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NYC Department of Buildings Work Permit Data

Premises: 761 5 AVENUE MANHATTAN Filed At: 767 5TH AVENUE MANHATTAN

BIN: <u>1036082</u> Block: 1294 Lot: 1 Job Type: A2 - ALTERATION TYPE 2

Printable (PDF) version of this Permit

 Permit No:
 120716225-01-EW-OT
 Issued:
 06/13/2011
 Expires:
 11/01/2011

 Seq. No.:
 01
 Filing Date:
 06/13/2011 INITIAL
 Status:
 ISSUED

 Work:
 Proposed Job Start:
 06/13/2011
 Work Approved:
 06/07/2011

ALTERATION TYPE 2 - ARCH

REMOVE & REINSTALL GLASS CUBE AT PLAZA. REMOVE BOLLARDS & INSTALL NEW PAVERS AT CUBE PERIMETER AS SHOWN ON DRAWINGS FILED HEREWITH. NO CHANGE IN USE, EGRESS OR OCCUPANCY.

Use: E - BUSINESS Landmark: NO Stories: 50

Site Fill: NOT APPLICABLE

Review is requested under Building Code: 1968

Adding more than three stories: No Removing one or more stories: No

Performing work in 50% or more of the area of the building: No

Demolishing 50% or more of the area of the building: No

Performing a vertical or horizontal enlargement adding more than 25% of the area of the building: No

Mechanical equipment other than handheld devices to be used for demolition or removal of debris to be used: No

Approved work includes concrete: Yes
Concrete work has been completed: No
Requesting concrete exclusion now: No

Issued to: ROBERT GOEMAAT

Work includes 2,000 cubic yards or more of concrete: No

GENERAL

CONTRACTOR - 0008569-GC

REGISTERED:

Business: SHAWMUT WOODWORKING & SUP

560 HARRISON AVE BOSTON MA 02118 Phone: 617-622-7000

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



PW1: Plan / Work Application

Must be typewritten.



	-					•	· .	
1	1 Location Information Required for all applications.							
	House No(s)	767	Street Name	5TH AVE	NUE			
	Borough	MANHATTAN	T Block	01294	Lot 00001	BIN 10360	82	C.B. No. 105
	Work on Floor(s)	1				_	Apt. / C	ondo No(s)
2	Applicant Inform	ation Regu	ired for all applic	ations. Fax	mobile telepho	ne and e-mail a	ddress are o	
<u> </u>	Last Name JACKSON First Name JON Middle Initial							
	Business Name BOHLIN CYWINSKI JACKSON Business Telephone (415) 989-2100							
	Business Address 49 GEARY STREET, SUITE 300 Business Fax (415) 989-2101							usiness Fax (415) 989-2101
	City	SAN FRANC	ISCO State	CA	Zip 94108	, ·	Mobile	Telephone
	E-Mail						Licen	se Number 028735
	Choose one:	P.E. 🔀	R.A. Sigr	Hanger	Othe	r. please specify	y:	
3	Filing Represent	ative Comp	lete only if differe	ent from app	olicant specified i	in section 2. Fa	x. mobile ph	one, and e-mail are optional info.
	Last Name	JACKIER/M	CPHERSON	First	Name PHILLI	P/YVETTE		fiddle Initial
	Business Name JEROME S GILLMAN CONSULTING Business Telephone (212)349-9304							
	Business Address 40 WORTH ST, SUITE 1630 Business Fax (212) 349-9346							
	City 1	NEW YORK	State	мұ	Zip 10013		Mobile	Telephone
	E-Mail	PHILLIP@J	TEROMESGILLN	IAN.COM			Registrati	on Number
4	Filing Status Red	quired for all	applications. Ch	oose one a	nd provide speci	fied associated	information.	
X	Initial Filling 5, 7, 11				o Approval Act		_	Reinstatement 24-26
	Review is requested		=		end Existing Filir	_		Withdrawal 26
	☐2008 ☐\$1968	Prior to 1			sequent Filing (pproval Ameno			☐ Specified in 4A and 6 ☐ Entire Job
	Choose Standard one: X Professio				A affect filing fe			4A Indicate existing document number
			bjections Al1		Superseding) A			affected by filing:
5	Job/Project Type	s Choose o	n e and provide s	pecified as:	sociated informa	tion.		
٦	Alteration Type 1 6	A-E. 8B-C. 9	-10, 13C-F, 14 &	Alterati	on Type 1, OT:	"No Work" 8C.	9-10 &	Full Demolition 6B. 8D. 9B-D. &
	18-20, 22. PW1A, PD	01, select all	that apply:		-F, 14. 18-19. 22			13D-E, 14, 21A, 22
	□Change in Exits			X Alterati	on Type 2 5A. (5A-D, 8A-B, 9-1	0, &	∐Sign 5A, 6B-D, 9B. 22-23
	☐Change in Number				14. 20. 22		100 5 00	Subdivision 9B, 12A-B
	□Change in Number of Dwelling Units □Alteration Type 3 5A. 6B-F. 8C. 9-10. 13C-E, 22 □Condominium □Improved 17 □Change in Occupancy / Use □New Building 6A-E. 8F-G. 9A-C.9L. 10. 12. 13A-E 5A Directive 14 acceptance requested?							
	☐Change in Occupa ☐Change inconsiste	-	at Cert of Occup		110111g bA-E. or 108 Code only).			Yes □No
	Change inconsiste	int with curren	it Cert. of Occup	. (136. 20	708 Code Only).	14, 10-20.7 ***	A. 1 D 1	E 100
6	Work Types Sele	ect all that app	ply but no more ti	han allowed	l by job and filing	type. "OT" req	ulred on all	NB and Alteration 1 initial applications.
6A	BL - Boiler PW1C	;	☐ FS - Fuel Stor	rage PW1C	🗆 PL - Plui	mbing PW1B	6E (CC - Curb Cut 16
	☐ FA - Fire Alarm		☐ FP - Fire Sup	pression		ndpipe <i>PW1B</i>	; -	OT/ANT - Antenna
-	☐FB - Fuel Burning		MH - Mechan			inkler PW1B		TOT/BPP - Builders Pavement Plan 8D
68	Equipment 15	6C	OT/GC - Gen	eral	6D MOT - Oth	ier, describe:		☐ OT/FPP - Fire Protection(Plant) ☐ OT/MAR - Marqueel 8 E. 268
	Equipment 15		Construction		ARCH		. , ,	

DOB Reference Number: T00000426277 000020
PROFESSION DESCRIPTION OF THE TOTAL PROFESSION OF THE TOTAL

7 Plans/Construction Documents Submitted Plans are required for most applications.					
	ull/Partial) □ EN - Energy Analy	sis DFO - Foundation or NP - No Plans			
☐ME - Mechanical ☐ OT - Other ☐ PL - Plumbing	ST - Structural	☐ ZO - Zoning			
8 Additional Information					
8A WT Cost WT Cost BB is a	building enlargement proposed?	8C Estimated Job Cost \$			
OT 312375 KG N	o enlargement is proposed	8D Street Frontage: linear ft.			
Y	es 12, PD1	8E Height: ft. Width: ft.			
	Horizontal	8F Name of cluster or development below:			
	dditional Construction Floor Area:	Basic et land in the			
8G Total Construction Floor Area: sq. ft.	sq. ft	t. Project lead job no.			
9 Additional Considerations, Limitations or Restrictions					
Yes No 9A Structural peer review required per BC §1627 If yes, 9F	Yes No	9F Structural Peer Reviewer License No. P.E.			
98 🔲 🕱 Filed to Comply with Local Law If yes, 9G	☐ X Landmark	9G Local Law No(s) Year			
☐ ☑ Other, specify:	☐ 🌃 "Little E" Hazmat Site				
Restrictive Declaration / Easement If yes, 9M	☐ 🕅 Unmapped Street				
☐ ☑ Zoning Exhibit (I, II, III, etc.) If yes, 9N	☐ ☑ Filing to Address Violation(s) If yes, 9H	9H Violation No(s)			
☐ X Requesting legalization of work where no work w/o a permit violations have been issued	, , , , , , , , , , , , , , , , , , ,				
9C	☐ X Included in LMCCC	9I BSA Calendar No(s)			
☐ ☒ Compensated Development (Inclusionary Housing)	☐ (X) Infill Zoning	207. 02.0.102.176(0)			
☐ X Low Income Housing (Inclusionary Housing)	☐ 🔀 Loft Board				
☐ 🛣 Single Room Occupancy (SRO) Multiple Dwelling	Quality Housing	9J CPC Calendar No(s)			
☐ 🛣 Filing includes Lot Merger / Reapportionment // yes, 17	☐ 🔀 Site Safety Job/Project				
9D 🗌 🕱 Includes permanent removal of standpipe, sprinkler or fire					
9E 🗌 🔀 Work includes partial demolition as defined in AC §28-101	.5 If yes, 21B	9K High-Rise Team Tracking Number:			
Structural Stability affected by proposed work					
9L 🗵 🗆 Work includes lighting fixture and/or controls, installation of 9M CRFN(s) Restrictive Declaration / Easement (max. 4):	r replacement, [9ECC 404 and 50	5]			
9N CRFN(s) Zoning Exhibit (I, II, III, etc max. 4):					
10 NYCECC Compliance New York City Energy Conservation Code					
▼ To the best of my knowledge, belief and professional judgment, all □ Energy analysis is on another job number:	work under this application is in co	impliance with the NYCECC*			
Yes No					
☐ ☑ This application is, or is part of, a project that utilizes trade	offs among different major system	ns			
This application utilizes trade-offs within a single major sys					
To the best of my knowledge, belief and professional judgment, all accordance with one of the following: Choose one		npt from the NYCECC* in			
 The work is an alteration of a State or National historic building The scope of work is entirely in a "low-energy building" and is in 					
☐ The scope of work does not affect the energy use of the building	•				
☐ This is a post-approval amendment and exempt under a prior of	edition of the energy code. See st				
* Note: Exceptions to Section ECC 101.4.3 are NOT exemptions. For exceptions, check of	ompliance statement and use the Energy Ana				
11 Job Description	11A	Related DOB Job Numbers			
REMOVE & REINSTALL GLASS CUBE AT PLAZA. REM INSTALL NEW PAVERS AT CUBE PERIMETER AS SHOW HEREWITH. NO CHANGE IN USE, EGRESS OR OCCUPA					
·					
	1 1B	Primary application job no.			
	DOB Referen	Topologication job no. ICE Number: T00000426277-000020 User Ref ID: 25051AR 01/11			
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	1				

12	12 Zoning Characteristics													
12A	District	(s) C5-	3,C5-2.5			1	12B Street legal width: ft.							
	Overlay	 (s)					Street Sta	tus: Pu	ublic 🔲 I	Private				
	Special Dist.(s) MID	_				If the zo	ning lot ir	ncludes n	nultinle		1 .		
	Map Number 8C							ts, list all						
12C	Proposed:	Use*	Zoning Flor	or Area	District	FAR P	roposed Lot Details				Propo:	sed Yard D	etails:	-
				sq. ft.			Lot Type: Corn	er 🔲 Inte	rior 🔲 Th	nrough	Check	here if no	yards: 🗌	or
				sq. ft.			Lot Coverag	je		%		Fron	t Yard	ft.
				sq. ft.		 	Lot Are			sq. ft.			r Yard	ft.
				sq. ft.		 	Lot Wid			ft.	Rear	Yard Equi	_	ft.
				sq. ft.		+P	roposed Other Deta	iiis: ed Parkin	a2□Va	. DNo		Side \		ft.
•	Proposed	Totals		sq. ft.			If yes, no. of part			<u>-</u> Пио		Side	raiu Z	ft,
1	Existin			sq. ft.			Perimeter			ft.		*	•	
•			<u></u>		tial comm	<u>/////////////////////////////////////</u>	ufacturing, or comm	•	·		e use ner	line		1
								_						
13	Building C	harac	teristics *	Main use	/dominar	nt occupancy	per AC §28-101.5.	**Use 20	008 Code	equiva	elents only	r. [‡] Resider	ntial w/oth	er use.
13A	Primary struc	ctural sy	stem, <i>ch</i> oos	se one:	=	sonry	Concrete (CIP)	_	Concrete	•	,			
400				l=	<u></u> w		Steel (Structural	- 1	Steel (Co			Steel (End		
13B			ou Catagas	Existing		Prop	posed	—	Building Mixed us			or 3 Family	_	er
	Structural O		gn Category	·~~~~		008 Code ignations?	2008 Cod Designation	e 	Mixed us	se bund	Existi	Yes	X No Propose	d
13C			assification*	THE COLUMN		es X No	⊠Yes**	137	Buildir	ng Heig		ft.	Topose	ft.
•	<u>.</u>		lassification			es XNo	☐Yes ☐	¥0	Buildin					
	Multiple Dw	elling C	lassification						Dwel	ling Un	its	_		
13F			-		•		ch Building Code:	2008	196	_	Prior to	1968		
	The earliest	Code v	with which th	nis buildin	g or any	part of it is re	equired to comply:	2008	196	8	Prior to	1968		
14	Fill Choose	е опе.												
X.	Not Applicabl	<u> </u>	☐On-Sit	۵		-Site	Under 300	cubic var						
	ттог трриодо							- yar						
15	Constructi	ion Eq	uipment							16	Curb C	ut Descri	ption	
	Chute		Sidewa	alk Shed		Co	nstruction Material		Size of cu	ıt (with spla	ays):	ft.		
	Fence		Size:		line	ear ft. BSA	/MEA Approval No.				Distance	to nearest	corner:	ft.
	Supported So	affold	Other:				*				to street:			
17	Tax Lot Ch	naracte	ristics							18	Fire Pro	otection f	Equipme	ent
	Original tax lo	ts being	merged or	reapporti	ioned (if a	applicable):						Ex	isting P	roposed
-											Cian Alman			es No
:	Tentative tax	lot num	hare (new ta	v lote on	lv)·						Fire Alarn	n 🔲 pression 🗍		
-			Ders (new te	12 1013 011	· y /						Sprinkler			
_											Standpipe			
19	Open Spac	es								20	Site Ch	aracteris	tics	
		Exist	ting	Proposed	1		Existing Proposed				Yes No			
1	Plaza Area	LAIS	sq. ft.	. roposet		rcade Area	sq. ft.	, , opose	sq. ft.			Tidal / Fres		Vetlands
-	Parking Area		sq. ft.			arking Space	-		- 4,			Jrban Rend Fire District		
Ī	_oading Berth	ns	sq. ft.			oading Berth					137 □ F □ _132 ~_f	Tood Haza	rd Area	
-		•	-		*					allow on American	FIFTUP	(I dom.		

