

Applicant must indicate the Building Line or Lines clearly and distinctly on the Drawings.

B373

Office of the Borough President of the Borough of Manhattan,

In The City of New York.

L1

THE BUREAU OF BUILDINGS FOR THE BOROUGH OF MANHATTAN,

Office, No. 220 FOURTH AVENUE,

S. W. Corner 18th Street.

Plan No. 499

APPLICATION TO ALTER, REPAIR, ETC.

Application is hereby made to the Superintendent of Buildings of The City of New York, for the Borough of Manhattan, for the approval of the detailed statement of the specifications and plans herewith submitted, for the alteration or repairs of the building herein described. All provisions of the Law shall be complied with in the alteration or repair of said building, whether specified herein or not.

(Sign here) [Signature]

The City of New York, Borough of Manhattan, March 8th 1907

LOCATION AND DESCRIPTION OF PRESENT BUILDING.

1. State how many buildings to be altered one
2. What is the exact location thereof? (State on what street or avenue, the side thereof, the number of feet from the nearest street or avenue, and the name thereof) 100 E 4th St, bet 1st & 2nd St
3. How was the building occupied? residential
How is the building to be occupied? dwelling with 2 u
4. Is the building on front or rear of lot? front Is there any other building erected on lot or permit granted for one? yes Size 24 x 22 1/2; height 14' 0" How occupied? permanent Give distance between same and proposed building 17 feet.
5. Size of lot? 34 feet front; 24 feet rear; 50 feet deep.
6. Size of building which it is proposed to alter or repair? 24 feet front; 24 feet rear; 40' 0" feet deep. Number of stories in height? 4 Height from curb level to highest point? 38 ft
7. Depth of foundation walls below curb level? 10 ft Material of foundation walls? concrete Thickness of foundation walls? front 20 inches rear 24 inches; side 20 inches; party 20 inches.
8. Material of upper walls? brick If ashlar, give kind and thickness _____
9. Thickness of upper walls:
Basement: front _____ inches; rear _____ inches; side _____ inches; party _____ inches.
1st story: " 12 " " 8 " " 8 " " 8 "

11. Size of present extension, if any? _____ feet front; _____ feet deep; _____ feet high.
12. Thickness and material of foundation walls? _____
13. Material of upper walls? _____ If ashlar, give kind and thickness _____
14. Thickness of upper walls:
- Basement: front _____ inches; rear _____ inches; side _____ inches; party _____ inches.
- 1st story: " _____ " " _____ " " _____ " " _____ "
- 2d story: " _____ " " _____ " " _____ " " _____ "
- 3d story: " _____ " " _____ " " _____ " " _____ "
- 4th story: " _____ " " _____ " " _____ " " _____ "
15. Is present building provided with a fire escape? yes

If to be extended on any side, give the following information:

16. Is extension to be on side, front or rear? rear
17. Size of proposed extension, feet front 24; feet rear 24; feet deep 24 1/2; number of stories in height? two number of feet in height? 36
18. Material of foundation walls? brick; depth 18 ft feet; material of base course concrete; thickness of base course 12; thickness of foundation walls, front _____ inches; side 16 inches; rear _____ inches; party _____ inches.
19. Will foundation be on rock, sand, earth or piles? end
20. What will be the size of piers in cellar? _____; distance on centres? _____; size of base of piers? _____; thickness of cap stones? _____; of bond stones? _____.
21. Material of upper walls? brick; material of front? _____
22. Thickness, exclusive of ashlar, of upper walls:
- 1st story: front 12 inches; rear _____ inches; side 12 inches; party _____ inches.
- 2d story: " _____ " " _____ " " _____ " " _____ "
- 3d story: " _____ " " _____ " " _____ " " _____ "
- 4th story: " _____ " " _____ " " _____ " " _____ "
- 5th story: " _____ " " _____ " " _____ " " _____ "
- 6th story: " _____ " " _____ " " _____ " " _____ "
23. With what will walls be coped? iron
24. Will roof be flat, peak, or mansard? flat; material tin
25. Give size and material of floor and roof beams
- 1st tier, material yellow pine; size 3" x 9"; distance on centres 16"
- 2d tier, " spruce " 3" x 12" " " 16"
- 3d tier, " " " 3" x 10" " " 16"
- 4th tier, " _____ " _____ " _____ "
- 5th tier, " _____ " _____ " _____ "
- Roof tier, " spruce " 3" x 9" " " 20
- Give thickness of headers 6" of trimmers 6"
26. Give material of girders yellow pine of columns yellow pine
- Under 1st tier, size of girders 8" x 8"; size of columns 6" x 6"



the Borough President of
In The City of NEW YORK
THE BOROUGH OF MANHATTAN

PLAN No. 499 of 1907

BUREAU OF RECORDS
of the City of New York
Received MAR 8 - 1907
FOR THE BOROUGH OF MANHATTAN

