i> _____	
						Perimeter Wall Height _____ 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 2014 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"/> Steel (Encased in Concrete)
<input type="checkbox"/> Wood	<input type="checkbox"/> Steel (Structural)	<input type="checkbox"/> Steel (Cold-Formed)	
13B Existing		Proposed	
Structural Occupancy/Risk Cat.		2014 Code Designations?	
Seismic Design Cat.		2014 Code Designations?	
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			
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			
13E Existing		Proposed	
Building Height	_____ ft.	_____ ft.	
Building Stories			
Dwelling Units			
13F Building was originally erected pursuant to which Building Code: <input type="checkbox"/> 2014 <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"/> 2014 <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

Chute
 Sidewalk Shed
 Construction Material: **MACHINE**
 Fence
 Size: _____ linear ft.
 BSA/MEA Approval No. _____
 Supported Scaffold
 Other: **SKIDSTEERLOADER**

16 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):

--	--	--	--	--	--	--	--	--	--

18 Fire Protection Equipment

	Existing	Proposed
	Yes	No
Fire Alarm	<input type="checkbox"/>	<input type="checkbox"/>
Fire Suppression	<input type="checkbox"/>	<input type="checkbox"/>
Sprinkler	<input type="checkbox"/>	<input type="checkbox"/>
Standpipe	<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		
Loading Berths	sq. ft.	sq. ft.	Loading Berths		

20 Site Characteristics

20A Flood Hazard Area Information

- | | | |
|--|--|---|
| Yes No
<input type="checkbox"/> <input type="checkbox"/> Tidal Wetlands
<input type="checkbox"/> <input type="checkbox"/> Coastal Erosion Hazard Area
<input type="checkbox"/> <input type="checkbox"/> Fire District | Yes No
<input type="checkbox"/> <input type="checkbox"/> Freshwater Wetlands
<input type="checkbox"/> <input type="checkbox"/> Urban Renewal
<input type="checkbox"/> <input type="checkbox"/> Flood Hazard Area <i>If yes, 20A</i> | Yes No
<input type="checkbox"/> <input type="checkbox"/> Substantial improvement?
<input type="checkbox"/> <input type="checkbox"/> Substantially damaged?
<input type="checkbox"/> <input type="checkbox"/> Floodshields part of proposed work? |
|--|--|---|

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
 The scope of work involves raising/moving of a building

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 the work is not an asbestos project as defined in the regulations of the NYC DEP. *DEP Control # is required.*
 DEP ACP-5 Control No. _____
 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)) or is an alteration to a building constructed pursuant to plans submitted for approval on or after April 1, 1987, in accordance with § 28-106.1.

23 Sign

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.	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>
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>		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>
.....► <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>			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 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, (-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.

For initial New Building and Alteration 1 applications filed under the 2008 or 2014 NYC Building Code only: does this building qualify for high-rise designation? Yes No

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. Yes No

Name (print): TERENCE WANG
Sign and Date: 2/29/16
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 all applicable laws, rules, and regulations.

Yes No

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 purpose. ★

Fee Exemption Request (NYCHA/HHC, NYC Agency, or Other Government Owned and Operated) The building or any part thereof to be constructed, renovated, altered or demolished is owned and operated exclusively for the purposes of the NYC Agency, NYC Authority, NYS Agency, Federal Government or any other government entity. ★

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 New York State Homes and Community Renewal (NYSHCR) of the owner's intention to file because the nature and scope of the work proposed, pursuant to NYSHCR regulations, does not require notification.

The owner has notified the New York State Homes and Community Renewal (NYSHCR) 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 NYSHCR notified: _____

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 and the work is not inconsistent with the current certificate of 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.

Notes for Section 26A: Section required if unit owner signed Section 26. Signature required for authorized representative of Condo or Co-Op board.

★ For fee waivers, please see the PW1 User Guide

Owner Individual Partnership NYCHA / HHC
Type: Corporation Other Government NYC Agency
 Condo Unit Owner or Co-Op Tenant-shareholder 26A

Is the deed holder a non-profit organization? Yes No

Name (please print): MARK ROSEN

Relationship to Owner: MANAGER

Business Name/Agency: M317-319 REALTY LLC

Street Address: 101 BROADWAY, 602

City: NEW YORK State: NY Zip: 11211

Telephone Number: (718) 781-9483 Fax: _____

E-Mail Address: REALTYONLINE@GMAIL.COM

Signature and Date [Signature] 2/29/16

26A Condo/Co-Op Board See note in bottom left corner of page.

