59-17 Junction Blvd., Corona, NY 11368 * Fax (718) 595-3744 * Phone (718) 595-3718

Department of Environmental Protection

Fax

To:	Mr. John Weiss	**From:**	Krish Radhakrishnan
Fax:	212-669-7960	**Pages:**	11
Phone:		**Date:**	June 2002

Re: Application form for WTC debris clean-up from exterior of buildings 5 BEEKMAN ST. 53 MURRAY ST, 105 READE ST, 110 READE ST 53 WARREN ST, 54 WARREN ST, 175 Broadway 67 GREENWICH ST, 41-43 MURRAY ST, 127 FULTON S

☐ **Urgent** ☐ **For Review** ☐ **Please Comment** ☐ **Please Reply**

MR. WEISS - Thanks for your help this morning

127 FULTON - "NRE"
175 BROADWAY - "NRE"
41 MURRAY - "HEARD"
67 GREENWICH - "HEARD"
54 WARREN - "NRE"
53 WARREN - "HEARD", "NRE"
53 MURRAY - "HEARD"

OUR RECORDS INDICATE
WE HAVE ATTACHED THE APPLICATION FORM, PLEASE VERIFY IF THE APPLICATION IS NEC.

PLEASE START WITH 5 BEEKMAN ST & 127 FULTON ST (IF APPLICABLE)

Penny

PII

THE CITY OF NEW YORK LANDMARKS PRESERVATION COMMISSION
1 CENTRE STREET, 9TH FLOOR, NEW YORK, NEW YORK, 10007
TEL: (212) 669- 7700 FAX: (212) 669-7960

APPLICATION FORM

F-2

FOR WORK ON DESIGNATED PROPERTIES

This application will not be deemed complete until it is so certified by the Landmarks Preservation Commission. An application consists of an application form and the materials necessary to describe the project fully. If being submitted in response to a Warning Letter or Notice of Violation, please enter the number below.

Please print or type all items. If not applicable, mark N.A.

Staff Use Only				
LPC DOCKET #	DATE REC'D	DATE CERT. AS COMPLETE	BLDG. DEPT. # & DATE	STAFF
☐ INDIVIDUAL ☐ SCENIC ☐ INTERIOR TYPE OF DESIGNATION		HISTORIC DISTRICT		
☐ PMW ☐ CNE ☐ C OF A ☐ REPORT ☐ ACTION		OTHER	WORK TYPE	

DESIGNATED PROPERTY

5 BEEKMAN STREET — Exterior (ROOF & FACADE)
ADDRESS — FLOOR OR APARTMENT

Manhattan — 90 — 14 —
BOROUGH — BLOCK — LOT — ZONING

DETAILED DESCRIPTION OF PROPOSED WORK
Use back of form if necessary

Removal of debris (cleaning) from the collapse of the WTC from exterior building surfaces as per scope of work previously reviewed and approved by NYCLPC.

COST OF PROJECT _____ **WARNING LETTER / NOV #** _____

TENANT/LESSEE/ CO-OP SHAREHOLDER

N|A
NAME, TITLE & FIRM (if applicable) — PHONE (day)

ADDRESS — APT # — CITY, STATE, ZIP CODE

ARCHITECT/ ENGINEER
If applicable

N|A
NAME, TITLE & FIRM (if applicable) — PHONE (day)

ADDRESS — CITY, STATE, ZIP CODE

CONTRACTOR
If applicable

Benjamin Kurzban and Son Control, Inc. (718) 531-2900
NAME, TITLE & FIRM (if applicable) — PHONE (day)

1248 Ralph Avenue — Brooklyn, New York 11236
ADDRESS — CITY, STATE, ZIP CODE

PERSON FILING APPLICATION
e.g. Expeditor, Attorney, Managing Agent, etc.

NYC Department of Environmental Protection (718) 595-3718
NAME, TITLE & FIRM (if applicable) — PHONE (day)

59-17 Junction Boulevard, 8th Floor — Corona, New York 11368
ADDRESS — CITY, STATE, ZIP CODE

ARE YOU APPLYING TO ANY OF THE FOLLOWING?

