

R. I. P. C. C., INC
325 Broadway, Suite 304, NY, NY 10007
TEL: (212) 334-7400 Email: CONTACT@RIPNY.com

Client: John Pasquale

Date: 11 / 29 / 2022

RIP Job ref #: 18-198

Filing Type: **ALT 1 / ALT 2 / ALT 3 / PA / ALT -CO / NB**

RIP Project Name: Heat Me

DOB E-file/HUB/ Build App # M00350703

Location: 53 Wooster St Boro MN

(Initial / SUB / PAA) Doc: P1 # of forms uploaded: 1

Checked boxes represent enclosed City Agency application approvals: forms, plans or permits.

<input type="checkbox"/>	Initial filing or (SUB) Subsequent Document	<input checked="" type="checkbox"/>	Post Approval Amendment (PAA) or Supersede	<input type="checkbox"/>	Reinstatement, Withdrawal or Sign off
<input type="checkbox"/>	Work Permit – Initial / Renewal / Change of Contractor	<input type="checkbox"/>	Temp CO / Final C of O TPA / PA / LNO	<input type="checkbox"/>	Determination / Clarification of Building or Zoning code

Approved Work Types: GC ST EQ: _____ / PA TPA / OT-Other: _____ / No work: _____

MS/MH PL SP SD BE FO SOE PMM Earthwork

Plans Enclosed: EQ AR/GC ST FO MS/MH EN PL SP SD BE PA ZO SOE PMM / OT: _____ / None

<input type="checkbox"/>	DOB E-filing, HUB, DOB Now Build, LPC Receipt(s) of pymt Xerox of Check(s) – if applicable.	<input type="checkbox"/>	DOB Letter of No Objection (LNO) to Eating or Drinking Est -or- No C of O : Affirmation of LEGAL use of premises
1	DOB Now Build Job Filing PDF (E-forms listed below)	<input type="checkbox"/>	NYC DOB CERTIFICATE of OCCUPANCY (C/O): Temporary (TCO) -or- Final / Xerox -or- NYC DOB Certified copy
<input type="checkbox"/>	EF-1 (E-filing Cover Page) New BIS E-filing or HUB filings only	<input type="checkbox"/>	Build Now PA: Place of Assembly (for Occupancy above 74 persons)
<input type="checkbox"/>	ACP-5 Asbestos Report (Lab results- no asbestos present) -or- ACP-20/21 (asbestos present and abated aka "removed")	<input type="checkbox"/>	Build Now Place of Assembly (PA) – TPA Temporary PA -or- PA Permanent Certificate of Operation
<input type="checkbox"/>	PW-3 Cost Affidavit: Proposed Estimate -or- Final Cost (sign off)	<input type="checkbox"/>	LOFT BOARD: LNO Certificate <input type="checkbox"/> HPD I-Cards
1	PW-1 (PLAN / WORK description) Initial -or SUB-or- PAA	<input type="checkbox"/>	DOB Notice: Audit Objections or Rescission of Intent to Revoke
<input type="checkbox"/>	PW-1A/BSO/JSO (E-file Sch. A) or ALT – CO ONLY: Building Occupancy/Use description by floors	<input type="checkbox"/>	ZRD-1 / CCD-1 FORM: Acceptance or Rejection of Audit Objections
1	PW-1B (PLUMBING / SPRINKLER / Standpipe) or PW-1C (Boiler Equipment-or- Fuel Storage)	<input type="checkbox"/>	ST-1 (Street Tree Checklist) ALT 1, ALT-CO & NB ONLY
<input type="checkbox"/>	TR-1(Special Inspections) INITIAL -or- FINAL/ TR2 & TR3	<input type="checkbox"/>	PD-1: Plot Diagram (ALT CO -or- New Building (NB) Only)
<input type="checkbox"/>	TR-8 (ECCNYC Progress Inspections) INITIAL -or- FINAL	<input type="checkbox"/>	City Agency Violation copies: _____
<input type="checkbox"/>	POC-1 (owner attestation) Pro Certification <input type="checkbox"/>	<input type="checkbox"/>	AEU-2 / AEU20: Certificate of Correction _____with Statement
<input type="checkbox"/>	Tenant Protection request TPP-1 (RES & Mixed use) <input type="checkbox"/>	<input type="checkbox"/>	PW-4 form or DOB Now MS scope - Equipment Use Permit (EUP) / Certificate of Compliance (COC) for proposed HVAC Equipment
<input type="checkbox"/>	Landmark Approval Docket # _____ <input type="checkbox"/>	<input type="checkbox"/>	DOB Now MS COC Certificate of Compliance or E-file Form FRM25A: Installed HVAC Equipment Use Permit Card(s)
1	AI-1 (Additional Information): Revised Drawings -or- Schedule B Gas Equipment specs, Audit Objection response	<input type="checkbox"/>	PC-1 Checklist <input type="checkbox"/> PW-7 LOC Request <input type="checkbox"/> EN-2 <input type="checkbox"/> Letter of Completion
1	DOB BIS, DOB Now Build or LPC Approved Plan/Sketch set: Electronic Approval Stamp # of sheets <u>5</u> in full set	<input type="checkbox"/>	Misc. Forms:
<input type="checkbox"/>	PW-2 Work Permit form (7am-6pm) -or- DOB AHV (After Hours Variance) <input type="checkbox"/> HIC-1 <input type="checkbox"/> L2	<input type="checkbox"/>	
<input type="checkbox"/>	Work Permit Card(s): REG (Mon-Fri 7a-6p ONLY) -or- AHV (Mon-Fri 6p-11p) -or- AHV Weekend Hours (Sat/Sun 9a-5p)	<input type="checkbox"/>	

Summary:

Amendment filed to revised PL gas scope of work with plan changes is approved at DOB Now Build. Save this PDF for your records.

Next steps: New Master Plumber must obtain a work permit renewal with changes to contractor at DOB Now Build

After all work is complete, email INFO@RIPNY.COM to begin the sign off process.

Always Keep this approval package in a SECURE, FIRE/WATERPROOF lock box onsite and readily accessible for inspections.

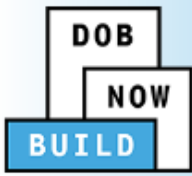
ATTN! Avoid violations Post work permits and TPP conspicuously on site! Regular Work Permits are valid Mon-Fri 7am to 6pm only!

Contractor **MUST** request to file an after-hours variance permit application for nighttime or wknd permits, pursuant to §28-103 of this chapter.

CLIENTS are responsible for requesting renewals of work Permit and/or TCO two weeks prior to expiration, and application sign off at completion of work via email, so that RIP may review the application and submit a request for final sign-off at the NYC DOB. Section-116.2.4.2 of Building Code- states, "final inspection shall be performed after all work authorized by the work permit is completed, no later than one (1) year from the date of the expiration of the last valid permit".