DOB_Reference Number: T00000436277-000020
User Ref ID: 25051AR
01/11

\Box	A 4	14
r	υv	

21	1 Demolition Details *Mechanical equipment other than handheld devices to be u	ised for demolition or removal of debris (BC §3306.4).					
	Yes No 1A 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: 1B Demolition work affects the exterior building envelope						
22	22 Asbestos Abatement Compliance Choose one.						
	The scope of work requires related asbestos abatement as defined in the regulations The scope of work does not require related asbestos abatement as defined in the re The scope of work is exempt from the asbestos requirement as defined in the regula	gulations of the NYC DEP.					
23	3 Sign						
	Purpose: Type: Estimated Cost: \$	23A Illuminated type: Direct Flashing Indirect					
	Advertising Illuminated 23A Total Square Feet:	Yes No					
	Non-Advertising Non-Illuminated Height above Curb: ft. in. Location: Ground Roof 238 Wall Height above Roof: ft. in.	☐ If sign projects beyond building line, is owner billed for annual permit? If no, specify in 26B					
	Yes No	23B 🗆 🗆 Is roof sign tight, closed or solid?					
	☐ ☐ Designed for changeable copy? If no, 23C	23C Sign wording. If extensive, provide only key wording.					
		23D. Distance from Attack Highway					
	☐ Within .900' and within view of an arterial highway? If yes, 23D						
	22E_OAC Sign Number:						
	If answer is yes to either of the above two questions and this is an	23G OAC Registration Number:					
	<u> </u>						
24	Comments Place additional comments on an Al-1 form. See Guide for proper inc	corporation 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 b accept, any benefit, monetary or otherwise, either as a gratuity for properly performing the job or imprisonment or fine or both. I understand that if I am found after hearing to have knowingly or not falsified or allowed to be falsified any certificate, form, signed statement, application, report or cer of this code or of a rule of any agency. I may be barred from filing further applications or document the construction documents and specifications herewith submitted and to the best of my knowledge comply with the provisions of the NYC Administrative Code and other applicable laws and rules, [documents. I acknowledge that I have read and complied with all instructions pertaining to this application. I acknowledge that I have read and complied with all instructions pertaining to this applications relating to the number, except as specified herein. Yes No For Initial New Building and Alteration 1 applications filed under the 2008 NYC Building Code only: does this building qualify for high-rise designation? Directive 14 Initial applications only: I certify that the construction documents submitted and all construction documents related to this application do not require a new or amended Certificate of Occupancy as there is no change in use, exits, or occupancy.	in exchange for special consideration is punishable by egigently made a false parement a future to earlier the consideration of the correction of the preparation of the prepar					

DOB Reference Number: T00000426277-000020
User Ref ID: 25051AR

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26	Pro	pe	rty Owner's Statements and Signatures	
	impri empl propo punis heari know signe	sonn oyee edy p shabl- ing to ringly ed sta	on of any statement is a misdemeanor and is punishable by a fine or nent, or both. It is unlawful to give to a city employee, or for a city to accept, any benefit, monetary or otherwise, either as a gratuity for performing the job or in exchange for special consideration. Violation is to by imprisonment or fine or both. I understand that if I am found after to have knowingly or negligently made a false statement or to have or negligently falsified or allowed to be falsified any certificate, form, attement, application, report or certification of the correction of a equired under the provisions of this code or of a rule of any agency. I	
			arred from filing further applications or documents with the ont. Furthermore, I understand that I am responsible for insuring that a	Relationship to Owner: SEN VP OF CONST
	final satist subm	inspe factor nittal	ection be performed when the permitted work is complete, and that a ry report of final inspection be submitted, along with all required documents, so that the NYC Department of Buildings may issue a	Business Name/Agency: BOSTON PROPERTIES-LEXINGTON AVE Street Address: 599 LEXINGTON AVENUE, SUITE 1800
			ompletion or certificate of occupancy within the time prescribed by law.	City: NEW YORK State: NY Zip: 10022
	herei	n and	thorized the applicant to file this application for the work specified d all future amendments. I will not knowingly authorize any work that ompliance with the New York City Energy Conservation Code	Telephone Number: (212) 326-4055 Fax: (212) 326-4050
	(NYC	ECC		E-Mail Address: RSCHUBERT@BOSTONPROPERTIES.COM
	Tes	X	Fee Deferred Request Statement I hereby request a fee deferral for the work proposed on this	Signature and Date College Visibles
	application and understand that <u>all fees must be paid before</u> issuance of any Certificate of Occupancy or lob sign off.		application and understand that all fees must be paid before	26A Condo/Co-Op Board or Corporation Second Officer
	☐ 🌋 Fee Exemption Request Statement			Name (please print): ROBERT E SELSAN
			In accordance with §28-112.1 of the NYC Administrative Code I hereby state that the proposed work involves a building or property	Title: .
			owned or used exclusively for the purposes indicated in such section.	Street Address: 90 CHURCH STREET, 7TH FLOOR
		X	Owner's Certifications Regarding Occupied Housing The site of the building to be altered or demolished, or the site of the	City: NEW YORK State: NY Zip: 10007
			new building to be constructed, contains one or more occupied dwelling units that will remain occupied during construction. These	Telephone Number: (212) 748 - 7844 Fax:
			occupied dwelling units have been clearly indentified on the submitted construction documents.	E-Mail Address:
C		00	The site of the building to be altered or demolished, or the site of the new building to be constructed, contains occupied housing	Signature and Date*
			accommodations subject to rent control or rent stabilization under Chapters 3 and 4 of Title 26 of the New York City Administrative	*Signature required for authorized representative of Condo or Co-Op board. Second officer signature not required for corporations.
			Code. If yes, select one of the following: The owner is not required to notify the Division of Housing and	26B Lessee Responsible for Annual Sign or Marquee Permit
			Community Renewal (DHCR) of the owner's Intention to file because the nature and scope of the work proposed, pursuant to	Name (please print):
			DHCR regulations, does not require notification.	Relationship to Owner:
			The owner has notified the Division of Housing and Community Renewal (DHCR) of its intention to file such construction	Business Name/Agency:
			documents/apply for such permit and has complied with all requirements imposed by the regulations of such agency as	Street Address:
			preconditions for such [filing/application]. Provide date DHCR notified:	City: State: Zip:
		X	Owner's Certification for Adult Establishments	Telephone Number: Fax:
			l authorize and intend to create, enlarge, or extend an establishment with adult activity and/or adult material as defined in ZR §12-10	E-Mail Address:
	-		"adult establishment" or related sign at the subject premises. Owner's Certification for Directive 14 Applications (If applicable)	Internal Use Only
	X		I have read and am fully aware of the applicant's statement that the	Pre-Filer Name:
			construction documents submitted and all construction documents related to this application will not require a new or amended	Pre-Filer Signature: Date:
			Certificate of Occupancy as there is no change in use, exits, or occupancy. Furthermore, I understand that I am responsible for	Cost Estimate: \$
			retaining a qualified design professional to perform a final inspection when the permitted work is complete and this professional	Amount Due: \$ Verified by ▼ Date ▼
			must submit a satisfactory final inspection report to the NYC Department of Buildings within the time following inspection	Initial Amount Paid: \$ Balance Due: \$
			prescribed by Department rule.	Stamps, Certifications and Notes:
				Statistics of the state of the
				_

DOB Reference Number: T00000426277
User Ref ID: 25051AR



PW1: Plan / Work Application

Must be typewritten.



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1 Location Information Required for all applications.							
House No(s) 767 Street Name 5TH AVENUE	•						
Borough MANHATTAN Block 01294 Lot 00001 BIN 1036082	C.B. No. 105						
Work on Floor(s) 1	Apt. / Condo No(s)						
2 Applicant Information Required for all applications. Fax, mobile telephone and e-mail addres	s are optional information.						
Last Name OPPENHEIMER First Name NATHANIEL	Middle Initial						
Business Name ROBERT SILMAN ASSOCIATES Bu	siness Telephone (212)620-7970						
Business Address 88 UNIVERSITY PLACE	Business Fax (212) 620-8157						
City NEW YORK State NY Zip 10003	Mobile Telephone						
E-Mail	License Number 069888						
Choose one: X P.E. R.A. Sign Hanger Other, please specify:	 -						
3 Filing Representative Complete only if different from applicant specified in section 2. Fax, mo.	tile above and a mail am estimat info						
Last Name JACKIER/MCPHERSON First Name PHILLIP/YVETTE	Middle Initial						
	siness Telephone (212) 349 - 9304						
Business Address 40 WORTH ST, SUITE 1630	Business Fax (212) 349-9346						
	Mobile Telephone						
E-Mail PHILLIP@JEROMESGILLMAN.COM Registration Number							
4 Filing Status Required for all applications. Choose one and provide specified associated inform	nation.						
☐ Initial Filing 5, 7, 11, 12A, 25-26	Reinstatement 24-26						
Review is requested under which Building Code? Amend Existing Filing 4A	Withdrawal 26						
□2008 □1968 □ Prior to 1968 ☑ Subsequent Filing 6-7, 8A (Alt-2 only), 13	_ ·						
Choose Standard Plan Examination or Review Post Approval Amendment (PAA) 4A, 6, 2 one: Professional Certification PC1, POC1 Will PAA affect filing fees? Yes No	24-25 ☐ Entire Job 4A Indicate existing document number						
Professional Cert. of Objections Al1 New (Superseding) Applicant 4A, 25-26	affected by filing:						
5 Job/Project Types Choose one and provide specified associated information.							
Alteration Type 1 6A-E, 8B-C, 9-10, 13C-F, 14 & Alteration Type 1, OT: "No Work" 8C, 9-10	& Full Demolition 6B, 8D, 9B-D, &						
18-20, 22, PW1A, PD1, select all that apply: 12, 13C-F, 14, 18-19, 22, PW1A, PD1	13D-E, 14, 21A, 22						
☐ Change in Exits	☐Sign 5A, 6B-D, 9B, 22-23						
☐Change in Number of Stories 13C-E, 14, 20, 22	Subdivision 9B, 12A-B						
☐Change In Number of Dwelling Units ☐Alteration Type 3 5A, 6B-F, 8C, 9-10, 13C-E							
☐ Change in Occupancy / Use ☐ New Building 6A-E, 8F-G, 9A-C,9L, 10, 12, 1							
☐ Change inconsistent with current Cert. of Occup. (13B: 2008 Code only), 14, 18-20, PW1A, PD	1 □Yes □No						
6 Work Types Select all that apply but no more than allowed by job and filing type. "OT" required of	on all NB and Alteration 1 Initial applications.						
6A ∃BL - Boiler PW1C □ FS - Fuel Storage PW1C □ PL - Plumbing PW1B	6E CC - Curb Cut 16						
□FA - Fire Alarm □ FP - Fire Suppression □ SD - Standpipe PW1B	6F OT/ANT - Antenna						
□ FB - Fuel Burning PW1C □ MH - Mechanical □ SP - SprInkler PW1B	☐ OT/BPP - Builders Pavement Plan 8D						
6B ☐ EQ - Construction 6C ☐ OT/GC - General 6D MOT - Other, describe:	☐ OT/FPP - Fire Protection Plan						
Equipment 15 Construction STRUCTURAL	☐ OT/MAR - Marquee 8E, 26B						