☐ Buildings Department ☐ City Planning Commission ☐ Board of Standards & Appeals

I am the owner of the above listed property. I am familiar with the work proposed to be carried out on my property and give my permission for this application to be filed. The information entered is correct and complete, to the best of my knowledge.

OWNER

For applications for work on or in a cooperative or condominium building, the "owner" is the Co-op Board or Condominium Association. An officer of the Co-op Board or Condominium Association must sign this application. Please consult the Instructions for Filing for additional information.

319 BEEKMAN ST LLC — (212)564-3194
OWNER'S NAME and TITLE (please type or print) — PHONE (day)

SHIRE REALTY CORP. ATTN. JONATHAN BERNSTEIN
COMPANY, CORPORATION, ORGANIZATION (if applicable)

1220 BROADWAY, NEW YORK, N.Y. 10001
ADDRESS — CITY, STATE, ZIP CODE

SIGNATURE

NYC DEP — for owner — DATE
SIGNATURE OF OWNER

Note Section 25-317 of the Administrative Code of the City of New York makes it a punishable offense to willfully make false statements on this application

THE CITY OF NEW YORK LANDMARKS PRESERVATION COMMISSION
1 CENTRE STREET, 9TH FLOOR, NEW YORK, NEW YORK, 10007
TEL: (212) 669- 7700 FAX: (212) 669-7960

APPLICATION FORM

F-2

FOR WORK ON DESIGNATED PROPERTIES

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Staff Use Only

LPC DOCKET #	DATE REC'D	DATE CERT. AS COMPLETE	BLDG. DEPT. # & DATE	STAFF

☐ INDIVIDUAL ☐ SCENIC ☐ INTERIOR — TYPE OF DESIGNATION — HISTORIC DISTRICT

☐ PMW ☐ CNE ☐ C OF A ☐ REPORT ☐ OTHER — ACTION — WORK TYPE

DESIGNATED PROPERTY

53 MURRAY ST. — Exterior (ROOF & FACADE)
ADDRESS — FLOOR OR APARTMENT

Manhattan — 133 — 11 —
BOROUGH — BLOCK — LOT — ZONING

DETAILED DESCRIPTION OF PROPOSED WORK
Use back of form if necessary

Removal of debris (cleaning) from the collapse of the WTC from exterior building surfaces as per scope of work previously reviewed and approved by NYCLPC.

COST OF PROJECT _____ **WARNING LETTER / NOV #** _____

TENANT/LESSEE/ CO-OP SHAREHOLDER

N/A
NAME, TITLE & FIRM (if applicable) — PHONE (day)

ADDRESS — APT # — CITY, STATE, ZIP CODE

ARCHITECT/ ENGINEER
If applicable

N/A
NAME, TITLE & FIRM (if applicable) — PHONE (day)

ADDRESS — CITY, STATE, ZIP CODE

CONTRACTOR
If applicable

Fiber Control, Inc. — (516) 781-3000
NAME, TITLE & FIRM (if applicable) — PHONE (day)

3010 Burns Avenue — Wantagh, New York 11793
ADDRESS — CITY, STATE, ZIP CODE

PERSON FILING APPLICATION
e.g. Expeditor, Attorney, Managing Agent, etc

NYC Department of Environmental Protection (718) 595-3718
NAME, TITLE & FIRM (if applicable) — PHONE (day)

59-17 Junction Boulevard, 8th Floor — Corona, New York 11368
ADDRESS — CITY, STATE, ZIP CODE

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53 MURRAY LLC
OWNER'S NAME and TITLE (please type or print) — PHONE (day)

COMPANY, CORPORATION, ORGANIZATION (if applicable)

225 W 39 STREET, N.Y. NY 10018
ADDRESS — CITY, STATE, ZIP CODE

SIGNATURE

NYC DEP for owner
SIGNATURE OF OWNER — DATE

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THE CITY OF NEW YORK LANDMARKS PRESERVATION COMMISSION
1 CENTRE STREET, 9TH FLOOR, NEW YORK, NEW YORK, 10007
TEL: (212) 669- 7700 FAX: (212) 669-7960

APPLICATION FORM

F-2

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☐ INDIVIDUAL ☐ SCENIC ☐ INTERIOR TYPE OF DESIGNATION		HISTORIC DISTRICT		
☐ PMW ☐ CNE ☐ C OF A ☐ REPORT ACTION	☐ OTHER	WORK TYPE		

DESIGNATED PROPERTY

105 READE STREET — Exterior (ROOF & FACADE)
ADDRESS — FLOOR OR APARTMENT

Manhattan — 145 — 18 —
BOROUGH — BLOCK — LOT — ZONING

DETAILED DESCRIPTION OF PROPOSED WORK
Use back of form if necessary

Removal of debris (cleaning) from the collapse of the WTC from exterior building surfaces as per scope of work previously reviewed and approved by NYCLPC.