Thank you,
Steven Salvesen
President

PACKAGED BY: Jrivera@ripny.com



Job Filing Highlights

Location:	53 WOOSTER STREET MANHATTAN 10013
BIN:	1007068
Job Number:	M00350703-P1
Filing Type:	Post Approval Amendment
Job Type:	Alteration
Job Status:	Job in Process
Current Filing Status:	Approved
Work Type(s):	Plumbing
Job Filing Review Type:	Professional Certification
Created On:	02/04/2022
Parent Job Filing Number:	M00350703-11
Work Without Permit Violation:	No
Estimated Job Cost:	\$5,000.00
Total Job Cost:	\$5,000.00
TPP Applicable:	No
Owner Type:	Individual
Building Type:	2 Family
Project Number:	

Payment Summary

Filing Fee:	\$130.00
Legalization Fee:	\$0.00
Record Management Fee:	\$45.00
Post Approval Amendment Fee:	\$100.00
In Conjunction Fee:	\$0.00
Total Fee:	\$275.00
Amount Paid:	\$275.00
Amount Due:	\$0.00

Location Information

House Number: 53
Street Name: WOOSTER STREET
Borough: MANHATTAN

Block: 475
Lot: 17
BIN: 1007068

Community Board: 102
Zip Code: 10013

Work on Floors

Work Type	Location	Floor From	Floor To	Description of Location
Plumbing	Cellar			Boiler Room
Plumbing	Floor Number(s)	001	001	
Plumbing	Roof			

Stakeholders

Applicant Information

Email: EDGUTERMAN@AOL.COM
License Type: Professional Engineer
License Number: 061893

Last Name: GUTERMAN
First Name: EDWARD
Middle Initial:

Business Name: RIP CONSTRUCTION CONSULTANTS
Business Telephone: 2123347400
Business Address: 325 BROADWAY

City: NEW YORK
State: NY
Zip Code: 10007

Owner Information

Email: JOHN@PEPREALESTATE.COM
Owner Type: Individual
First Name: JOHN

Middle Initial:
Last Name: PASQUALE
Title:

Business Name/Agency name: PEP REAL ESTATE
Street Address: 51 WOOSTER ST
City: NEW YORK

State: NY
Zip Code: 10013
Telephone Number: 6463076418

Filing Representative Class I/Preparer

Email:
CONTACT@RIPNY.COM
Middle Initial:

Registration Number:

Last Name:
MCKEVENY

First Name:
THOMAS
Business Name:

Business Telephone:
2123347400
State:
NY

Business Address:
325 BROADWAY, SUITE
Zip Code:
10007

City:
NEW YORK

Delegated Associates (Filing Representative Class II or Other Licensee)

Name:	Email:	License:
STEVEN SALVESEN	MEETINGS@RIPNY.COM	X - 002920

Filing Review Type, Work Type/Filing Includes

Filing Includes:

New Work: Yes Legalization: ---

Filing Review Type:

Professional Certification

Is this an application for an approved project? No

Selected Work Type(s):

Plumbing

Additional Information

Estimated Job Cost \$:

\$5,000.00

Total Construction Floor Area (Square Feet):

200

In Conjunction New Building BIS Job Numbers:

Is this job related to any New Building filed in BIS?

No

Related DOB NOW/BIS Job Numbers:

Is this job related to any other jobs filed in BIS/DOB NOW?

Yes

Related BIS/ DOB Job Number:

140928021,
M00350247

Additional Considerations, Limitations or Restrictions

Landmark Docket Number:

exempt

Review is requested under which building code?	2014
Alteration required to meet New Building requirements	No
Alteration is a major change to exits	No
Alteration in occupancy or use	No
Alteration is inconsistent with the current certificate of occupancy	No
Alteration in number of stories	No
Loft Board	No
Adult Establishment	No
Single Room Occupancy (SRO) Multiple Dwelling	No
Little 'E' or RD Site	No
Restrictive Declaration/Easement	No
Filing to comply with Local Laws	No
Filing to Address Violations	No
BSA Calendar Numbers	No
CPC Calendar Numbers	No
Work includes modular construction under New York State jurisdiction	No
Work includes modular construction under New York City jurisdiction	No
Does the PL work impact the water supply to the Sprinkler and/or Standpipe system?	No
Are you using alternative materials that require an OTCR review and approval?	No

Section 10 NYCECC Compliance

NYCECC Compliance

To the best of my knowledge, belief and professional judgment, all work under this application is in compliance with the NYCECC

To the best of my knowledge, belief and professional judgment, all work under this application is exempt from the NYCECC or the work does not require any TR8 Energy Code Progress Inspections, in accordance with one of the following (choose one):

Yes

Work does not require any TR8 Energy Progress Inspections.

Job Description

Job Description for New Work (printed on work permit):

MODIFY EXISTING GAS-FIRED PLUMBING FIXTURES. INSTALL NEW COMBINATION FURNACE/ AIR CONDITIONER AT CELLAR AS PER PLAN. ASSOCIATED VENTILATION WORK FILED INCONJUNCTION WITH MSM00350247 AND GC 140928021. No change to use, egress or occupancy proposed.

Site Characteristics

Tidal Wetlands	No
Coastal Erosion Hazard Area	No
Fire District	Yes
Freshwater Wetlands	No
Urban Renewal	No
Flood Hazard Area	Yes

Flood Hazard Area Information

Substantial Improvement?	No
Substantially Damaged?	No
Flood shields part of proposed work?	No

Asbestos Abatement Compliance

The asbestos-related compliance is addressed in an associated NB job	---
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 is not an asbestos project as defined in the regulation of the NYC DEP. DEP Control Number is required	Yes

DEP ACP-5 Control Number OR ACP20/21:

1693114

Certificate Number of the Investigator:

117707

The scope of work is exempt from the asbestos requirement as defined in the regulation promulgated by the NYC DEP (15 RCNY 1-23(b)) or is an alteration to a building constructed pursuant to plans submitted for approval on or after April 1, 1987, in accordance with 28-106.1	---
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Comments

THIS PAA FILED FOR MINOR PLAN CHANGES TO LAYOUT AND PLUMBING SCOPE OF WORK PROPOSED UNDER M00350703. SUBMITTING AI-1 WITH COMPLETE PLAN SET FOR PLAN EXAMINATION REVIEW.