Name (please print): _____

Title: _____

Street Address: _____

City: _____

State: _____

Zip: _____

Telephone Number: _____

Fax: _____

E-Mail Address: _____

Signature and Date [Signature]

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: _____



[CLICK HERE TO SIGN UP FOR BUILDINGS NEWS](#)

NYC Department of Buildings
Job Overview

Page: 1 of 1

Premises: 317 WEST 35 STREET MANHATTAN BIN: [1013573](#) Block: 759 Lot: 30

To start overview at new date, select Month: Day: Year:

FILE DATE	JOB #	DOC #	JOB TYPE	JOB STATUS	STATUS DATE	LIC #	APPLICANT	IN AUDIT	ZONING APPROVAL
03/01/2016	122659088	02	DM	E AP-NPE	03/01/2016	0074354 PE	WANG		NOT APPLICABLE
SUBSEQUENT FILING FOR MECHANICAL MEANS PERMIT, TO BE USED AT TIME OF DEMOL Work on Floor(s): 001 thru 005									
03/01/2016	122659088	01	DM	E AP-NPE	03/01/2016	0074354 PE	WANG		NOT APPLICABLE
FULL DEMOLITION OF FIVE STORY APARTMENT BUILDING, USING HAND AND MECHANICA Work on Floor(s): 001 thru 005									
08/20/1993	100682520	01	A2	R PERMIT-ENTIRE	08/26/1993	0047135 PE	GERMAIN		NOT APPLICABLE
INSTALL REPLACEMENT GAS PIPING TO ALL AP ARTMENTS.INSTALL 16 INDIVIDUAL Work on Floor(s): CEL 1 thru 5									

If you have any questions please review these [Frequently Asked Questions](#), the [Glossary](#), or call the 311 Citizen Service Center by dialing 311 or (212) NEW YORK outside of New York City.



[CLICK HERE TO SIGN UP FOR BUILDINGS NEWS](#)

NYC Department of Buildings
Job Overview

Page: 1 of 1

Premises: 319 WEST 35 STREET MANHATTAN BIN: [1013572](#) Block: 759 Lot: 29

To start overview at new date, select Month: Day: Year:

FILE DATE	JOB #	DOC #	JOB TYPE	JOB STATUS	STATUS DATE	LIC #	APPLICANT	IN AUDIT	ZONING APPROVAL
03/01/2016	122659097	02	DM	E AP-NPE	03/01/2016	0074354 PE	WANG		NOT APPLICABLE
SUBSEQUENT FILING FOR A MECHANICAL MEANS PERMIT, IN CONJUNCTION WITH FULL Work on Floor(s): 001 thru 005									
03/01/2016	122659097	01	DM	E AP-NPE	03/01/2016	0074354 PE	WANG		NOT APPLICABLE
FULL DEMOLITION OF FIVE STORY RESIDENTIAL AND COMMERCIAL MIXED BUILDING. Work on Floor(s): 001 thru 005									
09/10/2004	103918352	01	A2	Q PERMIT-PARTIAL	02/16/2005	0020246 RA	Caraccio		NOT APPLICABLE
Renovation of existng apartment 5W. Minor partiton work and plumbing wor Work on Floor(s): 004									
04/19/2004	103751619	01	A2	Q PERMIT-PARTIAL	05/03/2004	0024178 RA	VEDMED		NOT APPLICABLE
INSTALLATION OF KITCHEN FIRE SUPPRESSION SYSTEM NO CHNG IN USE EGRESS/OCP Work on Floor(s): 1									
05/06/2000	102608028	01	A2	X SIGNED OFF	07/21/2000	0076805 PE	CHRYSLER		NOT APPLICABLE
REPLACE BOILER & BURNER Work on Floor(s): CEL									
11/20/1998	102233423	01	A3	R PERMIT-ENTIRE	12/01/1998	0017202 RA	VALLONE		NOT APPLICABLE
STRIP EXG WALLS AND CEILING WITHIN APT. 5E AND INSTALL NEW GYPSUM WALL Work on Floor(s): 5									
10/22/1998	102226208	01	A2	R PERMIT-ENTIRE	11/06/1998	0012075 RA	SCHWARZ		NOT APPLICABLE
REPLACE CHIMNEY FROM CELLAR TO ROOF AS PER PLAN FILED. Work on Floor(s): CEL,001,002,003,004,ROF									
05/21/1993	100621846	01	A2	X SIGNED OFF	10/28/2004	0020419 RA	HULME		NOT APPLICABLE
ERECT SHED (HEAVY DUTY) 110'LONG AT 319 WEST 35 ST.WORK TO COMPLY WITH Work on Floor(s): GRD									

If you have any questions please review these [Frequently Asked Questions](#), the [Glossary](#), or call the 311 Citizen Service Center by dialing 311 or (212) NEW YORK outside of New York City.