DOB Reference Number: T00000426269-000016

User Ref. ID: 25051ST

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7	7 Plans/Construction Documents Submitted Plans are required for most applications.													
	AR - Architec	tural 🗆	BP - BPP Chec	klist	□DM - Dem	olition	(Full/Pa	rtial	☐ EN - Energy	y Ana	lysis	☐FO - Foundation	or NP	No Plans
	ME - Mechani	ical □	OT - Other		□PL - Plumi	oing	************		⊠ST - Structu	ıral		☐ ZO - Zoning		
8	Additional	Informa	ation											_
8A	WT Cost	WT	Cost	WT	Cost	8B (s	a build	ing e	nlargement prop	oseď	80	C Estimated Job Cos	t \$	
	OT 627527	5				С	No en	arge	ment is proposed	l	80	Street Frontage:		linear ft.
		-		_			Yes 1						ft. Width:	ft.
		-		-			☐ Hor					Name of cluster or	developme	nt below:
Additional Construction Floor Area: 8G Total Construction Floor Area: sq. ft. Project I						Project lead job no		_						
9														
	Yes No			-		AM	Yes	No			9F	Structural Peer Rev	iewer Licer	se No.
9A	☐ ☐ Struc	tural pee	r review require	d pe	r BC §1627 #y	es, 9F								P.E.
9B	☐ ☐ Filed	to Comp	ly with Local La	w	If yes, 9G			X	Landmark		9G	Local Law No(s)	Year	: -
		r, specify					_ 🗆		"Little E" Hazmat					
			claration / Ease		•				• •		011	18 t-8 - 11 / 3	<u> </u>	
		-	t (l, ll, lll, etc.) //	•	ere no work w	0.0		ш	Filing to Address Violation(s) If ye			Violation No(s)	 	
			ns have been is			V a			,				 	
9C	☐ ☐ Adult	Establis	hment If yes, p	lot di	agram (except	DM)			Included in LMC	CC	91	BSA Calendar No(s)	
	☐ ☐ Com	pensated	Development (inclu	sionary Housing	3)		X	Infili Zoning					
			lousing (Inclusion					_	Loft Board			,		
					ultiple Dwelling				Quality Housing		1	CPC Calendar No(s)	
<u> </u>					ortionment If y				Site Safety Job/P		t			
9D 9E		•			s defined in AC		<u>-</u>		ion related systen	ns	gk	High-Rise Team Tra	 Ickina Num	her:
JL			bility affected by			320·11	31.0 <i>n</i>	,03,	-10			riigir-riise realit rie	ioning (tuli	JCI.
9L	□ □ Work	includes	lighting fixture	and/d	or controls, insta	allation	or repl	acer	nent. [§ECC 404	and 5	05]			
			eclaration / Eas									· · ·		
9N	CRFN(s) Zon	ing Exhil	oit (I, II, III, etc	max	r. 4):			F - 44 N	to a financial section of the sectio	****	come at	maken e to de la colonia de la		Carlo de suscito polici
10				m	ergy Conservation					10.15 - 15-	Manini Serve	construction with the second state of the seco	.etyn 1100 .g to 6 to 5	
						nent, a	il work	und	er this application	is in	comp	liance with the NYCE	CC*	
		nalysis is	on another job	num	ber:									
	Yes No □ □ This:	applicatio	n is, or is part o	f. a c	roject that utiliz	es trac	de-offs	amo	ng different major	svste	ems			
			•		within a single n			•						
			dedge, belief ar f the following:		ofessional judgr hoose one	nent, a	II work	unde	er this application	is ex	empt	from the NYCECC* I	n	
			_		National histori	buildi	ina.							
								d to	the building envel	ope.				
	•				energy use of t		-		4b	C			ottochod 4	leauinan
									tne energy code. atement and use the E			ment of exemption or	i attached t	irawiriys.
11	Job Descri					****				11/		elated DOB Job i	umbers	
					REPLACEMENT USE, EGRES						-			
	ETHEN NEW	un±1A,	"O CHAMGE	T.17	JUDI EUKE	,) E M						
										11	ВР	nmary application job	no.	

DOB Reference Number: T00000426269-000016

User Ref ID: 25051ST

<u> </u>	<u> </u>		_								PAGE 3
1:	Zoning Cha	racteristics		• • • • • • • • • • • • • • • • • • • •	· · · · · · · · · · · · · · · · · · ·						
12	A District(s)			12	B Street legal with	dth:	ft.			
	Overlay(s)				Street Status: Public Private					
	Special Dist.(s)				If the zoning lot includes multiple					
	Map Numbe			_			ots, list all tax lots	,		<u> </u>	
12	C <i>Proposed:</i> U	se* Zoning Fl	loor Area	District	FAR Pro	posed Lot Details	 s:		Proposed Yard	Details:	
			sq. ft.			ot Type: Corn	er 🔲 interior 🛄 1	Through	Check here if no	yards: 🔲	o <i>r</i>
			sq. ft.			Lot Coverag	ge	%_	. From	nt Yard	ff
			sq. ft.			Lot Are	ea	sq. ft.	Rea	ar Yard	fi
			sq. ft.			Lot Wid		ft.	Rear Yard Equ		fl
			sq. ft.		Pro	posed Other Deta				Yard 1	- fi
			sq. ft.				ed Parking?Y	esNo	Side	Yard 2	ff
	Proposed 1	C. Carlos Andrews	sq. ft,		mmm.	If yes, no. of part	· · —				
	Existing		sq. ft.				Wall Height	ft			
	*Use can be o	ne of the followi	ng: resident	ial, comm	ercial, manuf	acturing, or comn	nunity facility. Lis	t only one	use per line.		
13	Building Ch	naracteristics	*Main use	/dominant	occupancy p	er AC §28-101.5.	**Use 2008 Cod	le equivale	ents only. [‡] Reside	ential w/othe	er use.
13	A Primary structi	urał system, c <i>h</i> o	ose one:	☐ Mas		Concrete (CIP) Steel (Structura		e (Precas	·	cased in Co	oncrete
13	·B		Existing		Propo				1, 2, or 3 Family	y 🗌 Othe	
	Structural Occ	cupancy Catego	y////////			1	Mixed (ıse buildir		=	
	Seismic	Design Catego	ry ///////		nations?	2008 Coc Designation			Existing	Proposed	d _.
13	C_ Occupar	ncy Classification	n*	□Y€	s []No	⊠Yes"	Build	ing Heigh	t ft		ft.
	Construc	tion Classification	on	□Y€	s No	□Yes □	No Buildi	ng Stories	3		
		ling Classification	_					Illing Units	··	_L	
13		=				Building Code:			Prior to 1968		
_	The earliest (ode with which	this building	g or any p	en of it is req	uired to comply:	2008 19	68 🔲	Prior to 1968		
14	Fill Choose	one.									
	Not Applicable	☐ On-8	Site	Off-	Site	Under 300	cubic yards		-		-
15	Constructio	n Equipment						16	Curb Cut Desci	ription	
]Chute	Side	walk Shed		Con	struction Material	:	s	ize of cut (with sp	lays):	ft
]Fence	Size		line	arft. BSA/N	MEA Approval No.		D	istance to nearest	corner:	ft
	Supported Scar	ffold 🔲 Othe	er:					to	street:		
17	Tax Lot Cha	racteristics	<u></u>			 		18 8	ire Protection	Equipme	nt
	Original tax lots	being merged o	or reapportion	oned (if a	oplicable):				ε	xisting Pr	roposed
			T		Ť		1	-	_		es No
	Tantative And In		4- 144					-	ire Alarm ire Suppression [
	Tentative tax to	t numbers (new	tax lots only	y):		·			prinkler		
					_				tandpipe		
19	Open Space	8			·. · · · · · · · · · · · · · · · · · ·			20 5	Site Characteris	etics	
		Existing	Proposed			Existing	Proposed		es No		
	Plaza Area	sq. ft	+		cade Area	sq. ft.	sq. ft.	. [Tidal / Free	sh Water W	/etlands
	Parking Area	sq. ft	i — -	- 	rking Spaces	 	- 42	. [
	Loading Berths	sq. ft			ading Berths				_		
							1	_			

DOB Reference Number: T00000426269-000016

01/11

P۷	V1			PAGE 4				
21	Dem	olition Details *Mechanical equipment other than handheld devices to be	e used for a	demolition or removal of debns (BC §3306.4).				
****	Yes No A 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: Demolition work affects the exterior building envelope							
22	Asbe	stos Abatement Compliance Choose one						
	The so	ope of work requires related asbestos abatement as defined in the regulation ope of work does not require related asbestos abatement as defined in the cope of work is exempt from the asbestos requirement as defined in the regu	regulations	s of the NYC DEP.				
23	Sign							
		ising Illuminated 23A Total Square Feet: dvertising Non-Illuminated Height above Curb: ft. in.		minated type: Direct Flashing Indirect s No If sign projects beyond building line, is owner billed for annual permit? If no, specify in 268				
	Location Yes		23B 🗆	☐ Is roof sign tight, closed or solid?				
		Is sign inside building line? . If no, sign projects by: ft. in Designed for changeable copy? If no, 23C		n wording. If extensive, provide only key wording.				
		☐ Does an OAC have an interest in this sign or location? If yes, 23G☐ Within 900' and within view of an arterial highway? If yes, 23D	23D Dis	tance from Arterial Highway: ft.				
		Within 200' and within view of a park 1/2 acre or more? If yes, 23E		tance from Park 1/2 acre or more: ft.				
		► If answer is "yes" to either of the above two questions <u>and</u> this is an	23F OA	C Sign Number:				
		advertising sign, OAC sign number is required in section 23F	23G OA	C Registration Number:				
24		nents Place additional comments on an Al-1 form. See Guide for proper	incorporati	on of professional certification statements.				
	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. Whatever, 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 of the construction of the construction of the construction of the construction of a vertical and specification of the provisions of this code or of a rule of any agency. I may be baired from filing further applications or documents with the Department. The provisions of the construction documents and specifications herewith submitted and to the bear of my knowledge and belief, the population of documents and specifications herewith submitted and to the bear of my knowledge and belief, the population of documents and specifications are submitted and to the bear of my knowledge and belief, the provisions of the NYC Administrative Code and other applicable laws and rules, (—check have if) elegate as set forth in the accomplaining documents. I acknowledge that I have read and complied with all instructions pertaining to this application and supplications are submitted.							
			Name					
	0 0	Directive 14 initial applications only: I certify that the construction documents submitted and all construction documents related to this application do require a new or amended Certificate of Occupancy as there is no change in use, exits, or occupancy.	47	Date R.A. Seal (apply seasons and date over seal)				
		· · · · · · · · · · · · · · · · · · ·	DOB Re	ference Number: T00000426269-000016				

PROFESSIONAL CERTIFICATION 01/11 DEPARTMENT OF BUILDINGS

26	Pr	ope	rty Owner's Statements and Signatures	
	emp prop puni head know sign viola	nisoni ployee perly plishab ning to wingly ed st	ion of any statement is a misdemeanor and is punishable by a fine or ment, or both. It is unlawful to give to a city employee, or for a city to accept, any benefit, monetary or otherwise, either as a gratuity for benorming the job or in exchange for special consideration. Violation is elbe by imprisonment or fine or both. I understand that if I am found efter to have knowingly or negligently made a false statement or to have or or negligently falsified or allowed to be falsified any certificate, form, attement, application, report or certification of the correction of a required under the provisions of this code or of a rule of any agency. I arred from filing further applications or documents with the	☐ Condo Unit Owner or Co-Op Tenant-shareholder 26A Is the owner a non-profit organization? ☐ Yes ※ No Name (please print): ROBERT SCHUBERT
	Dep	artme	arred norm iming turner applications of documents with the ent. Furthermore, I understand that I am responsible for insuring that a action be performed when the permitted work is complete, and that a	Relationship to Owner: gen VP OF CONST
	setis subr	sfacto mittal	ry report of final inspection be submitted, along with all required documents, so that the NYC Department of Buildings may issue a	Business Name/Agency: BOSTON PROPERTIES-LEXINGTON AVE Street Address: 599 LEXINGTON AVENUE, SUITE 1800
			ompletion or certificate of occupancy within the time prescribed by law.	City: NEW YORK State: NY Zip: 10022
	here	in an	thorized the applicant to file this application for the work specified d all future amendments. I will not knowingly authorize any work that ompliance with the New York City Energy Conservation Code	Telephone Number: (212) 326-4055 Fax: (212) 326-4050
	(NY	CEC(E-Mail Address: RSCHUBERT@BOSTONPROPERTIES.COM
			Fee Deferred Request Statement	Signature and Date > 2 Hotelan Scholer (6)
			I hereby request a fee deferral for the work proposed on this application and understand that all fees must be paid before issuance of any Certificate of Occupancy or lob sign off.	26A Condo/Co-Op Board or Corporation Second Officer
	O	J	Fee Exemption Request Statement	Name (please print): ROBERT E SELSAN
			In accordance with §28-112.1 of the NYC Administrative Code I hereby state that the proposed work involves a building or property	Title: .
			owned or used exclusively for the purposes indicated in such section.	Street Address: 90 CHURCH STREET, 7TH FLOOR
		Owner's Certifications Regarding Occupied Housing The site of the building to be altered or demolished, or the site of the	City: NEW YORK State: NY Zip: 10007	
			new building to be constructed, contains one or more occupied dwelling units that will remain occupied during construction. These	Telephone Number: (212) 748 - 7844 Fax:
			occupied dwelling units have been clearly indentified on the submitted construction documents.	E-Mail Address:
			The site of the building to be altered or demolished, or the site of the	Signature and Date*
	new building accommodal	w building to be constructed, contains occupied housing commodations subject to rent control or rent stabilization under napters 3 and 4 of Title 26 of the New York City Administrative	*Signature required for authorized representative of Condo or Co-Op board. Second officer signature not required for corporations.	
			Code. If yes, select one of the following:	26B Lessee Responsible for Annual Sign or Marquee Permit
			The owner is not required to notify the Division of Housing and Community Renewal (DHCR) of the owner's intention to file because the nature and scope of the work proposed, pursuant to	Name (please print):
			DHCR regulations, does not require notification.	Relationship to Owner:
			The owner has notified the Division of Housing and Community Renewal (DHCR) of its intention to file such construction	Business Name/Agency:
			documents/apply for such permit and has complied with all requirements imposed by the regulations of such agency as	Street Address:
			preconditions for such [filing/application]. Provide date DHCR notified:	City: State: Zip:
(]		Owner's Certification for Adult Establishmenta	Telephone Number: Fax:
			i authorize and intend to create, enlarge, or extend an establishment with adult activity and/or adult material as defined in ZR §12-10	E-Mail Address:
t	כ		"adult establishment" or related sign at the subject premises. Owner's Certification for Directive 14 Applications (if applicable)	Internal Use Only
			construction documents submitted and all construction documents	Pre-Filer Name:
			related to this application will not require a new or amended Certificate of Occupancy as there is no change in use, exits, or	Pre-Filer Signature: Date: Cost Estimate: \$
			occupancy. Furthermore, I understand that I am responsible for retaining a qualified design professional to perform a final	Amount Due: \$ Verified by ▼ Date ▼
			inspection when the permitted work is complete and this professional must submit a satisfactory final inspection report to the NYC	Initial Amount Paid: \$
			Department of Buildings within the time following inspection prescribed by Department rule.	Balance Due: \$
			• • •	Stamps, Certifications and Notes:
				·