Zoning Information

Building Characteristics

	Existing	Proposed
Do the 2022 Code designations apply to Occupancy Classification?	No	No
Occupancy Classification	J-3 - Residential (1 & 2 Family House)	J-3 - Residential (1 & 2 Family House)
Do the 2022 Code designations apply to Construction Classification?	No	No
Construction Classification	3 - Non-fireproofed Structures (Old Code)	3 - Non-fireproofed Structures (Old Code)

Multiple Dwelling Classification	Not Applicable	Not Applicable
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Building Type

2 Family

Mixed use building?	Yes
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Dwelling Units/Density

	Existing	Proposed
Dwelling Units (Building)	2	2
Dwelling Units (Lot)	2	2

Plumbing Scope of Work

Storm: ---
Gas: Yes
Plumbing-Sprinkler: ---
Medical Gas: ---
Water/Sanitary: ---

Selected Scope of Work

Gas:

Scope Includes	Type
New Installation	
Modification	Replacement
Modification	Cap/Removal

Gas Piping Involved?

Yes

Operating Pressure:

Less than or equal to 1/2 psig

Type of Meter

Individual: Yes
Common: ---
Not Applicable: No

Work on Floor(s)

Type	Location	Floor From	Floor To	Quantity
Individual	Cellar			2

Riser Information:

Applicable

Work on Floor(s)

Location	Floor From	Floor To	Quantity
Floor Number(s)	CEL	CEL	1
Floor Number(s)	CEL	ROF	1

Gas Usage

Cooking-Residential:	Yes
Cooking-Commercial:	---
Hot Water:	Yes
Heating:	Yes
Burner:	---
Generator/Co-Generators Processing:	---
Other Gas Appliances/Equipment:	Yes
Other: GAS-FIRED HVAC	
Not Applicable:	---

Appliances/Equipment

Gas Booster Pump:	No
Cooking Equipment (non-residential):	No
Cooking Equipment (residential):	Yes
Quantity:	1
Gas Boiler (<350K, non-comm, 6 family):	No
Gas Burner:	No
Gas Barbeque:	No
Gas Combination Unit (Heat & HW Coil):	No
Gas Dryer:	No
Gas Furnace:	Yes
Quantity:	2
Gas Water Heater:	Yes
Quantity:	2
Non-Gas Water Heater:	No
Emergency/Co-Generator: Microturbine:	No
Emergency/Co-Generator: Engine:	No
Emergency/Co-Generator: Fuel Cell:	No
Other:	No

Initial Cost Details

Category of Work	Description of Work	Area/Units	Unit Cost	Total Cost
Plumbing	CAP AND REMOVE GAS PIPING FROM CELLAR TO 1ST FLOOR, TO REMOVE GAS RANGE AT 1ST FLOOR.	1	\$1,000.00	\$1,000.00
Plumbing	DIRECT REPLACE RTU-1 TO EXISTING GAS CONNECTION AT ROOF AS PER PLAN. GAS END USAGE (2) GAS FURNACES, AND (2) EXISTING HWH AT CELLAR. AO SMITH MODELS #XCR 40 400 (40 GAL) SN#9212092005, 40K BTU and #XCG 50 400 (50 GAL) SN #9212119005, 40K BTUS	1	\$1,500.00	\$1,500.00
Plumbing	INSTALL NEW GAS PIPING TO COMBINATION FURNACE/ AIR CONDITIONER AT CELLAR AS PER PLAN.	1	\$1,500.00	\$1,500.00
Plumbing	DIRECT REPLACE METER AT CELLAR ON COMMERCIAL RISER FOR COMMERCIAL USE. (SECOND METER AT CELLAR EXISTING FOR RESIDENTIAL USE).	1	\$1,000.00	\$1,000.00

Work Category Total Cost: \$5,000.00

Total Job Cost (Initial): \$5,000.00

Special Inspection Categories

Requirement	Agency No.	Identified	Certified	Waived	Special Inspector	PAA
Fire-Resistant Penetrations and Joints	001210	Yes	No	No	MATTHEW DECONZO	No

Progress Inspection Categories

Requirement	Identified	Certified	Waived	Progress Inspector	PAA
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Additional Supporting Documents

Document Name	Document Status	Prior To
Proof of Historic Building	Accepted	Approval

Required Documents

Document Name	Document Status	Prior To
DPL-1: Design Professional Seal & Signature	Accepted	Approval
Landmark Approval	Accepted	Approval
Plans/Sketch - Plumbing	Accepted	Approval
DEP ACP-5: Asbestos Assessment Report	Accepted	Approval
Tenant Protection Plan	Accepted	Approval

Applicant of Record's Attestation

Plans/Sketches (PW1)

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, 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.

Cost Affidavit (PW3)

I hereby state the information on this form is correct and complete to the best of my knowledge. I understand falsification of any statement is a misdemeanor and is punishable by a fine or imprisonment, or both. I also understand 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.

Technical Report (TR1)

I have identified in the Technical Report (TR1) associated with this application all of the special inspections, progress inspections and tests required for compliance with NYC Building Code 1704, 110 and Article 116 of the NYC Administrative Code. I hereby certify that I will verify that the Special Inspection and Approved Agencies engaged by the owner to supervise the work specified herein for which they are required are acceptable, and further certify that if I determine that they are not acceptable, I will so notify the department.

Professional Certification (POC1)

I hereby state that I have exercised a professional standard of care in certifying that the filed application is complete and in accordance with applicable laws, including the rules of the Department of Buildings, as of this date. I am aware the Commissioner will rely upon the truth and accuracy of this statement. I have notified the owner that this application has been professionally certified. If an audit or other exam discloses non-compliance, I agree to notify the owner of the remedial measures that must be taken to meet legal requirements. I further realize that any misrepresentation or falsification of facts made knowingly or negligently by me, my agents or employees, or by others with my knowledge, will render me liable for legal and disciplinary action by the Department of Buildings and other appropriate authorities, including termination of participation in the professional certification procedures at the Department of Buildings.

I have personally reviewed all information entered on each of the documents listed above. I understand and agree that by personally clicking on the box at left I am electronically signing each document listed above and expressing my agreement with the Statements and Signatures terms for such documents and all other statements above. I understand that this electronic signature shall have the same validity and effect as a signature affixed to each document and statement by hand, and I further agree that, an uploaded electronic image of my signature and professional seal that is part of this application is hereby applied, to this signed statement and each document and statement listed above as if I had personally signed and sealed these statements and documents by hand.