COST OF PROJECT _____ **WARNING LETTER / NOV #** _____

TENANT/LESSEE/ CO-OP SHAREHOLDER

N/A
NAME, TITLE & FIRM (If applicable) — PHONE (day)

ADDRESS — APT # — CITY, STATE, ZIP CODE

ARCHITECT/ ENGINEER
If applicable

N/A
NAME, TITLE & FIRM (If applicable) — PHONE (day)

ADDRESS — CITY, STATE, ZIP CODE

CONTRACTOR
If applicable

Fiber Control, Inc. — (516) 781-3000
NAME, TITLE & FIRM (If applicable) — PHONE (day)

3010 Burns Avenue — Wantagh, New York 11793
ADDRESS — CITY, STATE, ZIP CODE

PERSON FILING APPLICATION
e.g. Expeditor, Attorney, Managing Agent, etc

NYC Department of Environmental Protection (718) 595-3718
NAME, TITLE & FIRM (If applicable) — PHONE (day)

59-17 Junction Boulevard, 8th Floor — Corona, New York 11368
ADDRESS — CITY, STATE, ZIP CODE

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MARVIN STAHL — PII
PII
ADDRESS — CITY, STATE, ZIP CODE

SIGNATURE

NYC DEP — for owner
SIGNATURE OF OWNER — DATE

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1 CENTRE STREET, 9TH FLOOR, NEW YORK, NEW YORK, 10007
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APPLICATION FORM

F-2

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Staff Use Only

LPC DOCKET #	DATE REC'D	DATE CERT. AS COMPLETE	BLDG. DEPT. # & DATE	STAFF

☐ INDIVIDUAL ☐ SCENIC ☐ INTERIOR — TYPE OF DESIGNATION — HISTORIC DISTRICT

☐ PMW ☐ CNE ☐ C OF A ☐ REPORT ☐ OTHER — ACTION — WORK TYPE

DESIGNATED PROPERTY

110 READE STREET — Exterior (ROOF & FACADE)
ADDRESS — FLOOR OR APARTMENT

Manhattan — 146 — 10
BOROUGH — BLOCK — LOT — ZONING

DETAILED DESCRIPTION OF PROPOSED WORK
Use back of form if necessary

Removal of debris (cleaning) from the collapse of the WTC from exterior building surfaces as per scope of work previously reviewed and approved by NYCLPC.

COST OF PROJECT _____ **WARNING LETTER / NOV #** _____

TENANT/LESSEE/ CO-OP SHAREHOLDER

N/A
NAME, TITLE & FIRM (if applicable) — PHONE (day)

ADDRESS — APT # — CITY, STATE, ZIP CODE

ARCHITECT/ ENGINEER
If applicable

N/A
NAME, TITLE & FIRM (if applicable) — PHONE (day)

ADDRESS — CITY, STATE, ZIP CODE

CONTRACTOR
If applicable

Fiber Control, Inc. — (516) 781-3000
NAME, TITLE & FIRM (if applicable) — PHONE (day)

3010 Burns Avenue — Wantagh, New York 11793
ADDRESS — CITY, STATE, ZIP CODE

PERSON FILING APPLICATION
e.g. Expeditor, Attorney, Managing Agent, etc

NYC Department of Environmental Protection (718) 595-3718
NAME, TITLE & FIRM (if applicable) — PHONE (day)

59-17 Junction Boulevard, 8th Floor — Corona, New York 11368
ADDRESS — CITY, STATE, ZIP CODE

ARE YOU APPLYING TO ANY OF THE FOLLOWING?