PW3: Cost Affidavit

Must be typewritten.



1	Reason For Filing F	Reason For Filing Required for all applications.						
X	Reason for filing cost and Initial Filing 2-7 Prior to Approval Actional Post Approval Amendment of 2-3, and 2-	s <i>1A, 2-7</i> ent (PAA) <i>1A, 2-7</i>	Estimated cost of Estimated cost of Estimated cost of	construction	_	1A Indicate ex affected by	•	nt number
2	Location Informatio	n Required for all a	pplications.					
	House No(s) 767	Street N	lame 5TH AVEN	UE				
	Borough Mai	nhattan E	Block 1294	Lot 1 BIN 10	36082	C.B. No	o. 105	
3	Cost Details Require	d for all applications						
	Cost estimates shall included and labor; work shall included and kitchen appliances. It is the unit additional square footage Categories of Work (MYes No X Boiler (BL) Yes No X Fire Alarm (FA) X Fuel Burning (FA) Yeul Storage (FA) X Fuel Storage (FA) X Fire Suppressio X Mechanical (MHA) Plumbing (PL)	ude all construction of Indirect costs, includ costs shown. When the costs shown are the costs shown are the costs shown. When the costs shown are	elements including, ing but not limited t n filing an enlarger <u>ist</u> be specified for	but not limited to, const to general conditions an ment the estimated cos r each "Category of Wa on PW1.) SD) T/ANT)	ruction equip nd insurance, st should be fork" listed b	ment, wall and shall be added exclusive of a elow.	floor finishes, I I to direct work ny work perfor struction (OT) struction cal Demolition ork ovation	ouilt-in cabinets, costs and shall
	Category of Work*	Description of Wo	rk		Area/Units	Unit Cost (\$)	Total Cost (\$)	Work Category Total Cost (\$)
	ОТ	Structural work for gla	zing replacement		1,024/sf	6,128.20	6,275,275.00	6,275,275.00
-								
-		<u> </u>				TOTAL	JOB COST: \$	6,275,275

*List ALL Categories of Work specified "Yes" above. Use more than one line for Categories of Work that involve multiple unit costs. See PW3
Form Instructions for a sample of completed Section 3 Cost Details. For enlargements, only items associated with work performed in the existing area should be listed.



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	_	1	/۱	•	٠.

Plan Examiner/Project Advocate:

C of O:

Pre-Filer/C of O:

Accept Original

Accept Original

PAGE 2

			_							
4	Design Applicar	nt Informatio	on							
	Choose One:	ΣP.E.	ПR.A. Г	Sign Hanger	Other (spe	cifv)		License Nun	nber <u>069888</u>	
		OPPENHE				NATHANI	EL	Middle Initial		
	Business Name	ROBERT S	ILMAN AS	SSOCIATES				Business Fax (212	2) 620-8157	
	Business Address			_				Mobile Phone ()	-	
	City	NEW YOR	RK	State NY	Zip	10003		E-Mail		
5	Owner/Lease Ho				-					
	Choose One:	⊠ Owner	⊠ Le	ase Holder						
	Last Name	HAYES	_		First Name	MATT		Middle Initial		
	Business Name		MPUTE	 :RS	Business Phone	(212) 326-4	4027	Business Fax ()	-	
	Business Address	1 INFINITE	LOOPE					Mobile Phone ()	-	
	City	CUPERTI	NO	State CA	Zip	95014		E-Mail		
6	Design Applican	ıt's Stateme	nts and S	Signatures						
	nerepy state tre informat ment, or both. I also unde in exchange for special co ment or to have knowingly the provisions of this code	uton on this form is rstand it is unlawfu nsideration. Violat r or negligently fals or of a rule of any	correct and cc ion is punisha ified or allowe agency, I may	ompiete to the best tity employee, or foi ble by imprisonmer d to be falsified any r be barred from filir	of my knowledge. It is a city employee to a not or fine or both. I ur y certificate, form, sign og further applications	inderstand raissification scept, any benefit, in iderstand that if I ar ned statement, appli or documents with	ion or any si non found afte lication, reput the Depart	tatement is a miscenneanor otherwise efficience as a garden property of the same Modified of the control of the	tor properly perform to regular to the regular to t	ine, imprison- ming the job or a a false state- required under
	Name (print) NATHANIEL OP	PENHEIMI	ER		\times	Sign	nature	69888		r 3/1/
						— Р.Е	:. / R.A. S	eal MOTESSION	algn and date	over seal)
7	Owner's/Lease H	Holder's Sta	tements	and Signatu	res Notary <u>onl</u>	ı required wher	n submitt	ting to obtain Sign-off.	· _	
	imprisonment, or both. I at	Iso understand it is special consideral seknowingly or negons of this code or of	s unlawful to gi tion. Violation	ive to a city employ is punishable by in spenishable by in spenishable to be agency, I may be Notarization State of Ne Sworn to of	ree, or for a city emplo aprisonment or fine or a faistfied any certificate barred from filing furth	oyee to accept, any both. I understand ate, form, signed state are applications or de	benefit, mo d that if I an atement, ap locuments w	ny statement is a misdemea inetary or otherwise, either a n found after hearing to hav oplication, report or certificat vith the Department. Notary Seal	s a gratuity for prope e knowingly or negli	erly performing gently made a
Staf	Internal Use Onl	y //////// //	PW3 Cost	Details Valid	ation		Gomm	nents (May include co	ost guidance)	Initials
				t Original	Revised Co	st Needed		Total (may morage oc		

Revised Cost Needed

Revised Cost Needed



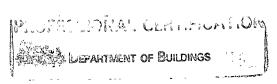
PW3: Cost Affidavit

Must be typewritten.



1	Reason For Filing R	Required for all applic	ations.						
	Reason for filing cost a Initial Filing 2-7 Prior to Approval Actions Post Approval Amendme To obtain Sign-off 2-3, 5	s 1A, 2-7 ent (PAA) 1A, 2-7	Cost informat Estimated cost Estimated cost Estimated cost Actual constru	t of construction t of construction t of construction to feet	n n n	-		xisting docume y filing: 01	nt number
2	Location Information	n Required for all ap	oplications.						
	House No(s) 767	Street N	ame 5TH AVE	ENUE					
	Borough Mar	nhattan B	lock 1294	Lot 1	BIN 10	36082	C.B. No	o. 105	
3	Cost Details Required	d for all applications.							
	Cost estimates shall incluand labor; work shall incluand kitchen appliances. It be reflected in the unit cadditional square footage. Categories of Work (MuYes No Soiler (BL) Fire Alarm (FA) Fuel Burning (FE Fuel Storage (FS Fire Suppression Mechanical (MH Plumbing (PL)	ude all construction endirect costs, includicosts shown. When was match all applicable. Yes Yes You How Yes You have the shown in the	elements includiring but not limite in filing an enlarist be specified categories indicate is No Standpipe Sprinkler (Signs (SG) Cher (OT	ng, but not limited to general or gement the effor each "Cared on PW1.) (SP) (SP) (OT/ANT) (OT/MAR)	ted to, const onditions an stimated cos	ruction equip d insurance, st should be ork" listed b	ment, wall and shall be added exclusive of a elow.	floor finishes, I d to direct work iny work perform struction (OT) polition ral Demolition fork position	ouilt-in cabinets, costs and shall
	Category of Work*	Description of Wor				Area/Units	Unit Cost (\$)	Total Cost (\$)	Work Category Total Cost (\$)
	мн	Remove & reinstall diff	users & ductwork			1,024/sf	58.74	60,150.00	60,150.00
- - - - - - -									
-							TOTAL	JOB COST: \$	60,150

*List ALL Categories of Work specified "Yes" above. Use more than one line for Categories of Work that involve multiple unit costs. See PW3
Form Instructions for a sample of completed Section 3 Cost Details. For enlargements, only items associated with work performed in the existing area should be listed.



PW3	PAGE 2
4 Design Applicant Information	
Choose One: P.E. R.A. Sign Hanger Other (specify) Last Name BELGARDE First Name MARK	License Number <u>075053</u> Middle Initial
Business Name FLACK & KURTZ -CA Business Phone (415) 398-3833	Business Fax () -
Business Address 405 HOWARD STREET	Mobile Phone () -
City SAN FRANCISCO State CA Zip 94105	E-Mail
5 Owner/Lease Holder Information	
Choose One: Owner X Lease Holder	
Last Name HAYES First Name MATT	Middle Initial
Business Name APPLE COMPUTERS Business Phone (212) 326-4027	Business Fax() -
Business Address 1 INFINITE LOOPE MS-58RD	Mobile Phone () -
City CUPERTINO State CA Zip 95014	E-Mail
6 Design Applicant's Statements and Signatures	
I hereby state the information on this form is correct and complete to the best of my knowledge. I understand faisification of any ment, or both. I also understand it is unlawful to give to a city employee, or for a city employee to accept, any benefit, monetary in exchange for special consideration. Violation is punishable by imprisonment or fine or both. I understand that if I am found a ment or to have knowingly or negligently falsified or allowed to be falsified any certificate, form, signed statement, application, rethe provisions of this code or of a rule of any agency, I may be barred from filing further applications or documents with the Depa	or otherwise, either as a gratuit y for properly performing the job or fter hearing to have knowingly of negligently made a false state- port or certification of the confection of a violation required under
Name (print) Signature	10 Lorsos 2 12/1/2/11
MARK BELGARDE P.E. / R.A.	Seal (apply seal them sign and date over seal)
7 Owner's/Lease Holder's Statements and Signatures Notary only required when subm	itting to obtain Sign-off.
I hereby state the information on this form is correct and complete to the best of my knowledge. I understand falsification of imprisonment, or both. I also understand it is unlawful to give to a city employee, or for a city employee to accept, any benefit, in the job or in exchange for special consideration. Violation is punishable by imprisonment or fine or both. I understand that if I false statement or to have knowingly or negligently falsified or allowed to be falsified any certificate, form, signed statement, required under the provisions of this code or of a rule of any agency, I may be barried from filing further applications or documents.	nonetary or otherwise, either as a gratuity for properly performing am found after hearing to have knowingly or negligently made a application, report or certification of the correction of a violation
Name (print) MATT HAYES Signature Notarization State of New York, County of: Sworn to or affirmed under penalty of perjury	Notary Seal

Internal Use Only				
Staff	PW3 Cost Details Valid	dation	Comments (May include cost guidance.)	Initials
Pre-Filer:	Accept Original	Revised Cost Needed		
Plan Examiner/Project Advocate:	Accept Original	Revised Cost Needed		
C of O:	Accept Original	Revised Cost Needed		
Pre-Filer/C of O:	Accept Revised Su	bmission (Resolved)		

day of Notary Public Signature



PW3: Cost Affidavit

Must be typewritten.