Name: EDWARD GUTERMAN (Electronically Signed) Date: 10/18/2022

Owner's Attestation

Plans/Sketches (PW1)

Occupied Dwelling Units During Construction

1. During construction, alteration or demolition, will this building contain one or more occupied dwelling units? No
2. Number of Dwelling Units that will be occupied during construction: 0

Occupied Dwelling Units

3. Does the building to be altered, constructed or demolished contain one or more occupied dwelling units? No
4. Number of Occupied Dwelling Units : 0

Rent Controlled or Rent Stabilized Housing

5. Does the building to be altered, constructed or demolished contain housing accommodations subject to rent control or rent stabilization? (Under Chapters 3 and 4 of Title 26 of the Administrative Code or rent regulation under Article 7-C of the Multiple Dwelling Law.) No

Rent Controlled and DHCR Notification

6. Does the building to be altered, constructed or demolished contain occupied housing accommodations subject to rent control? (Under chapter 3 of title 26 of the Administrative Code) No

Loft Board Notification

7. Is the building subject to Article 7-C of the Multiple Dwelling Law? If yes, the owner will notify the New York City Loft Board of the filing of the construction documents and will comply with all requirements imposed by Multiple Dwelling Law Article 7-C and the Loft Board's rules. No

Interior Work

8. Will the work be limited to the interior of an owner-occupied unit in a multiple dwelling with no disruption to the essential services of other units? Yes
9. Will the work be limited to the interior of a dwelling unit owned by a condominium or held by a shareholder of a cooperative corporation under a proprietary lease and occupied by the owner(s) of record for the unit, with no disruption to the essential services of other units? No

If I am a condo unit owner or co-op tenant-shareholder, I further represent that I am authorized by the condo or co-op board to sign this application on behalf of such board.

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

I have authorized the applicant to file this application for the work specified herein and all future amendments. I will not knowingly authorize any work that is not in compliance with all applicable laws, rules, and regulations.

Cost Affidavit (PW3)

I hereby swear or affirm that the information on this form is correct and complete to the best of my knowledge. I understand falsification of any statement is a misdemeanor and punishable by a fine, imprisonment, or both. I also understand 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.

Technical Report (TR1)

I have reviewed the information provided herein and, to the best of my knowledge and belief, attest to its accuracy. I approve the identification of the responsible inspector. 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 a fine or imprisonment, 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.

Professional Certification (POC1)

I have read and am fully aware of the applicant's above statement that this job will be professionally certified, and agree to bring into compliance any construction which is found not to comply with all applicable laws and regulations. I understand and agree that by personally clicking on the box at left I am electronically signing each document listed above and expressing my agreement with the Statements and Signatures terms for such documents and all other statements above. I understand that this electronic signature shall have the same validity and effect as a signature affixed to each document and statement by hand.

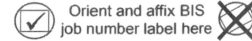


I understand and agree that by personally clicking on the box at left I am electronically signing each document listed above and expressing my agreement with the Statements and Signatures terms for such documents and all other statements above. I understand that this electronic signature shall have the same validity and effect as a signature affixed to each document and statement by hand.

Name: JOHN PASQUALE (Electronically Signed) Date: 11/23/2022



AI1: Additional Information
Must be typewritten.



Page number 1 of 1

BIS Document No. P1

1 Location and Job Information Required for all applications.

House No(s) 53 Street Name WOOSTER STREET (M00350703)
Borough MANHATTAN Block 475 Lot 17 BIN 1007068 CB No. 102

2 Revisions to Plans/Drawings Required whenever updating plans. All revisions for each page must be clearly described in section 3.

Submission is part of a Post Approval Amendment (PAA)? [X] Yes PW1 required [] No Indicate all actions for this submission:

Table with 12 columns: Action, Original/New/Omit Page ID, Superseding Page ID, Action, Original/New/Omit Page ID, Superseding Page ID, Action, Original/New/Omit Page ID, Superseding Page ID, Action, Original/New/Omit Page ID, Superseding Page ID. Rows include S P-001.01 P-001.02, P-002.01, S P-101.01 P-101.02, N P-301.00.

For "Action" use "N" for new page, "S" for superseding page, "O" for omitting page. Is this section continued on additional AI1 forms? [] Yes [X] No

3 Additional Information Required for all applications.

THIS PAA FILED TO SUBMIT AI-1 WITH REVISED DRAWING SET ILLUSTRATING MINOR PLAN CHANGES TO PLUMBING SCOPE OF WORK FILED UNDER M00350703_P1.

- P-001.02: Revised to update plumbing drawing list.
P-002.01: No change. Submitted to retain integrity of complete set.
P-101.02: Revised to show gas piping removal at cellar and first. Remove stove at first and show existing gas piping from cellar through roof for direct replacement of gas fired HVAC RTU.
P-301.00: New sheet to show updated gas riser from cellar to roof.
P-601.01: No change Submitted to retain integrity of complete set.



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.

Name (please print) Edward M. Guterman, P.E. 10/28/2022
Signature [Signature] Date
P.E. / R.A. Seal (apply seal, then sign and date over seal)

NOTES TO USERS

This map is for use in administering the National Flood Insurance Program. It does not necessarily identify all areas subject to flooding, particularly from local drainage sources of small size. The community map repository should be consulted for possible updated or additional flood hazard information.

To obtain more detailed information in areas where Base Flood Elevations (BFEs) and/or floodways have been determined, users are encouraged to consult the Flood Profiles and Floodway Data and/or Summary of Stillwater Elevations tables contained within the Flood Insurance Study (FIS) report that accompanies this FIRM. Users should be aware that BFEs shown on the FIRM represent rounded whole-foot elevations. These BFEs are intended for flood insurance rating purposes only and should not be used as the sole source of flood elevation information. Accordingly, flood elevation data presented in the FIS report should be utilized in conjunction with the FIRM for purposes of construction and/or floodplain management.

Coastal Base Flood Elevations (CBFEs) shown on this map apply only to landward of 0.0 National Geodetic Vertical Datum of 1929 (NGVD 29). Users of this FIRM should be aware that coastal flood elevations are also provided in the Summary of Stillwater Elevations tables in the Flood Insurance Study report for this jurisdiction. Elevations shown in the Summary of Stillwater Elevations tables should be used for construction and/or floodplain management purposes when they are higher than the elevations shown on this FIRM.

Boundaries of the floodways were computed at cross sections and interpolated between cross sections. The floodways were based on hydraulic considerations with regard to requirements of the National Flood Insurance Program. Floodway widths and other pertinent floodway data are provided in the Flood Insurance Study report for this jurisdiction.

Certain areas not in Special Flood Hazard Areas may be protected by flood control structures. Refer to Section 2.4 "Flood Protection Measures" of the Flood Insurance Study report for information on flood control structures for this jurisdiction.

The projection used in the preparation of this map was New York State Plane FIPS ZONE 1814. The horizontal datum was NAD 83, GRS80 spheroid. Differences in datum, spheroid, projection or State Plane zones used in the production of FIRMs for adjacent jurisdictions may result in slight positional differences in map features across jurisdiction boundaries. These differences do not affect the accuracy of this FIRM.