State and City of New York,
County of New York, } ss.:

Max Müller

being duly sworn, deposes and says: That he resides at Number 115 Nassau st.
in the Borough of Manhattan
in The City of New York, in the County of New York
in the State of New York; that he is the architect for

Sigmond Kraus

owner in fee of all that certain lot, piece or parcel of land, shown on the diagram annexed hereto and made
a part hereof, situate, lying and being in the Borough of Manhattan
in The City of New York, aforesaid, and known and designated as Number 40 Ave C.

and hereinafter more particularly described;
that the work proposed to be done upon the said premises, in accordance with the accompanying detailed
statement, in writing, of the specifications and plans of such proposed work, is duly authorized to be
performed by the owner

and that I am

duly authorized by the owner

to make application for the approval of such detailed statement of specifications and plans in his
behalf.

Deponent further says that the full names and residences, street and number, of the owner or owners
of the said land, and also of every person interested in said building or proposed building, structure, or
proposed structure, premises, wall, platform, staging or flooring, either as owner, lessee, or in any repre-
sentative capacity, are as follows:

Max Müller No. 115 Nassau st.

architect

Sigmond Kraus
owner

No. 11 46 74 4 st

as

No

The said land and premises above referred to are situate at, bounded and described as follows, viz.:

BEGINNING at a point on the East side of St. C
....., distant 48 feet
..... from the corner formed by the intersection of
St. C and St. John St
running thence Northwesterly 25 feet;
thence Eastwesterly 80 feet;
thence Eastwesterly 24 feet;
thence Northwesterly 80 feet
to the point or place of beginning.

Sworn to before me, this 8
day of March 1907 }

Sam Miller

E. J. Carroll

Notary Public..... County.

27. If front, rear or side is to be supported on columns or girders, give girders, material _____ ; front _____ ; side _____ ; rear Steel
 size _____ " _____ " _____ " from 1st to 4th floor
 columns, material _____ " _____ " _____ " _____
 size _____ " _____ " _____ " _____
28. If constructed of frame, give material _____ ; size of sill _____ ;
 plate _____ ; enterties _____ ; posts _____ ; studs _____ ;
 braces _____
29. If open on one side, give size of plate _____ posts _____
30. How will extension be occupied? store on 1st floor If for
 dwelling, give number of families on each floor one on 2nd, 3rd, 4th, 5th, 6th
31. How will extension be connected with main building? run with main building
32. Give size of skylights 1 1/2' x 1' ; material galv iron
33. Give material of cornices galv iron
34. Give material of light shafts _____ ; size _____

If to be increased in height, give the following information :

35. Will building be raised from foundation, or extended on top? Give particulars _____

36. How many stories high will building be when raised? _____ ; feet high _____
37. Will the roof be flat, peak or mansard? _____ , material _____
38. Material of coping? _____
39. Give material of new walls _____ thickness of _____ story _____ inches ;
 _____ story _____ inches ; _____ story _____ inches ; _____ story
 _____ inches ; _____ story _____ inches ; _____ story _____ inches ;
 _____ story _____ inches.
40. Material of floor beams? _____ Size _____ tier _____
 centres _____ ; _____ tier _____ ; centres _____ ; _____ tier _____
 centres _____ ; _____ tier _____ ; centres _____ ; _____ tier _____
 centres _____
41. Material of girders? _____ Size under 1st tier _____ ;
 2d tier _____ ; 3d tier _____ ; 4th tier _____ ; 5th tier _____ ;
 6th tier _____
42. Material of columns? _____ Size under 1st tier _____ ; 2d tier _____ ;
 3d tier _____ ; 4th tier _____ ; 5th tier _____ ; 6th tier _____
43. Size of piers in cellar _____ ; distance on centres _____ ; thickness of cap stones
 to piers _____ ; bond stones _____
44. If constructed of frame, give material of frame _____ ; size of sills _____ ;
 corner posts _____ ; middle posts _____ ; enterties _____ ; plates _____
 braces _____ ; studs _____
45. How will building be occupied when altered?

If the Front, Rear or Side Walls, or any portion thereof, are to be taken out and rebuilt, give definite particulars, and state in what manner :

47

Front and rear wall of front building will be taken down and front wall rebuilt across on two 10" steel beams 42 lbs pr ft and two 12" X 8" cast iron columns and 15" X 21" and 20" X 20" brick piers, rear building will be taken down to 2nd story floor level and then roofed over and be connected to front building, 8" c/wall will be built to enclose stairs to cellar and woodhouses, windows will be cut into southernly sidewall, new store front will be put up to be flush with building line and to have galv. iron cornice.