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SALIM K. SAHAGE — PII
OWNER'S NAME and TITLE (please type or print) — PHONE (day)

PII
ADDRESS — CITY, STATE, ZIP CODE

SIGNATURE

NYC DEP — for owner
SIGNATURE OF OWNER — DATE

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1 CENTRE STREET, 9TH FLOOR, NEW YORK, NEW YORK, 10007
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APPLICATION FORM

F-2

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☐ INDIVIDUAL ☐ SCENIC ☐ INTERIOR — TYPE OF DESIGNATION — HISTORIC DISTRICT

☐ PMW ☐ CNE ☐ C OF A ☐ REPORT ☐ OTHER — ACTION — WORK TYPE

DESIGNATED PROPERTY

53 WARREN STREET — Exterior (ROOF)
ADDRESS — FLOOR OR APARTMENT

Manhattan | 133 | 21 |
BOROUGH | BLOCK | LOT | ZONING

DETAILED DESCRIPTION OF PROPOSED WORK
Use back of form if necessary

Removal of debris (cleaning) from the collapse of the WTC from exterior building surfaces as per scope of work previously reviewed and approved by NYCLPC.

NO PERMIT REQUIRED as per John Weiss

COST OF PROJECT _____ **WARNING LETTER / NOV #** _____

TENANT/LESSEE/ CO-OP SHAREHOLDER

N/A
NAME, TITLE & FIRM (if applicable) — PHONE (day)

ADDRESS — APT # — CITY, STATE, ZIP CODE

ARCHITECT/ ENGINEER
If applicable

N/A
NAME, TITLE & FIRM (if applicable) — PHONE (day)

ADDRESS — CITY, STATE, ZIP CODE

CONTRACTOR
If applicable

Fiber Control, Inc. — (516) 781-3000
NAME, TITLE & FIRM (if applicable) — PHONE (day)

3010 Burns Avenue — Wantagh, New York 11793
ADDRESS — CITY, STATE, ZIP CODE

PERSON FILING APPLICATION
e.g. Expeditor, Attorney, Managing Agent, etc

NYC Department of Environmental Protection (718) 595-3718
NAME, TITLE & FIRM (if applicable) — PHONE (day)

59-17 Junction Boulevard, 8th Floor — Corona, New York 11368
ADDRESS — CITY, STATE, ZIP CODE

ARE YOU APPLYING TO ANY OF THE FOLLOWING?

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F. PFEIFER CORP. — (212) 964-5230
OWNER'S NAME and TITLE (please type or print) — PHONE (day)

COMPANY, CORPORATION, ORGANIZATION (if applicable)

53 WARREN STREET — NEW YORK N.Y. 10007
ADDRESS — CITY, STATE, ZIP CODE

SIGNATURE

NYC DEP — for owner
SIGNATURE OF OWNER — DATE

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THE CITY OF NEW YORK LANDMARKS PRESERVATION COMMISSION
1 CENTRE STREET, 9TH FLOOR, NEW YORK, NEW YORK, 10007
TEL: (212) 669-7700 FAX: (212) 669-7960

APPLICATION FORM

F-2

FOR WORK ON DESIGNATED PROPERTIES

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Staff Use Only

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☐ INDIVIDUAL ☐ SCENIC ☐ INTERIOR — TYPE OF DESIGNATION — HISTORIC DISTRICT

☐ PMW ☐ CNE ☐ C OF A ☐ REPORT ☐ — ACTION — OTHER — WORK TYPE

DESIGNATED PROPERTY

54 WARREN STREET — Exterior (ROOF)
ADDRESS — FLOOR OR APARTMENT

Manhattan | 136 | 11 | | |
BOROUGH | BLOCK | LOT | ZONING

DETAILED DESCRIPTION OF PROPOSED WORK
Use back of form if necessary

Removal of debris (cleaning) from the collapse of the WTC from exterior building surfaces as per scope of work previously reviewed and approved by NYCLPC.