Flood elevations on this map are referenced to the National Geodetic Vertical Datum of 1929. These flood elevations must be compared to structure and ground elevations referenced to the same vertical datum. For information regarding conversion between the National Geodetic Vertical Datum of 1929 and the North American Vertical Datum of 1985, visit the National Geodetic Survey website at <http://www.ngs.noaa.gov> or contact the National Geodetic Survey at the following address:

NGS Information Services
NOAA, NNGS12
National Geodetic Survey
SSMC-3, #6202
1316 East-West Highway
Silver Spring, Maryland 20910-3182
(301) 713-3242

To obtain current elevation, description, and/or location information for bench marks shown on this map, please contact the Information Services Branch of the National Geodetic Survey at (301) 713-3242, or visit its website at <http://www.ngs.noaa.gov>.

Base map information shown on this FIRM was provided in digital format by the Department of Information Technology and Telecommunication, City of New York. This information was derived from digital orthophotos produced at a scale of 1:1,200 with 2-foot pixel resolution from photography dated 2004.

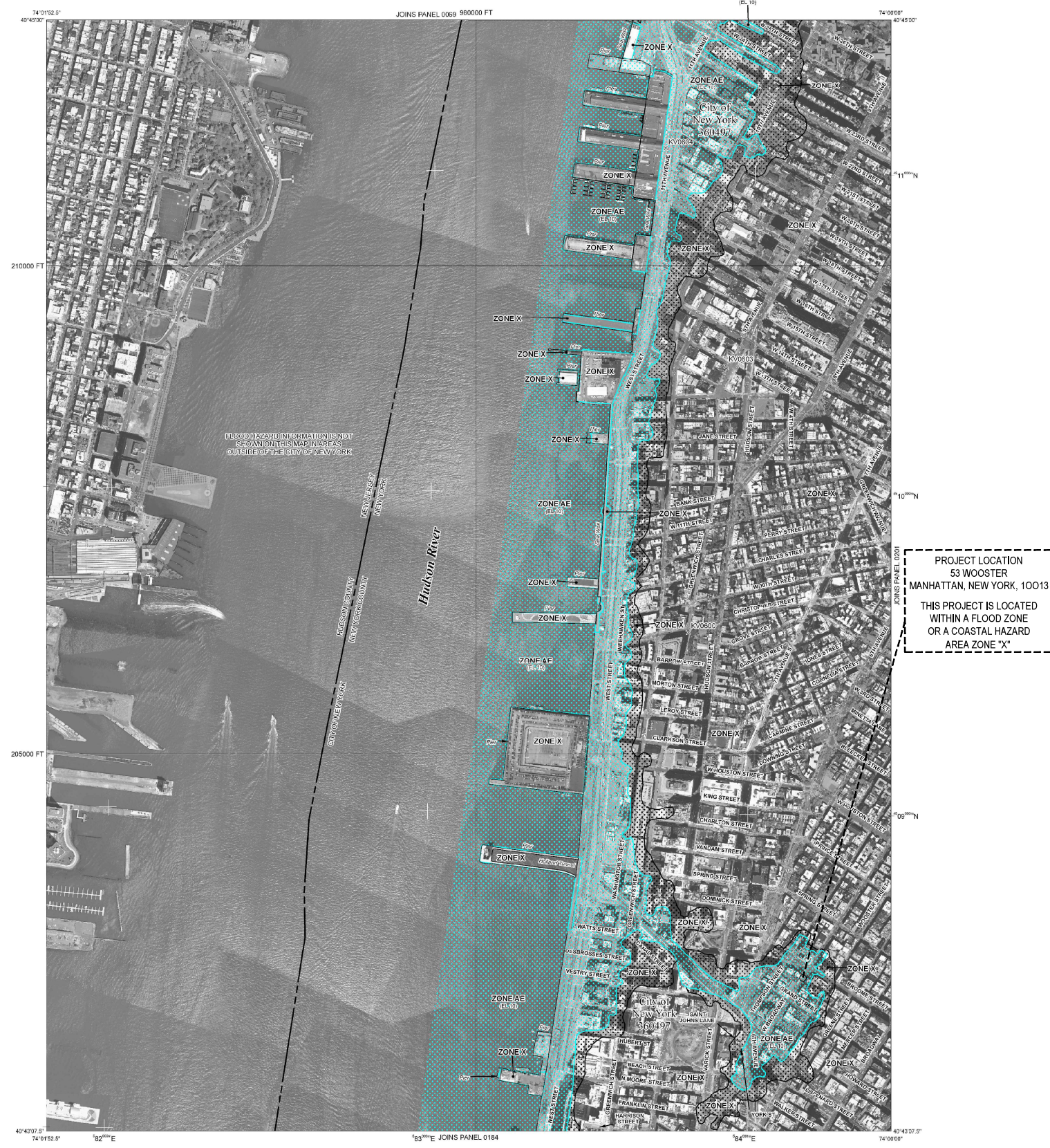
Based on updated topographic information, this map reflects more detailed and up-to-date stream channel configurations and floodplain delineations than those shown on the previous FIRM for this jurisdiction. As a result, the Flood Profiles and Floodway Data tables in the Flood Insurance Study Report (which contains authoritative hydraulic data) may reflect stream channel distances that differ from what is shown on this map. Also, the relationship to floodplains for unreviewed streams may differ from what is shown on previous maps.

Corporate limits shown on this map are based on the best data available at the time of publication. Because changes due to annexations or de-annexations may have occurred after this map was published, map users should contact appropriate community officials to verify current corporate limit locations.

Please refer to the separately printed Map Index for an overview map showing the layout of map panels for this jurisdiction.

Contact the FEMA Map Service Center at 1-800-359-9516 for information on available products associated with this FIRM. Available products may include previously issued Letters of Map Change, a Flood Insurance Study report, and/or digital versions of this map. The FEMA Map Service Center may also be reached by Fax at 1-800-368-2620 and its website at <http://msf.fema.gov>.

If you have questions about this map or questions concerning the National Flood Insurance Program in general, please call 1-877-FEMA-MAP (1-877-336-2627) or visit the FEMA website at <http://www.fema.gov>.



LEGEND

SPECIAL FLOOD HAZARD AREAS SUBJECT TO INUNDATION BY THE 1% ANNUAL CHANCE FLOOD

The 1% annual flood (100-year flood), also known as the base flood, is the flood that has a 1% chance of being equaled or exceeded in any given year. The Special Flood Hazard Area is the area subject to flooding by the 1% annual chance flood. Areas of Special Flood Hazard include Zones A, AE, AH, AO, AR, AV, and VE. The Base Flood Elevation is the water-surface elevation of the 1% annual chance flood.

ZONE A: No Base Flood Elevation determined.

ZONE AE: Base Flood Elevation determined.

ZONE AH: Flood depths of 1 to 3 feet (usually areas of ponding); Base Flood Elevation determined.

ZONE AO: Flood depths of 1 to 3 feet (usually sheet flow on sloping terrain); average depths determined. For areas of alluvial fan flooding, velocities also determined.