If altered Internally, give definite particulars, and state how the building will be occupied :

All partitions through will be removed also all floor beams and new floor beams and roof beams set to make building three stories high instead of four, new partitions will be set as shown, also new stairs and upper part of building arranged for one family on the floor, all as shown on plans.

49. How much will the alteration cost? \$ 10,000.

If the Building is to be occupied as a Flat, Apartment or Lodging House, give the following particulars :

50. Is any part of building to be used as a store or for any other business purpose, if so, state for what?

	Cellar	Base-ment	1st Floor	2d Floor	3d Floor	4th Floor	5th Floor	6th Floor
51. How many families will occupy each?								
52. Height of ceilings?								

53. How basement to be occupied?

How made water-tight?

54. Will cellar or basement ceiling be plastered? How?



PW1: Plan / Work Application

Must be typewritten.



1 Location Information *Required for all applications.*

House No(s) **40** Street Name **AVENUE C**
 Borough **MANHATTAN** Block **00373** Lot **00001** BIN **1004379** C.B. No. **103**
 Work on Floor(s) **001** Apt. / Condo No(s)

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

Last Name **PHILOGENE** First Name **FRANKLIN** Middle Initial
 Business Name **KMP DESIGN AND ENGINEERING PLLC** Business Telephone **(718) 221-4277**
 Business Address **481 ROGERS AV** Business Fax **(718) 221-4160**
 City **BROOKLYN** State **NY** Zip **11225** Mobile Telephone **(732) 991-2714**
 E-Mail **KPHILOGENE@VERIZON.NET** License Number **062895**
 Choose one: P.E. R.A. Sign Hanger Other, please specify:

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

Last Name **MONROE/PHILOGENE** First Name **FRANKLIN/MCKIN** Middle Initial
 Business Name **KMP DESIGN AND ENGINEERING PLLC** Business Telephone **(718) 221-4277**
 Business Address **481 ROGERS AV** Business Fax **(718) 221-4160**
 City **BROOKLYN** State **NY** Zip **11225** Mobile Telephone **(917) 554-5665**
 E-Mail Registration Number

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

Initial Filing 5, 7, 11, 12A, 25-26 Prior to Approval Actions 25-26 Reinstatement 24-26
 Review is requested under which Building Code? Amend Existing Filing 4A Withdrawal 25-26
 2008 1968 Prior to 1968 Subsequent Filing 6-7, 8A (Alt-2 only), 11 Specified in 4A and 6
 Choose Standard Plan Examination or Review Post Approval Amendment (PAA) 4A, 6, 24-25 Entire Job
 one: Professional Certification PC1, POC1 Will PAA affect filing fees? Yes No 4A Indicate existing document number affected by filing:
 Self Certification of Objections A11 New Applicant 4A, 25-26

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

Alteration Type 1 6A-E, 8B-C, 9-10, 12, 13C-F & 14, 18-20, 22, PW1A, PD1, select all that apply: Alteration Type 1, OT: "No Work" 8C, 9-10 & 12, 13C-F, 14, 18-19, PW1A, PD1 Full Demolition 6B, 8D, 9B-D, & 13D-E, 14, 21A, 22
 Change in Exits Alteration Type 2 5A, 6A-D, 8A-B, 9-10, & 13C-E, 14, 20, 22 Sign 5A, 6B-D, 9B, 22-23
 Change in Number of Stories Alteration Type 3 5A, 6B-F, 8C, 9-10, 13C-E, 22 Subdivision 9B, 12A-B
 Change in Number of Dwelling Units New Building 6A-E, 8F-G, 9A-C, 10, 12, 13A-E 5A Directive 14 acceptance requested? Condominium Improved 17
 Change in Occupancy / Use New Applicant 4A, 25-26 Yes No
 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 filing type. "OT" required on all NB and Alteration 1 Initial applications.*

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

DOB Reference Number: T00000216877-000031
 User Ref ID: 062509-01

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

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

8 Additional Information

8A WT Cost	WT Cost	WT Cost		8B Is a building enlargement proposed?	8C Estimated Job Cost \$
OT 15000				<input checked="" type="checkbox"/> No enlargement is proposed	8D Street Frontage: _____ linear ft.
				<input type="checkbox"/> Yes 12, PD1	8E Height: _____ ft. Width: _____ ft.
				<input type="checkbox"/> Horizontal <input type="checkbox"/> Vertical	8F Name of cluster or development below:
				Additional Construction Floor Area:	Project lead job no.
8G Total Construction Floor Area: _____ sq. ft.					