,							<u> </u>		_	-
1	Reason For Filing R	Required for all applic	cations.							
	Reason for filing cost a Initial Filing 2-7 Prior to Approval Actions Post Approval Amendme To obtain Sign-off 2-3, 5	s <i>1A</i> , 2-7 ent (PAA) <i>1A</i> , 2-7	Estimated cost Estimated cost Estimated cost Actual construct	of construction of construction of construction	on on on		_	1A Indicate ex affected by	-	nt number
2	Location Information	n Required for all ap	oplications.							
	House No(s) 767	Street N	ame 5TH AVE	NUE						
	Borough Mar	nhattan B	Block 1294	Lot 1	В	N_10	36082	C.B. No	o. 105	
3	Cost Details Required	d for all applications.								
	Cost estimates shall incluand labor; work shall incluand kitchen appliances. It be reflected in the unit cadditional square footage Categories of Work (Material Research)	ude all construction e ndirect costs, includi costs shown. Wher . "Yes" or "No" <u>mu</u>	elements including but not limite ing but not limite in filing an enlarg i <u>st</u> be specified	ig, but not limi d to general o gement the e for each "Cat	ted to, onditionstimate	const ins an ed cos	ruction equip d insurance, st should be	ment, wall and shall be added exclusive of a	floor finishes, I to direct work	built-in cabinets, costs and shall
	Yes No	Ye	s No				Yes No	0		
	X Boiler (BL)		X Standpipe (SD) X Sprinkler (SP) X Signs (SG) X Other (OT) ☐Antenna (OT/ANT) ☐Marquee (OT/MAR) ☐(Describe)			☐ X General Construction (OT) ☐ Partlal Demolition ☐ Non-Structural Demolition ☐ Structural Work ☐ Interior Renovation ☐ Exterior Renovation ☐ (Describe)				
	☐ Plumbing (PL) Category of Work*	Description of Wo					Area/Units	Unit Cost (\$)	Total Cost (\$)	Work Category Total Cost (\$)
	PL	Cap & remove floor dra	ains				1,024/sf	12.94	13,250.00	13,250.00
-					16	·RC	FESSIO	NAL CER	TIFICAT	Ole
-						- Te 1414	DEPAR	TMENT OF BU	LDINGS	
-					-			TOTAL	JOB COST: \$	13,250.00

*List ALL Categories of Work specified "Yes" above. Use more than one line for Categories of Work that involve multiple unit costs. See PW3
Form Instructions for a sample of completed Section 3 Cost Details. For enlargements, only items associated with work performed in the existing area should be listed.

PW	/3							PA	GE 2
4	Design Applicar	it Information							
	Choose One:	⊠P.E. □R.A.	Sign Hanger	Other (spec	cify)		License Nun	nber <u>075053</u>	
-	Last Name	BELGARDE		First Name	MARK	Middle	Initial		
	Business Name	FLACK & KURT	Z -CA	Business Phone	(415) <u>398-3</u>	833 Busines	ss Fax ()	<u>-</u>	
_	Business Address	405 HOWARD S	STREET			Mobile	Ph <u>one (</u>)		
_	City	SAN FRANCISC	O State CA	. Zip	94105		E-Ma <u>il</u>		
5	Owner/Lease Ho	lder Information							
	Choose One:	Owner 🔀	Lease Holder						
	Last Name	HAYES		First Name	MATT	Middle	Initial		
		APPLE COMPU	TERS	Business Phone	(212) 326-4	027 Busines	ss Fax()		
	Business Address	1 INFINITE LOO	PE MS-58RD)	_	Mobile	Phone ()		
	City	CUPERTINO	State CA	Zip	95014		E-Mail		
6	Design Applican	it's Statements an	d Signatures						
	ment, or both. I also unde in exchange for special co- ment or to have knowingly	ion on this form is correct ar rstand it is unlawful to give to misideration. Violation is pun or negligently falsified or all or of a rule of any agency, I	o a city employee, or fo ishable by imprisonme owed to be falsified an	or a city employee to acc int or fine or both. I und ny certificate, form, signe	cept, any benefit, mo derstand that if I am ed statement, applica	netary or otherwise, found after hearing atton, report or certifie Department of the	either as a gratuit	y for properly performing the or negligently made a false	e iob or
					P.E.	R.A. Seal (ap	<u> </u>	sign and date over s	seal)
7	Owner's/Lease H	Holder's Statemen	ts and Signatu	ures Notary <u>only</u>	required when	submitting to ol	otain Sign-off.		
-	imprisonment, or both. I a the job or in exchange for false statement or to have	tion on this form is correct a lso understand it is unlawful special consideration. Viola & knowingly or negligently fa ins of this code or of a rule of	to give to a city emplo tion is punishable-by-in Isrified or allowed to be any agency, I may be Notarizatio State of No Sworm to co	yee, or for a city employ pprisonment or fine or e falsified any certificat barred from filing furthe	yee to accept, any be both. I understand to get form, signed state applications or doc	enefit, monetary or o that if I am found aft ement, application, r ruments with the Dep Notary Se	therwise, either a er hearing to have eport or certificat partment.	s a gratuity for properly perfe e knowingly or negligently r ion of the correction of a v	forming made a iolation
-						PRUFES	<u> SIUNAL</u>	CERTIFICAT	110

Internal Use Only				
Staff	PW3 Cost Details Valid	ation	Comments (May include cost guidance.)	Initials
Pre-Filer:	Accept Original	Revised Cost Needed		
Plan Examiner/Project Advocate:	Accept Original	Revised Cost Needed		
C of O:	☐ Accept Original	Revised Cost Needed		
Pre-Filer/C of O:	Accept Revised Sul	bmission (Resolved)		

DEPARTMENT OF BUILDINGS



PW3: Cost Affidavit

Must be typewritten.



		•			Scan Code
1 Reason For Filing <i>I</i>	Required for all applications.				
Reason for filing cost Initial Filing 2-7 Prior to Approval Action Post Approval Amendm To obtain Sign-off 2-3,	Estimated cost of construction s 1A, 2-7 Estimated cost of construction ent (PAA) 1A, 2-7 Estimated cost of construction	-	1A Indicate ex affected by	kisting docume y filing: 01	ent number
2 Location Informatio	n Required for all applications.				-
House No(s) 767	7 Street Name 5TH AVENUE				
Borough Ma	nhattan Block 1294 Lot 1 BIN 1	036082	C.B. No	o. 105	
3 Cost Details Require	ed for all applications.				
and labor; work shall incl and kitchen appliances. be reflected in the unit additional square footage Categories of Work (M	ude total value of work per §28-112.3 of the NYC Administrativude all construction elements including, but not limited to, consultative costs, including but not limited to general conditions a costs shown. When filing an enlargement the estimated occurrence or "No" must be specified for each "Category of Wast match all applicable categories indicated on PW1.)	struction equip nd insurance, ost should be Vork" listed b	oment, wall and shall be added exclusive of a pelow.	floor finishes, I to direct work	built-in cabinets, costs and shall
Yes No Boiler (BL)	Yes No Standpipe (SD)	Yes N	General Cons		
☐ ☒ Fire Alarm (FA) ☐ ☒ Fuel Burning (F ☐ ☒ Fuel Storage (F ☐ ☒ Fire Suppressio ☐ ☒ Mechanical (MH	B) Signs (SG) S) Other (OT) On (FP) Antenna (OT/ANT)		Partial Demo	ral Demolition ork ovation	
Category of Work*	Description of Work	Area/Units	Unit Cost (\$)	Total Cost (\$)	Work Category Total Cost (\$)
ОТ	Remove & reinstall glass cube at plaza. Remove bollards & install	1,024/sf	305.05	312,375.00	312,375.00
	new pavers at cube perimeter.				
-		_			
		-			
		-			
		†		<u> </u>	
			TOTAL	JOB COST: \$	312 375 00

*List ALL Categories of Work specified "Yes" above. Use more than one line for Categories of Work that involve multiple unit costs. See PW3 Form Instructions for a sample of completed Section 3 Cost Details. For enlargements, only items associated with work performed in the existing area should be listed.

P	۱۸	13	
F	V١	vo	

PAGE 2

							PAGE 2
4	Design Applicar	nt Information					
	Choose One:		Sign Hanger	Other (specify)		License Number 02873	 5
		JACKSON		First Name JON		Middle Initial	
	Business Name	BOHLIN CYWINSK	JACKSON	Business Phone (415)	989-2100	Business Fax (415) 989-210	1
	Business Address	49 GEARY STREE	ET - SUITE :	300		Mobile Phone () -	
	City	SAN FRANCISCO	State CA	Zip 94108		E-Mail	
5	Owner/Lease Ho	older Information					
	Choose One:	Owner X Le	ase Holder		•	<u> </u>	
	Last Name	HAYES		First Name MATT		Middle Initial	
	Business Name	APPLE COMPUTE	RS	Business Phone (212) 3	326-4027	Business Fax() -	
	Business Address	1 INFINITE LOOP	<u> MS-58RD</u>			Mobile Phone () -	
	City	CUPERTINO	State CA	Zip 95014		E-Mail	
6	Design Applicar	nt's Statements and	Signatures				_
	ment, or both. I also under in exchange for special coment or to have knowingly the provisions of this code Name (print) JON JACKSON	orstand it is unlawful to give to a nansideration. Vodation is punished or allowed or negligantly fallsified or allowed or of a rule of any agency. I may	itly employee, or for ble by imprisonmen d to be faisified any / be barred from filln	a city employee to accept, any bei t or fine or both. I understand tha certificate, form, signed statemen ig further applications or document	nefit, monetary of if I am found and if I am found and if I am found and if I application, report is with the Depart Signature	Seal Seal Plea gn and date	
	<u> </u>			res Notary only required	_		-1
	imprisonment, or both. 1a the job or in exchange for false statement or to have required under the provision Name (print) MATT HAYES Signature	ilso understand it is unlawful to special consideration. Visuation sknowingly or negligestly falsific	o a city employs is purishable by important of a city employ of the property o	ee, or for a city employee to accep prisonment or fine or both. I under falgified any certificate, form, sig- parried from filing further application w York, County of:	ot, any benefit, m erstand that if I a ned statement, a ns or documents	iny statement is a misdemeanor and is punish one tary or otherwise, either as a gratuity for promotion after hearing to have knowingly or ne application, report or certification of the correct with the Department. Notary Seal	pnimohen vhead
	Internal Use Onl	у ////////////////////////////////////					
Staf	<u>f</u>	PW3 Cost	Details Valida	ation	Comr	nents (May include cost guidance.)	Initials
Pre-	Filer:	Accep	t Onginal	Revised Cost Needed	d L		1
Plan	Examiner/Project Ad	dvocate: Accep	t Original	Revised Cost Needed	d		
C of	O:	☐ Accep	t Original	Revised Cost Needed	d	A was by	
Pre-	Filer/C of O:	Accer	t Revised Subr	nission (Resolved)		-	

And the second s



PW1: Plan / Work Application

Must be typewritten.



1	Location Information Required for all applications.
	House No(s) 767 Street Name 5TH AVENUE
	Borough MANHATTAN Block 01294 Lot 00001 BIN 1036082 C.B. No. 105
	Wark on Floor(s) 1 Apt. / Condo No(s)
2	Applicant Information Required for all applications. Fax, mobile telephone and e-mail address are optional information.
	Last Name BELGARDE First Name MARK Middle Initial
	Business Name FLACK & KURTZ -CA Business Address 405 HOWARD STREET Business Address 405 HOWARD STREET Business Fax
	Business Address 405 HOWARD STREET Business Fax City SAN FRANCISCO State CA Zip 94105 Mobile Telephone
	E-Mail License Number 075053
	Choose one: X P.E. R.A. Sign Hanger Other, please specify:
,	
3	Filing Representative Complete only if different from applicant specified in section 2. Fax, mobile phone, and e-mail are optional info.
	Last Name JACKIER/MCPHERSON First Name PHILLIP/YVETTE Middle Initial
	Business Name JEROME S GILLMAN CONSULTING Business Telephone (212)349-9304
	Business Address 40 WORTH ST, SUITE 1630 Business Fax (212)349-9346
	City NEW YORK State NY Zip 10013 Mobile Telephone
	E-Mail PHILLIP@JEROMESGILLMAN.COM Registration Number
4	Filing Status Required for all applications. Choose one and provide specified associated information.
	Initial Filing 5, 7, 11, 12A, 25-26 Review Is requested under which Building Code? 2008
5	Job/Project Types Choose one and provide specified associated information.
	Alteration Type 1 6A-E, 8B-C, 9-10, 13C-F, 14 & Alteration Type 1, OT: "No Work" 8C, 9-10 & Full Demolition 6B, 8D, 9B-D, & 8-20, 22, PW1A, PD1, select all that apply: 12, 13C-F, 14, 18-19, 22, PW1A, PD1 13D-E, 14, 21A, 22 Sign 5A, 6B-D, 9B, 22-23 Change in Number of Stories 13C-E, 14, 20, 22 Change in Number of Dwelling Units Alteration Type 2 5A, 6A-D, 8A-B, 9-10, & Sign 5A, 6B-D, 9B, 22-23 Change in Number of Dwelling Units Alteration Type 3 5A, 6B-F, 8C, 9-10, 13C-E, 22 Change in Occupancy / Use New Building 6A-E, 8F-G, 9A-C,9L, 10, 12, 13A-E Change inconsistent with current Cert. of Occup. (13B: 2008 Code only), 14, 18-20, PW1A, PD1
6	Work Types Select all that apply but no more than allowed by job and filling type. "OT" required on all NB and Alteration 1 Initial applications.
	BL - Boiler PW1C