ZONE AR: Special Flood Hazard Area formerly protected from the 1% annual chance flood by a flood control system that was subsequently decanted. Zone AR indicates that the former flood control system is being restored to provide protection from the 1% annual chance or greater flood.

ZONE AV: Area to be protected from 1% annual chance flood by a Federal flood protection system under construction; no Base Flood Elevations determined.

ZONE VE: Coastal flood zone with velocity hazard (wave action); no Base Flood Elevation determined.

ZONE VE: Coastal flood zone with velocity hazard (wave action); Base Flood Elevation determined.

FLOODWAY AREAS IN ZONE AE: The floodway is the channel of a stream plus any adjacent floodplain areas that must be kept free of encroachment so that the 1% annual chance flood can be carried without substantial increases in flood height.

OTHER FLOOD AREAS:

ZONE X: Areas of 0.7% annual chance flood; areas of 1% annual chance flood with average depths of less than 1 foot or with drainage areas less than 1 square mile; and areas protected by levees from 1% annual chance flood.

OTHER AREAS:

ZONE X: Areas determined to be outside the 0.2% annual chance floodplain.

ZONE D: Areas in which flood hazards are undetermined, but possible.

COASTAL BARRIER RESOURCES SYSTEM (CBRS) AREAS

OTHERWISE PROTECTED AREAS (OPAs)

CBRS areas and OPAs are normally located within or adjacent to Special Flood Hazard Areas.

1% annual chance floodplain boundary
0.2% annual chance floodplain boundary
Floodway boundary
Zone D boundary
Zone X boundary
CBRS and OPA boundary

Boundary dividing Special Flood Hazard Area Zones and boundary dividing Special Flood Hazard Areas of different Base Flood Elevations, flood depths or flood velocities.

Base Flood Elevation line and value; elevation in feet*
Base Flood Elevation value where uniform within zone; elevation in feet.

* Referenced to the National Geodetic Vertical Datum of 1929

○ Cross section line
— Transverse line
Geographic coordinates referenced to the North American Datum of 1983 (NAD 83), WGS84 Horizontal
100-meter Universal Transverse Mercator grid values, zone 18
5000-foot grid ticks: New York State Plane coordinate system, Long Island zone (FIPS ZONE 1814), Lambert Conformal Conic projection
DX5510 x
M1.5
River Mile

MAP REPOSITORY:
Refer to listing of Map Repositories on Map Index

INITIAL NFP MAP DATE
June 28, 1974

FLOOD HAZARD BOUNDARY MAP REVISIONS
June 11, 1978

FLOOD INSURANCE RATE MAP EFFECTIVE
November 16, 1993

FLOOD INSURANCE RATE MAP REVISIONS
September 5, 2007 - to change Special Flood Hazard Areas; to retrofit updated topographic information, and to update map format.

To determine if flood insurance is available in this community, contact your Insurance agent or call the National Flood Insurance Program at 1-800-338-6633.

MAP SCALE 1" = 500'
250 500 1000
150 0 150 300
FEET
METERS

PROJECT LOCATION
53 WOOSTER
MANHATTAN, NEW YORK, 10013

THIS PROJECT IS LOCATED WITHIN A FLOOD ZONE OR A COASTAL HAZARD AREA ZONE "X"

NATIONAL FLOOD INSURANCE PROGRAM

PANEL 0182F

FIRM
FLOOD INSURANCE RATE MAP

CITY OF NEW YORK, NEW YORK
BRONX, RICHMOND, NEW YORK, QUEENS, AND KINGS COUNTIES

PANEL 102 OF 457
(SEE MAP INDEX FOR FIRM PANEL LAYOUT)

CONTAINS
COMMUNITY NUMBER PANEL SUFFIX
NEW YORK CITY OF 360467 0182 F

Notice to User: The Map Number shown below should be used when placing map orders; the Community Number shown above should be used on insurance applications for the listed community.

MAP NUMBER 3604970182F
MAP REVISED SEPTEMBER 5, 2007
Federal Emergency Management Agency

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4. THIS LAYOUT COMPLIES WITH THE 2010 E.C.C.C. NYS LOCAL LAW 48/2010 & LOCAL LAW 12/2011

REVISIONS:

NO.	DESCRIPTION	DATE

LANDLORDS / OWNERS INFORMATION:

NEW YORK CITY EXPEDITION
R.I.P. C.C. INC.
325 BROADWAY SUITE 304
NEW YORK, NY 10007
TEL: 212-334-7400

ARCHITECT / ENGINEER OF RECORD:
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325 BROADWAY SUITE 304
NEW YORK, NY 10007
212-334-4114