9 Additional Considerations, Limitations or Restrictions

<p>Yes No</p> <p>9A <input type="checkbox"/> <input checked="" type="checkbox"/> Structural peer review required per BC §1627 <i>If yes, 9F</i></p> <p>9B <input type="checkbox"/> <input checked="" type="checkbox"/> Filed to Comply with Local Law <i>If yes, 9G</i></p> <p><input type="checkbox"/> <input checked="" type="checkbox"/> Other, specify: _____</p> <p><input type="checkbox"/> <input checked="" type="checkbox"/> Restrictive Declaration / Easement <i>If yes, 9L</i></p> <p><input type="checkbox"/> <input checked="" type="checkbox"/> Zoning Exhibit (I, II, III, etc.) <i>If yes, 9M</i></p> <p><input type="checkbox"/> <input checked="" type="checkbox"/> Requesting legalization of work on or after Jan. 1, 1989 where no work w/o a permit violations have been issued</p> <p>9C <input type="checkbox"/> <input checked="" type="checkbox"/> Adult Establishment <i>If yes, plot diagram (except DM)</i></p> <p><input type="checkbox"/> <input checked="" type="checkbox"/> Compensated Development (Inclusionary Housing)</p> <p><input type="checkbox"/> <input checked="" type="checkbox"/> Low Income Housing (Inclusionary Housing)</p> <p><input type="checkbox"/> <input checked="" type="checkbox"/> Single Room Occupancy (SRO) Multiple Dwelling</p> <p><input type="checkbox"/> <input checked="" type="checkbox"/> Filing includes Lot Merger / Reapportionment <i>If yes, 17</i></p> <p>9D <input type="checkbox"/> <input checked="" type="checkbox"/> Includes permanent removal of standpipe, sprinkler or fire suppression related systems:</p> <p>9E <input type="checkbox"/> <input checked="" type="checkbox"/> Work includes partial demolition as defined in AC §28-101.5 <i>If yes, 21B</i></p> <p><input type="checkbox"/> <input checked="" type="checkbox"/> Structural Stability affected by proposed work</p> <p>9L CRFN(s) Restrictive Declaration / Easement (max. 4):</p> <p>9M CRFN(s) Zoning Exhibit (I, II, III, etc. - max. 4):</p>	<p>Yes No</p> <p><input type="checkbox"/> <input checked="" type="checkbox"/> Landmark</p> <p><input type="checkbox"/> <input checked="" type="checkbox"/> "Little E" Hazmat Site</p> <p><input type="checkbox"/> <input checked="" type="checkbox"/> Unmapped Street</p> <p><input type="checkbox"/> <input checked="" type="checkbox"/> Filing to Address Violation(s) <i>If yes, 9H</i></p> <p><input type="checkbox"/> <input checked="" type="checkbox"/> Included in LMCCC</p> <p><input type="checkbox"/> <input checked="" type="checkbox"/> Infill Zoning</p> <p><input type="checkbox"/> <input checked="" type="checkbox"/> Loft Board</p> <p><input type="checkbox"/> <input checked="" type="checkbox"/> Quality Housing</p> <p><input type="checkbox"/> <input checked="" type="checkbox"/> Site Safety Job/Project</p>	<p>9F Structural Peer Reviewer License No. P.E.</p> <p>9G Local Law No(s) Year</p> <p>9H Violation No(s)</p> <p>9I BSA Calendar No(s)</p> <p>9J CPC Calendar No(s)</p> <p>9K High-Rise Team Tracking Number:</p>
--	---	--

10 ECCCNYS Compliance Energy Conservation Construction Code of NYS

- To the best of my knowledge, belief and professional judgment, this application is in compliance with the ECCCNYS.*
- Energy analysis is on another job number: _____
- The work proposed in this application is exempt from the ECCCNYS because per Chapter 1 of the ECCCNYS it is:**
- An alteration but not a substantial alteration
- Work in a Historic building
- Work in an exempt building (specify category/reasons in 10A)**

10A Specific Reason for ECCCNYS Exemption

*I understand the Department may require supporting analyses and documentation.
 **§101.5.2.1 of the ECCCNYS only exempts thermal envelope provisions.

11 Job Description

RENOVATE FACADE AND 1ST FLOOR OF EXISTING BARS AND DRINKING ESTABLISHMENT.

11A Related DOB Job Numbers

11B Primary application job no.

DOB Reference Number: 20000216877-000031
 User Ref ID: 082509-01
 7/08

OFFICE OF THE CITY CLERK

Office Location: 280 BROADWAY
 NEW YORK, NY 10007

Phone: (212) 566-0042

Hours: 8:30 AM - 4:30 PM



DOB Reference Number: 20000216877-000031
 User Ref ID: 082509-01
 7/08