DOB Reference Number: T00000426268-000019
User Ref ID: 25051MR

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		PAGE 2
7 Plans/Construction Documents Submitted Plan	ns are required for most applications.	
□AR - Architectural □BP - BPP Checklist □DM - Den	nolition (Full/Partial) □ EN - Energy Ana	lysis FO - Foundation or NP - No Plans
MME - Mechanical □OT - Other □PL - Plum		□ZO - Zoning
8 Additional Information		
8A WT Cost WT Cost WT Cost	8B Is a building enlargement proposed	8C Estimated Job Cost \$
MH 60150	☐ No enlargement is proposed	8D Street Frontage: linear ft.
	☐Yes 12. PD1	8E Height: ft. Width: ft.
	☐ Horizontal ☐ Vertical	8F Name of cluster or development below:
	Additional Construction Floor Are	1
8G Total Construction Floor Area: sq. f	t. sq	ft. Project lead job no.
9 Additional Considerations, Limitations or Rest		
Yes No	Yes No	9F Structural Peer Reviewer License No.
9A Structural peer review required per BC §1627 //		P.E.
		9G Local Law No(s) Year
· ·		90 Local Law No(s) Year
Other, specify:		
Restrictive Declaration / Easement /f yes, 9M	Unmapped Street	OLL Malatia a Na (a)
☐ Zoning Exhibit (I, II, III. etc.) If yes. 9N	☐ ☐ Filing to Address Violation(s) If yes, 9F	9H Violation No(s)
 Requesting legalization of work where no work violations have been issued 	wo a troillien(e, n yee, en	
		01. 201. 0. 1. 1. 1. 1. (1)
9C Adult Establishment If yes, plot diagram (except		9i BSA Calendar No(s)
☐ ☐ Compensated Development (Inclusionary Housin	•· •	
☐ Low Income Housing (Inclusionary Housing)	☐ 🔀 Loft Board	
Single Room Occupancy (SRO) Multiple Dwellin	• •	9J CPC Calendar No(s)
☐ ☐ Filing includes Lot Merger / Reapportionment /f	· · · · · · · · · · · · · · · · · · ·	
9D Includes permanent removal of standpipe, sprink	•	
9E	C §28-101.5 If yes, 21B	9K High-Rise Team Tracking Number:
☐ Structural Stability affected by proposed work		
9L	tallation or replacement. [§ECC 404 and t	
9M CRFN(s) Restrictive Declaration / Easement (max. 4):		
9N CRFN(s) Zoning Exhibit (I, II, III, etc max. 4):		
10 NYCECC Compliance New York City Energy Conservation	Code	
☐ To the best of my knowledge, belief and professional judg	ment, all work under this application is in	compliance with the NYCECC*
Energy analysis is on another job number:		
Yes No		
☐ This application is, or is part of, a project that utili	-	ems
☐ This application utilizes trade-offs within a single		- NVOCOON II
To the best of my knowledge, belief and professional judg accordance with one of the following: Choose one	gment, all work under this application is ex	empt from the NTOECC" (II
The work is an alteration of a State or National history		
☐ The scope of work is entirely in a "low-energy buildin	•	
This is a post approval amondment and augment and	_	
☐ This is a post-approval amendment and exempt und "Note: Exceptions to Section ECC 101.4.3 are NOT exemptions. For except		
11 Job Description	11.	
REMOVE & REINSTALL DIFFUSERS & DUCTWOF	EK AS SHOWN ON DRAWINGS	<u> </u>
FILED HEREWITH. NO CHANGE IN USE, EGRE		
	44	B Primary application job no.
		ence Number: T00000426268-000019
	DOB REFEE	911CG NUMBOR: 100000425255-000019 User Ref ID: 25051MH
	-	01/11

PROFESSIONAL CERTIFICATION

PV	V1								
12	Zoning C	harac	teristics						
12A	Distric	t(s)				12B Street legal width: ft.			!
	Overla	y(s)				Street Status: Public Private			
;	Special Dis	t.(s)				If the zoning lot includes multiple			
•	Map Nun	ber				tax lots, list all tax lots here ▶			
12C	Proposed:	Use*	Zoning Floor Area	District	FAR	Proposed Lot Details:	Propose	ed Yard D	etails:
			sq. ft.	.]		Lot Type: Corner Interior Through	Check h	here if no y	yards: 🔲
•			sq. ft.	.]	1	Lot Coverage %		Front	Yard

ft. Lot Area Rear Yard sq. ft. sq. ft. sq. ft. Lot Width ft. Rear Yard Equivalent ft. Proposed Other Details: Side Yard 1 ft. sq. ft. ft. Enclosed Parking? Yes No Side Yard 2 sq. ft. sq. ft. If yes, no. of parking spaces: **Proposed Totals Existing Total** sq. ft. Penmeter 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 2008 Code equivalents only. *Residential w/other use. 13A Primary structural system, choose one: Masonry Concrete (CIP) Concrete (Precast) Steel (Structural) Steel (Cold-Formed) Steel (Encased in Concrete) ☐ Wood 13B Existing Proposed 13D Building Type: 1, 2, or 3 Family Mixed use building?‡ ☐ Yes Structural Occupancy Category ☐ No 2008 Code 2008 Code Seismic Design Category 13E Existing Proposed Designations? Designations? 13C Occupancy Classification⁴ ⊠Yes** **Building Height** ft. ft. _Yes ∐No]Yes ∏No Construction Classification _Yes ∐No **Building Stories** Dwelling Units Multiple Dweiling Classification **1968** Prior to 1968 13F Building was originally erected pursuant to which Building Code: 2008 The earliest Code with which this building or any part of it is required to comply: 2008 **1968** Prior to 1968 Fill Choose one. Not Applicable On-Site Off-Site Under 300 cubic yards 15 | Construction Equipment **Curb Cut Description** ☐ Chute Sidewalk Shed Size of cut (with splays): Construction Material: ft. Fence Size: BSA/MEA Approval No. Distance to nearest corner: linear ft. Supported Scaffold Other: to street: Fire Protection Equipment Tax Lot Characteristics Existing Proposed Original tax lots being merged or reapportioned (if applicable): Yes No Yes No Fire Alarm \Box $\Gamma 1$ Tentative tax lot numbers (new tax lots only): Fire Suppression Sprinkler Standpipe **Open Spaces** 20 | Site Characteristics Yes No Existing Proposed Existing Proposed

sq. ft.

Plaza Area

Parking Area

Loading Berths

sq. ft.

sq. ft.

sq. ft.

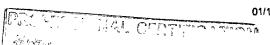
sq. ft. Arcade Area

sq. ft. Parking Spaces

sq. ft. Loading Berths

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sq. ft.



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Tidal / Fresh Water Wetlands

Urban Renewal

☐ Flood Hazard Area

☐ Fire District

PAGE 3

ft.

PAGE 4

☐ ☐ Mech	. filing is for a secondary str anical means* from out of be anical means* from within be lition work affects the exteri	ucture? If yes, specify structure? If yes, specify structuring? If yes, mechanic lifyes, describ	cture being d al means wi	emolish II demoli	ish: entire structure or part of structure	
	batement Compliance					
The scope of v	vork does not require relate	d asbestos abatement as de	fined in the	regulatio	e NYC Department of Environmental Protection (Di ons of the NYC DEP. oromulgated by the NYC DEP (15 RCNY 1-23(b)).	ΞP).
23 Sign						
Purpose:	Type:	Estimated Cost: \$		23A I	Illuminated type: Direct Flashing Indirec	:t
Advertising	Illuminated 23A	Total Square Feet:		١	Yes No	
Non-Advertisin		Height above Curb:	ft. in.	(If sign projects beyond building line is ow billed for annual permit? If no, specify in 2	
_	round Roof 238 Wall	Height above Roof:	ft. in.	000 0		
Yes No	nn ineide huilding ling?	f no eign nmieste hv:	e in		 Is roof sign tight, closed or solid? Sign wording. If extensive, provide only key wording. 	
	gn inside building line? / gned for changeable copy?	f no, sign projects by:	ft. in.	230 3	Sign wording. If extensive, provide only key wording	y.
		n this sign or location? <i>If ye</i> .	s 23G			
(==1) —		n arterial highway? <i>If yes,</i> 2		23D [Distance from Arterial Highway:	f
1 1 _		park 1/2 acre or more? If ye			Distance from Park 1/2 acre or more:	
T					OAC Sign Number:	
		above two questions <u>and</u> th per is required in section 23i			OAC Registration Number:	
24 Comments	Place additional comments	on an Al-1 form. See Guide	e for proper i	ncorpor	ration of professional certification statements.	
				-		
	Statements and Signat		•		is unlawful to give to a city smployes, or for a city employ	a to

DOB Reference Number: T00000426268-000019
User Ref ID: 25051MH

Fals impr emp prop puni hear knov sign	ificati risonn	rty Owner's Statements and Signatures on of any statement is a misdemeanor and is punishable by a fine or	
empropprop puni hear know signoviola	isonn loyee	on of any statement is a misdemeanor and is punishable by a fine or	
Deprifinal satis subrilette	ring to wingly ed stration : be be artime inspe- sfacto mittal ir of co ve aut	nent, or both. It is unlawful to give to a city employee, or for a city to accept, any benefit, monetary or otherwise, either as a gratuity for be accept, any benefit, monetary or otherwise, either as a gratuity for berforming the job or in exchange for special consideration. Violation is let by imprisonment or fine or both. I understand that if I am found after to have knowingly or negligently made a false statement or to have or negligently falsified or allowed to be falsified any certificate, form, attendent, application, report or certification of the correction of a required under the provisions of this code or of a rule of any agency, I arred from filing further applications or documents with the ent. Furthermore, I understand that I am responsible for insuring that a action be performed when the permitted work is complete, and that a rry report of final inspection be submitted, along with all required documents, so that the NYC Department of Buildings may issue a completion or certificate of occupancy within the time prescribed by law. It thorized the applicant to file this application for the work specified d all future amendments. I will not knowingly authorize any work that compliance with the New York City Energy Conservation Code	☐ Condo Unit Owner or Co-Op Tenant-shareholder 26A (Is the owner a non-profit organization? ☐ Yes ☑ No Name (please print): ROBERT SCHUBERT Relationship to Owner: SEN VP OF CONST Business Name/Agency: BOSTON PROPERTIES-LEXINGTON AVE Street Address: 599 LEXINGTON AVENUE: SUITE 180
(NY	CECC		E-Mail Address: RSCHUBERT@BOSTONPROPERTIES.COM
Yes	No □	Fee Deferred Request Statement	Signature and Date Description
		I hereby request a fee deferral for the work proposed on this application and understand that all fees must be paid before issuance of any Certificate of Occupancy or lob sign off.	26A Condo/Co-Op Board or Corporation Second Officer
		Fee Exemption Request Statement	Name (please print): ROBERT E SELSAN
	_	In accordance with §28-112.1 of the NYC Administrative Code I hereby state that the proposed work involves a building or property	Title: ,
		owned or used exclusively for the purposes indicated in such section.	Street Address: 90 CHURCH STREET, 7TH FLOOR
		Owner's Certifications Regarding Occupied Housing The site of the building to be altered or demolished, or the site of the	City: NEW YORK State: NY Zip: 10007
		new building to be constructed, contains one or more occupied dwelling units that will remain occupied during construction. These	Telephone Number: (212)748-7844 Fax:
		occupied dwelling units have been clearly indentified on the submitted construction documents.	E-Mail Address:
		The site of the building to be altered or demolished, or the site of the	Signature and Date*
	Chapters 3 and 4 of Title 26 of the New York City Administrative	*Signature required for authorized representative of Condo or Co-Op boar Second officer signature not required for corporations.	
		Code. If yes, select one of the following: The owner is not required to notify the Division of Housing and Community Renewal (DHCR) of the owner's intention to file because the nature and scope of the work proposed, pursuant to DHCR regulations, does not require notification.	26B Lessee Responsible for Annual Sign or Marquee Permi
			Name (please print):
			Relationship to Owner:
		The owner has notified the Division of Housing and Community	Business Name/Agency:
		Renewal (DHCR) of its intention to file such construction documents/apply for such permit and has complied with all	Street Address:
		requirements imposed by the regulations of such agency as preconditions for such (filing/application).	City: State: Zip:
_	_	Provide date DHCR notified: Owner's Certification for Adult Establishments	Telephone Number: Fax:
		I authorize and intend to create, enlarge, or extend an establishment	E-Mail Address:
		with adult activity and/or adult material as defined in ZR §12-10 "adult establishment" or related sign at the subject premises.	Internal Use Only
		Owner's Certification for Directive 14 Applications (if applicable) I have read and am fully aware of the applicant's statement that the	Pre-Filer Name:
		construction documents submitted and all construction documents related to this application will not require a new or amended	Pre-Filer Signature: Date:
		Certificate of Occupancy as there is no change in use, exits, or	Cost Estimate: \$
		occupancy. Furthermore, I understand that I am responsible for retaining a qualified design professional to perform a final	Amount Due: \$ Verified by ▼ Date \(\text{Verified by } \text{Verified by } \text{Verified by } \(\text{Verified by } \text{Verified by } \text{Verified by } \(\text{Verified by } \text{Verified by } \text{Verified by } \(\text{Verified by } \text{Verified by } \(\text{Verified by } \text{Verified by } \text{Verified by } \(\text{Verified by } \text{Verified by } \)
		inspection when the permitted work is complete and this professional must submit a satisfactory final inspection report to the NYC	Initial Amount Paid: \$
		Department of Buildings within the time following inspection prescribed by Department rule.	Balance Due: \$
		processed at a speciment two	Stamps, Certifications and Notes:

DOB Reference Number: T00000426268 User Ref ID: 25051MH

01/11 MAL CELLIATION THE PROPERTY OF EMPLOYOR



PW1: Plan / Work Application

Must be typewritten.