GUTH DeCONZO
CONSULTING ENGINEERS, PC
520 8TH AVE. SUITE 2201
NEW YORK, NY 10018
P: 212-967-4306 F: 212-967-4306

PROJECT ADDRESS:
HEAT ME
53 WOOSTER STREET
NEW YORK, NEW YORK

SHEET TITLE:
PUMPING FLOOD MAPS

DOB NOW APPLICATION 10/6/21

SEAL: STATE OF NEW YORK
EDWARD M. GUTERMAN
LICENSED PROFESSIONAL ENGINEER
061893

DATE: _____
PROJECT #: 4264-G04
DRAWN BY: _____
FAA: _____
SCALE: _____
NONE

NYC DOB STAMPS & SIGNATURES

NYC DOB SCAN

M00350703_P1
DRAWING NUMBER:
P-002.00

DATE: 11/29/2022

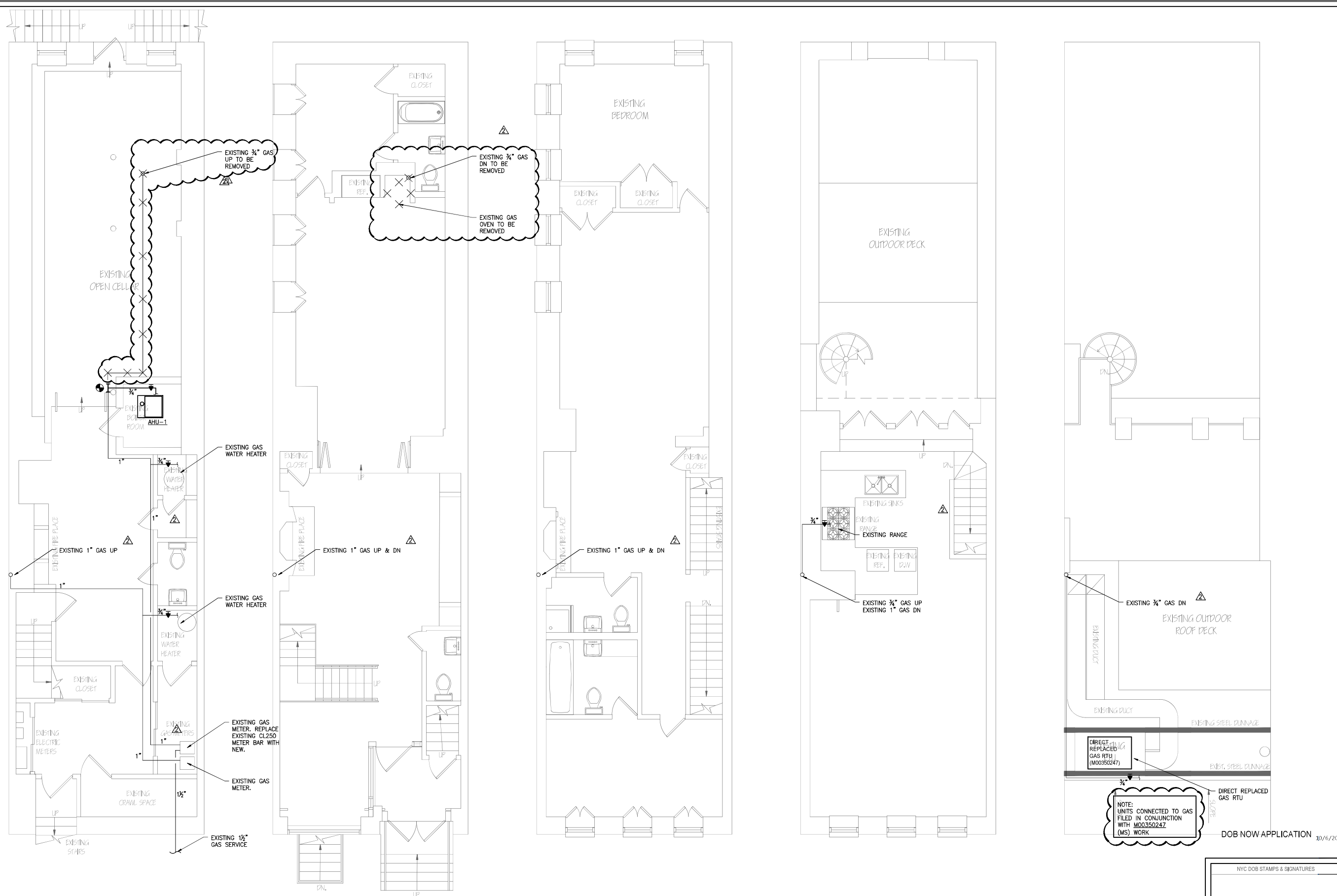
SHEET: 2 OF 5



TO THE BEST OF MY KNOWLEDGE, BELIEF AND PROFESSIONAL JUDGEMENT, THESE PLANS AND SPECIFICATIONS ARE IN COMPLIANCE WITH THE NEW YORK CITY ENERGY CONSERVATION CODE.

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P:\264-G04\Drawings\CarDrawings\Plumbing\264-G04-P.dwg, P-101.01, 10/5/2022 6:28:46 PM, Mba_k



CELLAR PLUMBING PLAN
SCALE: 1/4" = 1'-0"
0 2 4 8 FEET

1ST FLOOR PLUMBING PLAN
SCALE: 1/4" = 1'-0"
0 2 4 8 FEET

2ND FLOOR PLUMBING PLAN
SCALE: 1/4" = 1'-0"
0 2 4 8 FEET

3RD FLOOR PLUMBING PLAN
SCALE: 1/4" = 1'-0"
0 2 4 8 FEET

ROOF PLUMBING PLAN
SCALE: 1/4" = 1'-0"
0 2 4 8 FEET

WOOSTER STREET

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REVISIONS:

NO.	DESCRIPTION	DATE
1	ISSUED FOR PAA	11/25/2020
2	ISSUED FOR PAA	07/15/2022
3	FINAL ADJUSTMENTS	10/15/2022

10/15/2022 FINAL ADJUSTMENTS
07/15/2022 ISSUED FOR PAA
11/25/2020 ISSUED FOR PAA

LANDLORD'S / OWNER'S INFORMATION:

NEW YORK CITY EXPEDITOR:
R.I.P. C.C. INC.
325 BROADWAY SUITE 304
NEW YORK, NY 10007
TEL: 212-334-7400

ARCHITECT / ENGINEER OF RECORD:
EDWARD GUTERMAN P.E. #061893-1
325 BROADWAY SUITE 304
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212-334-4114

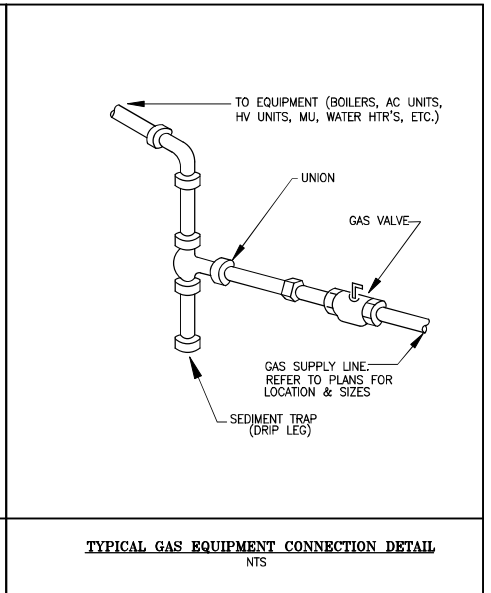
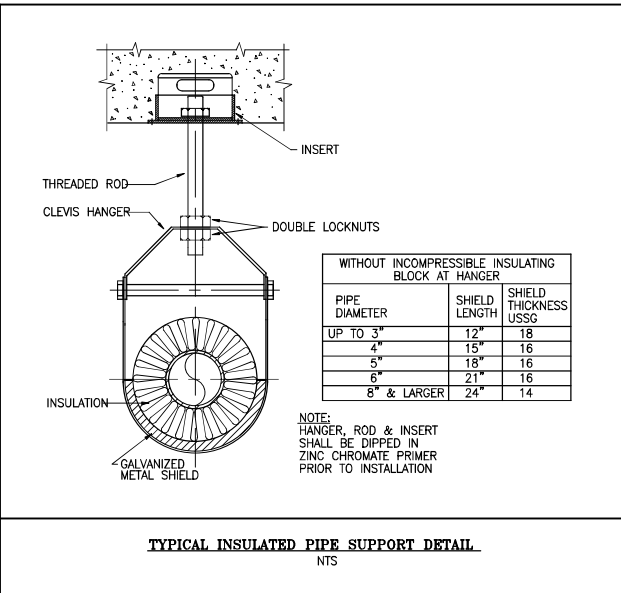
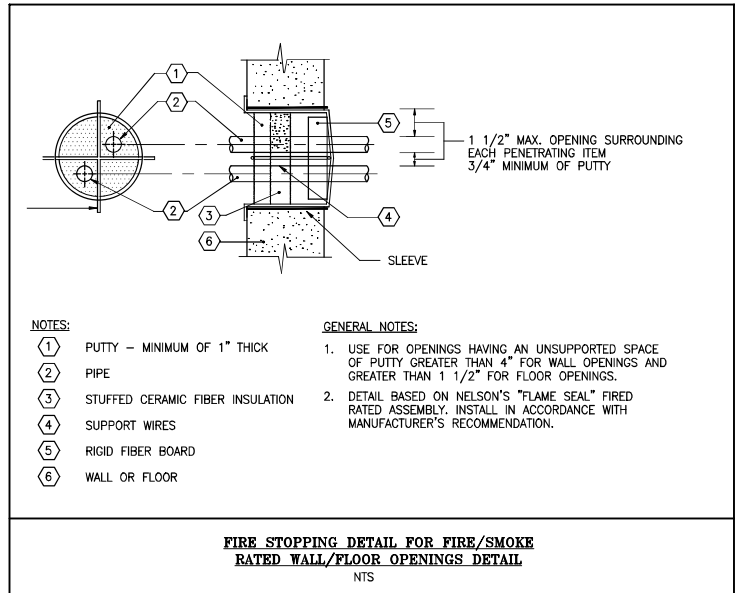
CONSULTING ENGINEERS
GUTH DeCONZO
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520 8TH AVE. SUITE 2201,
NEW YORK, NY 10018
P: 212967-4306 F: 212-967-4306