NO PERMIT REQUIRED as per John Weiss

COST OF PROJECT _____ **WARNING LETTER / NOV #** _____

TENANT/LESSEE/ CO-OP SHAREHOLDER

N/A
NAME, TITLE & FIRM (if applicable) — PHONE (day)

ADDRESS — APT # — CITY, STATE, ZIP CODE

ARCHITECT/ ENGINEER
If applicable

N/A
NAME, TITLE & FIRM (if applicable) — PHONE (day)

ADDRESS — CITY, STATE, ZIP CODE

CONTRACTOR
If applicable

Fiber Control, Inc. — (516) 781-3000
NAME, TITLE & FIRM (if applicable) — PHONE (day)

3010 Burns Avenue — Wantagh, New York 11793
ADDRESS — CITY, STATE, ZIP CODE

PERSON FILING APPLICATION
e.g. Expeditor, Attorney, Managing Agent, etc.

NYC Department of Environmental Protection — (718) 595-3718
NAME, TITLE & FIRM (if applicable) — PHONE (day)

59-17 Junction Boulevard, 8th Floor — Corona, New York 11368
ADDRESS — CITY, STATE, ZIP CODE

ARE YOU APPLYING TO ANY OF THE FOLLOWING?

☐ Buildings Department ☐ City Planning Commission ☐ Board of Standards & Appeals

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54 WARREN STREET LLC.
OWNER'S NAME and TITLE (please type or print) — PHONE (day)

c/o VERTICAL MANAGEMENT
COMPANY, CORPORATION, ORGANIZATION (if applicable)

1385 WEST BROADWAY, SUITE 906A, N.Y. NY 10018
ADDRESS — CITY, STATE, ZIP CODE

SIGNATURE

NYC DEP for owner
SIGNATURE OF OWNER — DATE

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THE CITY OF NEW YORK, LANDMARKS PRESERVATION COMMISSION
1 CENTRE STREET, 9TH FLOOR, NEW YORK, NEW YORK, 10007
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APPLICATION FORM

F-2

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Staff Use Only

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☐ INDIVIDUAL ☐ SCENIC ☐ INTERIOR — TYPE OF DESIGNATION — HISTORIC DISTRICT

☐ PMW ☐ CNE ☐ C OF A ☐ REPORT ☐ OTHER — ACTION — WORK TYPE

DESIGNATED PROPERTY

67 GREENWICH STREET — Exterior - (ROOF & FACADE)
ADDRESS — FLOOR OR APARTMENT

Manhattan | 19 | 11 |
BOROUGH | BLOCK | LOT | ZONING

DETAILED DESCRIPTION OF PROPOSED WORK
Use back of form if necessary

Removal of debris (cleaning) from the collapse of the WTC from exterior building surfaces as per scope of work previously reviewed and approved by NYCLPC.

COST OF PROJECT _____ **WARNING LETTER / NOV #** _____

TENANT/LESSEE/ CO-OP SHAREHOLDER

N|A
NAME, TITLE & FIRM (if applicable) — PHONE (day)

ADDRESS — APT # — CITY, STATE, ZIP CODE

ARCHITECT/ ENGINEER
If applicable

N|A
NAME, TITLE & FIRM (if applicable) — PHONE (day)

ADDRESS — CITY, STATE, ZIP CODE

CONTRACTOR
If applicable

Trio Asbestos Removal Corp. — (718) 961-4100
NAME, TITLE & FIRM (if applicable) — PHONE (day)

14-20 129 Street — College Point, New York 11356
ADDRESS — CITY, STATE, ZIP CODE

PERSON FILING APPLICATION
e.g. Expeditor, Attorney, Managing Agent, etc.

NYC Department of Environmental Protection (718) 595-3718
NAME, TITLE & FIRM (if applicable) — PHONE (day)

59-17 Junction Boulevard, 8th Floor — Corona, New York 11368
ADDRESS — CITY, STATE, ZIP CODE

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MARTHA SCHESSEL — (212) 787-5932
OWNER'S NAME and TITLE (please type or print) — PHONE (day)

67 GREENWICH LLC
COMPANY, CORPORATION, ORGANIZATION (if applicable)

P.O. BOX 112 PLANETARIUM STATION N.Y. N.Y. 10024
ADDRESS — CITY, STATE, ZIP CODE

SIGNATURE

NYC DEP — for owner
SIGNATURE OF OWNER — DATE

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F-2

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☐ INDIVIDUAL ☐ SCENIC ☐ INTERIOR — TYPE OF DESIGNATION — HISTORIC DISTRICT