1	Location information Re	equired for all applications.		
	House No(s) 767	Street Name 5TH AV	PENUE	
	Borough MANHAT	TAN Block 01294	Lot 00001 BIN 103608	12 C.B. No. 105
	Work on Floor(s) 1	_		Apt. / Condo No(s)
_				
2	Applicant Information R	Required for all applications. Fa	ax, mobile telephone and e-mail ac	ddress are optional information.
	Last Name BELGAR	DE Firs	Name MARK	Middle Initial
	Business Name FLACK	& KURTZ -CA		Business Telephone (415) 398-3833
	Business Address 405 HO	WARD STREET		Business Fax
	City san fr	ANCISCO State CA	Zip 94105	Mobile Telephone
	E-Mail			License Number 075053
	Choose one: X P.E.	R.A. Sign Hanger	Other, please specify	:
_				
3	Filing Representative C	omplete only if different from a	oplicant specified in section 2. Fax	k, mobile phone, and e-mail are optional info.
	Last Name JACKIE	R/MCPHERSON Firs	Name PHILLIP/YVETTE	Middle Initial
	Business Name JEROME	s Gillman Consultin	<u> </u>	Business Telephone (212) 349 - 9304
	Business Address 40 WOR	TH ST, SUITE 1630		Business Fax (212)349-9346
	City NEW YO	RK State NY	Zip 10013	Mobile Telephone
	E-Mail PHILLI	P@JEROMESGILLMAN.COM		Registration Number
_				
4		-	and provide specified associated i	
L	Initial Filing 5, 7, 11, 12A, 25 Review is requested under wh		to Approval Actions 25-26 mend Existing Filing 4A	∐Reinstatement 24-26 □Withdrawel 26
		•	ubsequent Filing 6-7, 8A (Alt-2 on	
	Choose Standard Plan Exa		Approval Amendment (PAA) 4/	•
	one: Professional Certif	·	AA affect filing fees? Yes [Market Miller
	☐ Professional Cert.	of Objections A/1 New	(Superseding) Applicant 4A, 25	-26 allected by limitg.
5	Job/Project Types Choos	se one and provide specified a	ssociated information.	
	Alteration Type 1 6A-E, 8B-0	C, 9-10, 13C-F, 14 & Altera	tion Type 1, OT: "No Work" 8C,	9-10 & Full Demolition 6B, 8D, 9B-D, &
	18-20, 22, PW1A, PD1, select		C-F, 14, 18-19, 22, PW1A, PD1	13D-E, 14, 21A, 22
	☐Change in Exits		tion Type 2 5A, 6A-D, 8A-B, 9-10	
	Change in Number of Storie	<u> </u>	, 14, 20, 22 Non Time 2, 54, 68, 5, 80, 0, 40, 4	Subdivision 9B, 12A-B 13C-E. 22 □ Condominium □ Improved 17
	☐ Change in Number of Dwell☐ Change in Occupancy / Use		tion Type 3 <i>5A, 6B-F, 8C, 9-10, 1</i>	12, 13A-E 5A Directive 14 acceptance requested?
	☐ Change in Occupancy 7 Ose		2008 Code only), 14, 18-20, PW1A	· · · · · · · · · · · · · · · · · · ·
6	Work Types Select all that	t apply but no more than allowe	d by job and filing type. "OT" requ	ired on all NB and Alteration 1 Initial applications.
6A	□BL - Boiler PW1C	☐ FS - Fuel Storage PW10	C 20 PL - Plumbing PW1B	6E CC - Curb Cut 16
	☐ FA - Fire Alarm	☐ FP - Fire Suppression	☐ SD - Standpipe PW1B	6F OT/ANT - Antenna
	☐ FB - Fuel Burning PW1C	☐ MH - Mechanical	☐ SP - Sprinkler PW1B	☐ OT/BPP - Builders Pavement Plan 8D
6 B	□ EQ - Construction	6C ☐ OT/GC - General	6D OT - Other, describe:	OT/FPP - Fire Protection Plan
	Equipment 15	Construction		☐ OT/MAR - Marquee 8E, 26B

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PROFESSION DEPARTMENT OF BUILDINGS

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7	Pla	ns/Constru	ctio	n Documents	Su	bmitted Plan	s are req	ulred	for	most applications.					
	AR -	· Architectural		BP - BPP Chec	klist	□ DM - Dem	olition (F	ull/Pa	rtial) EN - Energy	v Analys	sis	☐FO - Foundation	or NP -	No Plans
C	ME ·	- Mechanical		OT - Other		⊠PL - Plumi	•			☐ST - Structi			□ZO - Zoning		
8	Ad	ditional Info	rm s	tion									<u> </u>		
	Щ.					<u> </u>	:								
8A		Cost	WT	Cost	wt	Cost	8B Is a	build	ling (enlargement prop	osed?	-	Estimated Job Cost	<u>\$</u>	
	PL	13250	L					lo eni	arge	ement is proposed	l	8D	Street Frontage:		linear ft.
							ΠY	es 1	2, P	D1		_	_ 	t. Width:	ft.
			<u> </u>			_	i] Hori				8F	Name of cluster or d	levelopmer	nt below:
			<u> </u>	l			<i>P</i>	Additio	onal	Construction Floo	_				
8G	Tota	I Construction	Fioc	or Area:		sq. ft.					sq. ft	ŧ	Project lead job no.		
9	Ad	ditional Con	sid	erations, Lim	itati	ons or Restr	ictions				_				
	Yes	No						Yes	No		į	9F :	Structural Peer Revi	ewer Licen:	se No.
9A		☐ Structural	pee	r review require	d pe	r BC §1627 If	es, 9F								P.E.
9B		☐ Filed to C	omp	ly with Local La	w	lf yes, 9G			X	Landmark		9G I	Local Law No(s)	Year	
		Other. spe	ecify	:						"Little E" Hazmat	Site				
		☐ Restrictive	e De	claration / Ease	men	t If yes, 9M				Unmapped Stree	et	-			
		☐ Zoning Ex	hibit	(I, II, III, etc.) <i>II</i>	yes,	9N						9H \	Violation No(s)		
				galization of wo			o a			Violation(s) If ye	s, 9H				
		permit vio	latio	ns have been is 	suec	1									
9C		☐ Adult Esta	blisl	hment <i>If yes, pi</i>	lot di	agram (except	DM)				CC	91 [BSA Calendar No(s)		
		☐ Compens	ated	Development (Inclu	sionary Housin	g)			Infill Zoning					
				lousing (Inclusio	•	•				Loft Board					_
		_		Occupancy (SR		•				Quality Housing		9J (CPC Calendar No(s)		
				Lot Merger / R						Site Safety Job/F		_			
9D										<u> </u>					
9E	9E Work includes partial demolition as defined in AC §28-101.5 If yes, 21B 9K High-Rise Team Tracking Number:									ber:					
				bility affected by			-11-41			18500 404		-1			
9L							allation c	r repi	ace	ment. [§ECC 404	and ou	<u> </u>			_
				eclaration / Eas		<u></u>									
9N	CRF	N(s) Zoning E	xhit	oit (I, II, III, etc	· max	c. 4):									
10	NY	CECC Comp	ollar	1CO New York Ci	ty End	ergy Conservation	Code								
	To ti	he best of my l	nov	dedge, belief an	d pr	ofessional judgi	nent. all	work	und	er this application	is in co	mplia	ance with the NYCE	CC*	
		Energy analys	sis is	on another job	num	ber:									
	Yes	No								•					
		☐ This applic	atio	n is, or is part o	f, a p	project that utiliz	es trade	-offs	amo	ng different major	system	ns			
_				n utilizes trade-						or this application	in over		om the NVCECCT in		_
				riedge, belief an f the following:		bressional juogi Phoose one	nent, an	WORK	una	er this application	is exem	nprn	om the NYCECC* in		
				eration of a Stat			c buildin	g.							
		The scope of	work	is entirely in a	"low-	energy building	" and is	limite	d to	the building envel	ope.				
		•		does not affec		•		-							
		•				•							ent of exemption on	attached d	lrawings.
11		Description		101,4.3 818 IVO	GA 67/	риона, гогоховрек	ma, unouk (ынриа		tatement and use the E	11A	7	lated DOB Job N	umbare	
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				OOR DRAINS E, EGRESS (DRAWIN	igs 1	FIL	ED HEREWITH.	•				
		AL WITHOUT		-, -, -, -, -, -, -, -, -, -, -, -, -, -	'										
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											440	Dei	magy application ich		
											118	- PM	mary application job	110.	

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12	Zoning Chai	racteristics						
12A	District(s)			12	B Street legal wid	th:	ft.	
	Overlay(s)				Street Statu	us: Public 🗀	Private	
	Special Dist.(s)				If the zor	ning lot includes	multinle	
	Map Number					ts, list all tax lots	•	
120	Proposed: Us	e* Zoning FI	oor Area Dist	rict FAR Pro	posed Lot Details:			Proposed Yard Details:
,,,	, rioposos. Ga	Zoming (sq. ft.		ot Type: Corne		Through	Check here if no yards: or
			sq. ft.		Lot Coverage		%	Front Yard
			sq. ft.		Lot Are	a	sq. ft.	Rear Yard
			sq. ft.		Lot Widti	h	ft.	Rear Yard Equivalent
			sq. ft.	Pro	posed Other Detai	ils:		Side Yard 1
			sq. ft.		Enclose	ed Parking?□Y	es 🏻 No	Side Yard 2
	Proposed To	otals	sq. ft.		If yes, no. of parks	ing spaces:		
	Existing 1	Total	sq. ft.		Perimeter \	Wall Height	ft.	
	*Use can be on	e of the following	ng: reside <u>ntial,</u> d	ommercial, manufa	acturing, or commi	unity facility. Lis	t only one	use per line
13	Building Cha	aracteristics	*Main use/don	inant occupancy p	er AC §28-101.5.	**Use 2008 Cod	le equival	lents only. ‡Residential w/other use.
134	Primary structu				Concrete (CIP)	Concre		
157	rriinaly structu	iai system, cho	use one.		Steel (Structural)		•	·
13B	<u> </u>		Existing	Propo	···			1, 2, or 3 Family Other
		upancy Catego	- mmmmm			Mixed	use buildi	
		Design Catego	- <i>www</i>	2008 Code Designations?	2008 Code Designations	105		Existing Proposed
13C	Occupan	cy Classification	1*	□Yes □No	⊠Yes**	Build	ling Heigh	nt ft. f
	Construct	ion Classificatio	n	□Yes □N0	□Yes □N	to Build	ing Storie	es
		ing Classification	n			Dw	elling Unit	
13F		_	- '	d pursuant to which			_	Prior to 1968
	The earliest C	ode with which	this building or	any part of it is req	uired to comply: [968 _	Prior to 1968
14	Fill Choose o	ne.						
	Not Applicable	☐ On-S	Site [Off-Site	Under 300 c	cubic yards		
_	<u> </u>			"		<u> </u>	1	
15	Construction	n Equipment					16	Curb Cut Description
	Chute	Side	walk Shed	Con	struction Material:			Size of cut (with splays):
	Fence	Siz	e:	linear ft. BSA/N	MEA Approval No.			Distance to nearest corner:
	Supported Scaf	fold	r:				t	to street:
17	Tax Lot Cha	racteristics					18	Fire Protection Equipment
	Original tax lots	heing merged /	v reapportioner	(if applicable):			<u> </u>	Existing Propose
		being merged (, reapportioned	т (паррисавіе).			-	Yes No Yes No
							_	Fire Alarm
	Tentative tax lot	numbers (new	tax lots only):					Fire Suppression
								Standpipe
19	Open Space		_		_		20	Site Characteristics
ш		Existing	Proposed		Existing	Proposed	┹	Yes No
ı	Plaza Area	sq. ft		ft. Arcade Area	sq. ft.	sq. ft	- r	Tidal / Fresh Water Wetland
	Parking Area	sq. ft		ft. Parking Spaces		3q. 1t	- [Urban Renewal
	Loading Berths	sq. ft	i 	ft. Loading Berths				☐ Fire District ☐ ☐ Flood Hazard Area
			<u> </u>				_ '	Li 1 1000 i lazai u Alea