PROJECT ADDRESS:
HEAT ME
53 WOOSTER STREET
NEW YORK, NEW YORK

SHEET TITLE:
PLUMBING PLANS

SEAL: [Professional Engineer Seal for Edward M. Guterman, No. 061893, State of New York]
DATE: 10/6/2022

NYC DOB BSCAN
M00350703_P1
DRAWING NUMBER:
P-101.01
SHEET: 3 OF 5



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REVISIONS:

07/15/2022 ISSUED FOR PAA

LANDLORDS / OWNER'S INFORMATION

NEW YORK CITY EXPEDITOR:
 R.I.P. C.C. INC.
 325 BROADWAY SUITE 304
 NEW YORK, NY 10007
 TEL: 212-334-7400

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 212-334-4114

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GUTH DeCONZO
 CONSULTING ENGINEERS, PC
 520 8TH AVE. SUITE 2201,
 NEW YORK, NY 10018
 P: 212967-4306 F: 212-967-4306

PROJECT ADDRESS:
 HEAT ME
 53 WOOSTER STREET
 NEW YORK, NEW YORK

SHEET TITLE: PLUMBING DETAILS & RISER

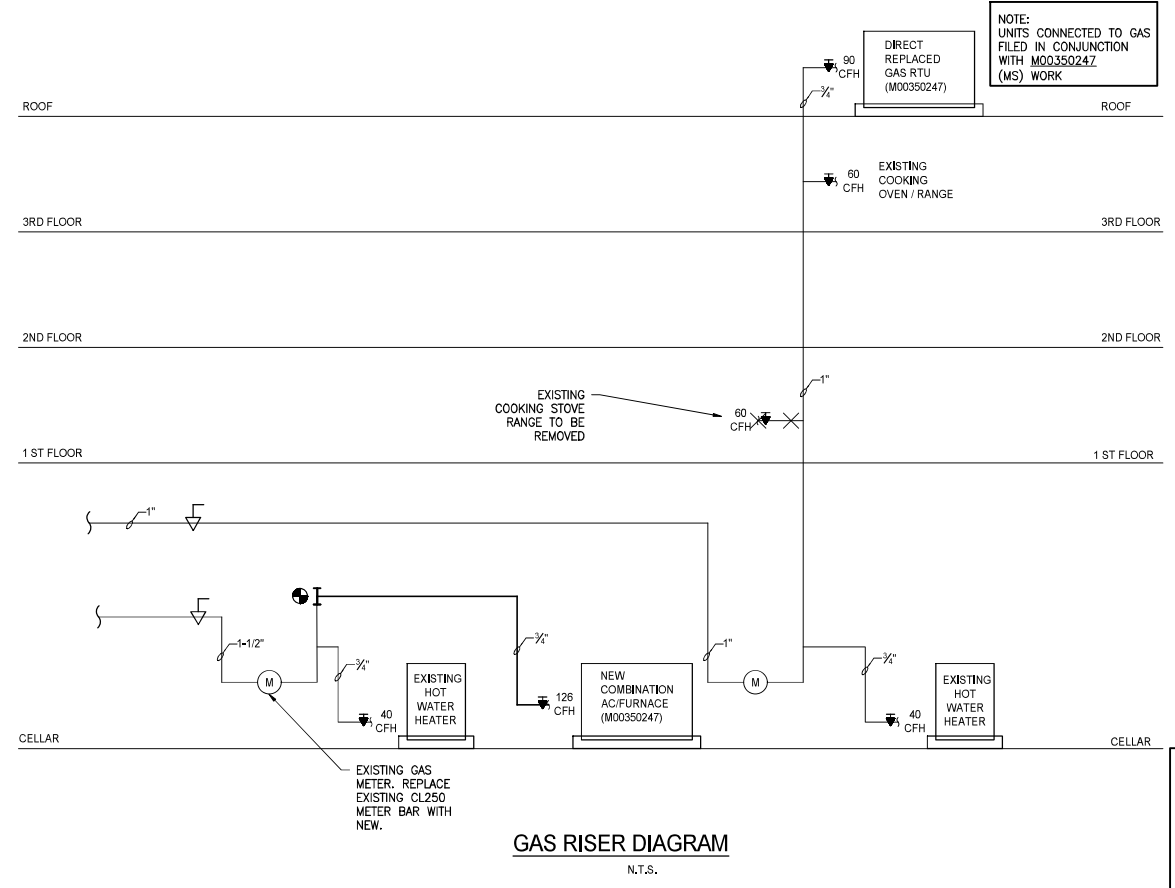
SEAL: [Professional Engineer Seal]
 DATE: 10/6/2022
 PROJECT # 4264-G04
 DRAWN BY: FAA
 SCALE: NONE

NYC DOB BSCAN

M00350703_P1

DRAWING NUMBER: P-301.00

SHEET: 4 OF 5



DOB NOW APPLICATION 10/6/2022

NYC DOB STAMPS & SIGNATURES

NYC Buildings
ACCEPTED

Date: 11/29/2022

TO THE BEST OF MY KNOWLEDGE, BELIEF AND PROFESSIONAL JUDGEMENT, THESE PLANS AND SPECIFICATIONS ARE IN COMPLIANCE WITH THE NEW YORK CITY ENERGY CONSERVATION CODE.

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