☐ PMW ☐ CNE ☐ C OF A ☐ REPORT ☐ OTHER — ACTION — WORK TYPE

DESIGNATED PROPERTY

41-43 MURRAY STREET — ADDRESS
Exterior (FACADE) — FLOOR OR APARTMENT

BOROUGH	BLOCK	LOT	ZONING
Manhattan	133	7501	

DETAILED DESCRIPTION OF PROPOSED WORK
Use back of form if necessary

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COST OF PROJECT _____ **WARNING LETTER / NOV #** _____

TENANT/LESSEE/ CO-OP SHAREHOLDER

N/A
NAME, TITLE & FIRM (if applicable) — PHONE (day)

ADDRESS — APT # — CITY, STATE, ZIP CODE

ARCHITECT/ ENGINEER
If applicable

N/A
NAME, TITLE & FIRM (if applicable) — PHONE (day)

ADDRESS — CITY, STATE, ZIP CODE

CONTRACTOR
If applicable

Fiber Control, Inc. — (516) 781-3000
NAME, TITLE & FIRM (if applicable) — PHONE (day)

3010 Burns Avenue — Wantagh, New York 11793
ADDRESS — CITY, STATE, ZIP CODE

PERSON FILING APPLICATION
e.g. Expeditor, Attorney, Managing Agent, etc

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NAME, TITLE & FIRM (if applicable) — PHONE (day)

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ADDRESS — CITY, STATE, ZIP CODE

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M & A Residences Inc. — (212) 529-5688
OWNER'S NAME and TITLE (please type or print) — PHONE (day)

c/o Andrews Building Corp.
COMPANY, CORPORATION, ORGANIZATION (if applicable)

666 BROADWAY — NEW YORK N.Y. 10012-2317
ADDRESS — CITY, STATE, ZIP CODE

SIGNATURE

NYC DEP for owner
SIGNATURE OF OWNER — DATE

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1 CENTRE STREET, 9TH FLOOR, NEW YORK, NEW YORK, 10007
TEL: (212) 669- 7700 FAX: (212) 669-7960

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F-2

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Please print or type all items. If not applicable, mark N.A.

Staff Use Only

LPC DOCKET # | DATE REC'D | DATE CERT. AS COMPLETE | BLDG. DEPT. # & DATE | STAFF

☐ INDIVIDUAL ☐ SCENIC ☐ INTERIOR — TYPE OF DESIGNATION — HISTORIC DISTRICT

☐ PMW ☐ CNE ☐ C OF A ☐ REPORT ☐ OTHER — ACTION — WORK TYPE

DESIGNATED PROPERTY

175 BROADWAY — Exterior (ROOF & FACADE)
ADDRESS — FLOOR OR APARTMENT

Manhattan | 63 | 20 |
BOROUGH | BLOCK | LOT | ZONING

DETAILED DESCRIPTION OF PROPOSED WORK
Use back of form if necessary

Removal of debris (cleaning) from the collapse of the WTC from exterior building surfaces as per scope of work previously reviewed and approved by NYCLPC.

NO PERMIT REQUIRED as per John Weiss

COST OF PROJECT _____ **WARNING LETTER / NOV #** _____

TENANT/LESSEE/ CO-OP SHAREHOLDER

N/A
NAME, TITLE & FIRM (If applicable) — PHONE (day)

ADDRESS — APT # — CITY, STATE, ZIP CODE

ARCHITECT/ ENGINEER
If applicable

N/A
NAME, TITLE & FIRM (If applicable) — PHONE (day)

ADDRESS — CITY, STATE, ZIP CODE

CONTRACTOR
If applicable

Fiber Control, Inc. — (516) 781-3000
NAME, TITLE & FIRM (If applicable) — PHONE (day)

3010 Burns Avenue — Wantagh, New York 11793
ADDRESS — CITY, STATE, ZIP CODE

PERSON FILING APPLICATION
e.g. Expeditor, Attorney, Managing Agent, etc.

NYC Department of Environmental Protection (718) 595-3718
NAME, TITLE & FIRM (If applicable) — PHONE (day)

59-17 Junction Boulevard, 8th Floor — Corona, New York 11368
ADDRESS — CITY, STATE, ZIP CODE

ARE YOU APPLYING TO ANY OF THE FOLLOWING?

