



**PW1: Plan / Work Application**  
Must be typewritten.

Orient and affix BIS job number label here

**1 Location Information** *Required for all applications.*

House No(s)	Street Name			
Borough	Block	Lot	BIN	C.B. No.
Work on Floor(s)	Apt. / Condo No(s)			

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

Last Name	First Name	Middle Initial
Business Name	Business Telephone	
Business Address	Business Fax	
City	State	Zip
E-Mail	License Number	
Choose one: <input type="checkbox"/> P.E. <input type="checkbox"/> R.A. <input type="checkbox"/> Sign Hanger <input type="checkbox"/> Other, please specify: _____		

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

Last Name	First Name	Middle Initial
Business Name	Business Telephone	
Business Address	Business Fax	
City	State	Zip
E-Mail	Registration Number	

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

<input type="checkbox"/> <b>Initial Filing</b> 5, 7, 11, 12A, 25-26 Review is requested under which Building Code? <input type="checkbox"/> 2008 <input type="checkbox"/> 1968 <input type="checkbox"/> Prior to 1968 Choose one: <input type="checkbox"/> Standard Plan Examination or Review <input type="checkbox"/> Professional Certification PC1, POC1 <input type="checkbox"/> Professional Cert. of Objections A11	<input type="checkbox"/> <b>Prior to Approval Actions</b> 25-26 <input type="checkbox"/> Amend Existing Filing 4A <input type="checkbox"/> Subsequent Filing 6-7, 8A (Alt-2 only), 11 <input type="checkbox"/> <b>Post Approval Amendment (PAA)</b> 4A, 6, 24-25 Will PAA affect filing fees? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> <b>New (Superseding) Applicant</b> 4A, 25-26	<input type="checkbox"/> <b>Reinstatement</b> 24-26 <input type="checkbox"/> <b>Withdrawal</b> 26 <input type="checkbox"/> Specified in 4A and 6 <input type="checkbox"/> Entire Job 4A Indicate existing document number affected by filing: _____
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**5 Job/Project Types** *Choose one and provide specified associated information.*

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

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

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

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

**8 Additional Information**

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

**9 Additional Considerations, Limitations or Restrictions**

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

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

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

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


11B Primary application job no. \_\_\_\_\_



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

Yes No  
 21A   Demo. filing is for a secondary structure? *If yes, specify structure being demolished:*  
  Mechanical means\* from out of building? *If yes, mechanical means will demolish:*  entire structure or  part of structure  
  Mechanical means\* from within building? *If yes, describe equipment proposed:*  
 21B   Demolition work affects the exterior building envelope

**22 Asbestos Abatement Compliance** Choose one.

The scope of work requires related asbestos abatement as defined in the regulations of the NYC Department of Environmental Protection (DEP).  
 The scope of work does **not** require related asbestos abatement as defined in the regulations of the NYC DEP.  
 The scope of work is exempt from the asbestos requirement as defined in the regulations promulgated by the NYC DEP (15 RCNY 1-23(b)).

**23 Sign**

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

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

Falsification of any statement is a misdemeanor and is punishable by a fine or imprisonment, or both. It is unlawful to give to a city employee, or for a city employee to accept, any benefit, monetary or otherwise, either as a gratuity for properly performing the job or in exchange for special consideration. Violation is punishable by imprisonment or fine or both. I understand that if I am found after hearing to have knowingly or negligently made a false statement or to have knowingly or negligently falsified or allowed to be falsified any certificate, form, signed statement, application, report or certification of the correction of a violation required under the provisions of this code or of a rule of any agency, I may be barred from filing further applications or documents with the Department. I prepared or supervised the preparation of the construction documents and specifications herewith submitted and to the best of my knowledge and belief, the construction documents and work shown thereon comply with the provisions of the NYC Administrative Code and other applicable laws and rules,  (←check here if) except as set forth in the accompanying documents. I acknowledge that I have read and complied with all instructions pertaining to this application and supplementary schedules submitted.

**Cluster Development Statement** (if applicable): I hereby state that all specifications relating to this job are identical to those previously filed under the group lead job number, except as specified herein.

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

Name (please print) \_\_\_\_\_  
 Signature \_\_\_\_\_ Date \_\_\_\_\_  
 P.E. / R.A. Seal (apply seal, then sign and date over seal)

**26 Property Owner's Statements and Signatures**

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

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

Yes No

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

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

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

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

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

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

**Provide date DHCR notified:**

**Owner's Certification for Adult Establishments**  
I authorize and intend to create, enlarge, or extend an establishment with adult activity and/or adult material as defined in ZR §12-10 "adult establishment" or related sign at the subject premises.

**Owner's Certification for Directive 14 Applications (if applicable)**  
I have read and am fully aware of the applicant's statement that the construction documents submitted and all construction documents related to this application will not require a new or amended Certificate of Occupancy as there is no change in use, exits, or occupancy. Furthermore, I understand that I am responsible for retaining a qualified design professional to perform a final inspection when the permitted work is complete and this professional must submit a satisfactory final inspection report to the NYC Department of Buildings within the time following inspection prescribed by Department rule.

Owner type:  Individual  DCAS  HHC  NYCHA  
 Partnership  DOE  HPD  NYS  
 Corporation 26A  Other Government  
 Condo Unit Owner or Co-Op Tenant-shareholder 26A  
 Is the owner a non-profit organization?  Yes  No

Name (please print): \_\_\_\_\_

Relationship to Owner: \_\_\_\_\_

Business Name/Agency: \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Telephone Number: \_\_\_\_\_ Fax: \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

Signature and Date

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

Name (please print): \_\_\_\_\_

Title: \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Telephone Number: \_\_\_\_\_ Fax: \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

Signature and Date\*

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

**26B Lessee Responsible for Annual Sign or Marquee Permit**

Name (please print): \_\_\_\_\_

Relationship to Owner: \_\_\_\_\_

Business Name/Agency: \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Telephone Number: \_\_\_\_\_ Fax: \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

Internal Use Only	
Pre-Filer Name:	
Pre-Filer Signature:	Date:
Cost Estimate: \$	
Amount Due: \$	Verified by ▼ Date ▼
Initial Amount Paid: \$	
Balance Due: \$	
Stamps, Certifications and Notes:	