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PVVI	PAGE 4
21 Demolition Details *Mechanical equipment other than handheld devices to be	used for demolition or removal of debris (BC §3306.4).
Yes No 21A	I demolish: entire structure or part of structure
22 Asbestos Abatement Compliance Choose one.	
☐ The scope of work requires related asbestos abatement as defined in the regulation ☐ The scope of work does not require related asbestos abatement as defined in the regulation ☐ The scope of work is exempt from the asbestos requirement as defined in the regulation.	regulations of the NYC DEP.
23 Sign	
Purpose: Type: Estimated Cost: \$	23A Illuminated type: Direct Flashing Indirect
Advertising Illuminated 23A Total Square Feet:	Yes No
Non-Advertising Non-Illuminated Height above Curb: ft. in.	 If sign projects beyond building line, is owner billed for annual permit? If no, specify in 26B
Location: Ground Roof 23B Wall Height above Roof: ft. in.	23B
Yes No The sign inside building line? If no, sign projects by: The sign inside building line? If no, sign projects by: The sign inside building line?	23C Sign wording. If extensive, provide only key wording.
□ □ Designed for changeable copy? If no, 23C	250 digit totaling. It obtained by provide daily not morally.
☐ Does an OAC have an interest in this sign or location? If yes, 23G	
☐ ☐ Within 900' and within view of an arterial highway? If yes, 23D	23D Distance from Arterial Highway:
☐ Within 200' and within view of a park 1/2 acre or more? If yes, 23E	23E Distance from Park 1/2 acre or more:
T	23F OAC Sign 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	23G OAC Registration Number:
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 accept, any benefit, monetary or otherwise, either as a gratuity for properly performing the job of imprisonment or fine or both. I understand that if I am found after hearing to have knowingly or falsified or allowed to be falsified any certificate, form, signed statement, application, report or cofficient of this code or of a rule of any agency, I may be barred from filing further applications or documents comply with the provisions of the NYC Administrative Code and other applicable laws and rules documents. I acknowledge that I have read and complied with all instructions pertaining to this Cluster Development Statement (if applicable): I hereby state that all specifications relating to number, except as specified herein. Yes No For Initial New Building and Alteration 1 applications filled under the 2008 NYC Building Code only: does this building qualify for high-rise designation?	in exchange for special consideration. Violation is punishable by negligently made a false statement of to have movingly or negligently eritication of the correction of a violation between the provisions ents with the Department. A presented of supervision of degree and belief, the construction documents and other intereson of the construction documents and other intereson application and supplementary schedules and miles. A provision of the pr
☐ 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.	P.E. / RA. Seal (apply seal then sign and date over seal)

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imprisonment, or both. It is unlawful to give to a city employee, or for a city employee in a country or derivate, where as a gratuly for purpose, and present in the country of the property of the country of the coun	pipsonment, or both. It is unlimited to give to a city employee to accept, any bearth mortality or otherwise, which as a gratuly for the proposed of the property of of the prope	Pi	ope	rty Owner's Statements and Signatures	
Signature and Date	Fee Deferred Request Statement Ihereby request a fee deferral for the work proposed on this application and understand that all leas must be paid before Ibeamaca of any Certification and statement In accordance with \$28-112.1 of the NYC Administrative Code In accordance with \$28-112.1 of the NYC Administrative Code In accordance with \$28-112.1 of the NYC Administrative Code Interest that the proposed work involves a building or property owned or used exclusively for the purposes indicated in such section. Owner's Certification Regarding Occupied Housing a Commodition to the sale of the subdiding to be caterated or demolished, or the site of the new building to be caterated or demolished, or the site of the new building to be caterated or demolished, or the site of the new building to be caterated or demolished, or the site of the new building to be constructed, contains one or more occupied dwelling units that will remain occupied dwill understand the property of the building to be altered or demolished, or the site of the new building to be constructed, contains occupied housing accommodiston subject to rent control or rent stabilization under Chapters 3 and 4 of 118e 26 of the New York City Administrative Code. If yes, asfect one of the following: The owner is notified to Division of Housing and Community Renewal (DHCR) of its owner's intention to file because the nature and scope of the work proposed, pursuant to file because the nature and scope of the work proposed, pursuant to file because the nature and scope of the work proposed, pursuant to file because the nature and scope of the work proposed, pursuant to file because the nature and scope of the work proposed, pursuant to file because the nature and scope of the work proposed, pursuant to file because the nature and scope of the work proposed, pursuant to file because the nature and scope of the work proposed, pursuant to file because the nature and scope of the work proposed. Pursuant to file because the nature and the file of t	imp empo pun hea kno sign viole may Dep fina satis sub lette I ha here is no	nsonrolloyees perly pishab inng to wingly ed stration relations in specification mittel in reference author and continuous in co	ment, or both. It is unlawful to give to a city employee, or for a city to accept, any benefit, monetary or otherwise, either as a gratulity for performing the job or in exchange for special consideration. Violation is the by imprisonment or fine or both. I understand that if I am found after to have knowingly or negligently made a false statement or to have your negligently falsified or allowed to be falsified any certificate, form, attement, application, report or certification of the correction of a required under the provisions of this code or of a rule of any agency, I arred from filing further applications or documents with the ent. Furthermore, I understand that I am responsible for insuring that a action be performed when the permitted work is complete, and that a iny report of final inspection be submitted, along with all required documents, so that the NYC Department of Buildings may issue a completion or certificate of occupancy within the time prescribed by law, thorized the applicant to file this application for the work specified did all future amendments. I will not knowingly authorize any work that compliance with the New York City Energy Conservation Code	□ Partnership □ DOE □ HPD □ NYS □ Corporation 26A □ Other Governm □ Condo Unit Owner or Co-Op Tenant-shareholder 26A Is the owner a non-profit organization? □ Yes ☑ Name (please print): ROBERT SCHUBERT Relationship to Owner: SEN VP OF CONST Business Name/Agency: BOSTON PROPERTIES-LEXINGTON AVENUE, SUITE 16 City: NEW YORK State: NY Zip: 1002/2 Telephone Number: (212) 326-4055 Fax: (212) 326-40
Interests required to the files must be paid before [sausnase of any Cartificate of Occupancy or lob sign off.] Fee Exemption Request Statement Proposed with involves a building or property owned or used acculately for the purposes indicated in a such section. Street Address: 90 CHURCH STREET, 7TH FLOOR	hereby request a fee deferral for the work proposed on this application and understand that all fleas must be gald before issuance of any certificate of Occupancy or lob sign off. Fee Exemption Request Statement in accordance with 32s-1123 of the NYC Administrative Code! In accordance with 32s-1123 of the NYC Administrative Code! In accordance with 32s-1123 of the NYC Administrative Code! In accordance with 23s-1123 of the NYC Administrative Code! In accordance with the proposed work involves a building or property owned or used exclusively for the purposes indicated in such section. Owner's Cardifications Regarding Occupied Housing The site of the security of developing the constructed, contains one or more occupied to exclusive develing units have been clearly intentified on the submitted construction documents. The site of the building to be altered or demolished, or the site of the submitted construction documents. In the site of the submitted construction documents and the constructed, contains accorpied housing accommodations subject for end control or real control cort for end control or real stabilization under Chapters 3 and 4 of Title 2s of the New York City Administrative Code! It yes, select one of the following: The owner is a notified the Division of Housing and Community Renewal (DHCR) of its owner's 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 (Plingiapplication). Provide date DHCR notified: The provided are DHCR notified in an experiment in the the construction for Adult Establishmental authorize and instend to cross, endings, or extend all accommodations are all intended to the provision of the publication of the provision of the publication of the publication. Provide date DHCR notes, endings, or extend all accommoda				——————————————————————————————————————
Pee Exemption Request Statement In accordance with §28-112.1 of the NYC Administrative Code In accordance with §28-112.1 of the NYC Administrative Code Title: Street Address: 90 CRURCH STREET, 7TH FLOOR owned or used exclusively for the purposes indicated in such section. Street Address: 90 CRURCH STREET, 7TH FLOOR owner's Cartifications Regarding Occupied Mouling in 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 indentified on the submitted construction documents. Telephone Number: (212) 748-7844 Fax: Tel	Ree Exemption Request Statement In accordance with \$28-112.1 of the NYC Administrative Code In accordance with \$28-112.1 of the NYC Administrative Code Interest State that the proposed work involves a building or properly owned or used accutaively for the purposes indicated in such section Owner's Cartifications Regarding Occupied Housing City: NEW YORK State: NY Zip: 1000 The site of the building to be aitered or demolished, or the site of the submitted dwelling units that will remain occupied during construction. These occupied dwelling units was been clearly indentified on the submitted donatruction documents.			I hereby request a fee deferral for the work proposed on this application and understand that all fees must be paid before	- Conser
in accordance with \$28-112.1 of the NYC Administrative Code I hereby state that the proposed work involves a building or property owned or used exclusively for the purposes indicated in such section. □ Owner's Certifications Regarding Occupied Mousing The site of the new building to be actived or demolished, or the site of the new building to be constructed, contains one or more occupied dwelling units have been clearly indentified 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 one or more occupied welling units have been clearly indentified on the submitted construction documents accordance acc	In accordance with \$28-112.1 of the NYC Administrative Code I hereby state that the proposed work involves a building or properly owned or used acculaively for the purposes indicated in such section. Owner's Certifications Regarding Occupied Housing The site of the building to be altered or demolished, or the site of the building to be altered or demolished, or the site of the submitted construction accuments. The site of the building to be altered or demolished, or the site of the submitted construction accuments. The site of the building to be constructed, contains one or more excupied detailing to be constructed, contains accupied housing accommodations subject to rent control or rent stabilization under Code. If yes, select one of the following: The owner is not required to notify the Division of Housing and Community Renewal (DHCR) of the owner's intendion to file because the nature and scope of the work proposed pursuant to DHCR regulations, does not require notification. The owner has notified the Division of Housing and Community Renewal (DHCR) of the intendion to file such construction documents/apply for such permit and has compiled with all requirements imposed by the regulations of such agency as preconditions for such permit and has compiled with all requirements imposed by the regulations of such agency as preconditions for such permit and has compiled with all requirements imposed by the regulations of such paging or extend and are subject premises. Owner's Cartification for Adult Establishments I authorize and intend to create, enlarge or extend and assumption and the construction documents submitted and all construction documents submitted and all construction documents submitted and in construction documents sub	П			Name (please print): ROBERT & SELSAN
owner's Cartification for a grading occupied Mousing The site of the building to be altered or demolished, or the site of the new building to the constructed, contains one or more occupied develling units have been clearly indentified on the submitted construction documents. The site of the building to be altered or demolished, or the site of the new building to be altered or demolished, or the site of 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 the norm to building to be constructed. Or contains occupied the norm to building to be altered or demolished, or the site of the new building to be altered or demolished, or the site of the new building to be altered or demolished, or the site of the new building to be altered or demolished, or the site of the new building to be altered or demolished, or the site of the new building to be altered or demolished, or the site of the new building to be altered or demolished, or the site of the new building to be altered or demolished, or the site of the new building to be altered or demolished, or the site of the new building to be altered or demolished, or the site of the new building to be altered or demolished, or the site of the new building to be altered or demolished, or the site of the new building to be altered or demolished, or the site of the new building to be altered or demolished, or the site of the new building to be altered or demolished, or the site of the new building to be altered or demolished, or the site of the new building to be altered or demolished, nor the site of the building to the site of the new building to be altered or demolished, nor the site of the building to the site of the new York Cade. If yes, safect one of the following inspection The owner is not required to notify the two York of the subject or the site of the new building to be altered or demolished, or the site of the new building to be altered or demolished, or	Sireet Address: 90 CRURCH STREET, 7TH FLOOR Owner's Cartifications Regarding Occupied Housing The site of the building to be altered or demoished, or the site of the new building to be constructed, contains one or more occupied welling units that will remain occupied during construction. These occupied dwelling units have been clearly indentified on the submitted construction documents. The site of the building to be altered or demoished, or the site of the new building to be constructed, contains occupied housing accommodations subject to rent control or net stabilization under Chapters 3 and 4 of Title 25 of the New York City Administrative Code. If yes, select one of the following: The owner is not required to notify the Division of Housing and Community Renewal (DHCR) of the owner's intention to fire North and the submitted and a construction documents'apply for such permit and has compiled with all requirements imposed by the regulations of such agency as preconditions for such (filinglapplication). Provide date DHCR notified: Owner's Cartification for Adult Establishmenta I authorize and intend to residate dign at the subject premises, with adult activity and/or adult material as defined in ZR §12-10 "Adult establishment" or related sign at the subject premises, related to this application will not require a new or amended Cartificate of Occupancy as there is no change in use, exits, or occupancy. Furthermore, I understand that all am responsible for retaining a qualified design professional must submit a satisfactory final inspection report to the NYC Department of Buildings within the time following inspection PROFESSI NAL CERTIFICATION PROFESSI NAL CERTIFICATION Provide and Provided Adventised Provided Adventised Provided	u	u	In accordance with §28-112.1 of the NYC Administrative Code I	
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PW1B: Schedule B BUILDINGS Plumbing, Sprinkler, Standpipe Must be typewritten.

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^{**} Must be off domestic.

* Indicates test may be required.