☐ Buildings Department ☐ City Planning Commission ☐ Board of Standards & Appeals

I am the owner of the above listed property. I am familiar with the work proposed to be carried out on my property and give my permission for this application to be filed. The information entered is correct and complete, to the best of my knowledge.

OWNER

For applications for work on or in a cooperative or condominium building, the "owner" is the Co-op Board or Condominium Association. An officer of the Co-op Board or Condominium Association must sign this application Please consult the Instructions for Filing for additional information

CENTURY REALTY INC. (212) 267-7778
OWNER'S NAME and TITLE (please type or print) — PHONE (day)

COMPANY, CORPORATION, ORGANIZATION (If applicable)

140 FULTON STREET, NEW YORK N.Y. 10038
ADDRESS — CITY, STATE, ZIP CODE

SIGNATURE

NYC DEP for owner
SIGNATURE OF OWNER — DATE

Note: Section 25-317 of the Administrative Code of the City of New York makes it a punishable offense to willfully make false statements on this application

THE CITY OF NEW YORK LANDMARKS PRESERVATION COMMISSION
1 CENTRE STREET, 9TH FLOOR, NEW YORK, NEW YORK, 10007
TEL: (212) 669- 7700 FAX: (212) 669-7960

APPLICATION FORM

F-2

FOR WORK ON DESIGNATED PROPERTIES

This application will not be deemed complete until it is so certified by the Landmarks Preservation Commission. An application consists of an application form and the materials necessary to describe the project fully. If being submitted in response to a Warning Letter or Notice of Violation, please enter the number below.

Please print or type all items. If not applicable, mark N.A.

Staff Use Only

LPC DOCKET #	DATE REC'D	DATE CERT. AS COMPLETE	BLDG. DEPT. # & DATE	STAFF

☐ INDIVIDUAL ☐ SCENIC ☐ INTERIOR — TYPE OF DESIGNATION — HISTORIC DISTRICT

☐ PMW ☐ CNE ☐ C OF A ☐ REPORT ☐ — ACTION — OTHER — WORK TYPE

DESIGNATED PROPERTY

127 Fulton Street — Exterior (Roof)
ADDRESS — FLOOR OR APARTMENT

Manhattan | 91 | 12 | BOROUGH | BLOCK | LOT | ZONING

DETAILED DESCRIPTION OF PROPOSED WORK
Use back of form if necessary

Removal of debris (cleaning) from the collapse of the WTC from exterior building surfaces as per scope of work previously reviewed and approved by NYCLPC.

NO PERMIT REQUIRED as per John Weiss

COST OF PROJECT _____ **WARNING LETTER / NOV #** _____

TENANT/LESSEE/ CO-OP SHAREHOLDER

N/A
NAME, TITLE & FIRM (if applicable) — PHONE (day)

ADDRESS — APT # — CITY, STATE, ZIP CODE

ARCHITECT/ ENGINEER
If applicable

N/A
NAME, TITLE & FIRM (if applicable) — PHONE (day)

ADDRESS — CITY, STATE, ZIP CODE

CONTRACTOR
If applicable

Benjamin Kurzban and Son Control, Inc. (718) 531-2900
NAME, TITLE & FIRM (if applicable) — PHONE (day)

1248 Ralph Avenue — Brooklyn, New York 11236
ADDRESS — CITY, STATE, ZIP CODE

PERSON FILING APPLICATION
e.g. Expeditor, Attorney, Managing Agent, etc.

NYC Department of Environmental Protection (718) 595-3718
NAME, TITLE & FIRM (if applicable) — PHONE (day)

59-17 Junction Boulevard, 8th Floor — Corona, New York 11368
ADDRESS — CITY, STATE, ZIP CODE

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Collegiate Church Corp. (212) 233-1960
OWNER'S NAME and TITLE (please type or print) — PHONE (day)

Attn D. Riviar
COMPANY, CORPORATION, ORGANIZATION (if applicable)

45 John Street Suite 1000 New York NY 10038
ADDRESS — CITY, STATE, ZIP CODE

SIGNATURE

NYC DEP — for owner
SIGNATURE OF OWNER — DATE

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