



FIRE DEPARTMENT, CITY OF NEW YORK • BUREAU OF FIRE PREVENTION

INSPECTION REPORT

FOLDER NO. 16563094

ACCOUNT	ADM CO	START DATE	D.O.	TYPE
<u>16563094</u>		<u>06/11/97</u>	<u>35</u>	<u>16.01</u>

RESTAURANT NAME
SILACOMON BROTHERS

PREMISE ADDRESS

AKA:

STREET NUMBER	PREFIX →	STREET NAME	BORO CODE →
	SUFFIX →	ZIP CODE	

BILLING ADDRESS

APIC:

STREET NUMBER	PREFIX →	STREET NAME	BORO CODE →
	SUFFIX →	ZIP CODE	

ENTER HERE IF OUT OF TOWN

STATE →	ZIP CODE →
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ALPHA PREFIX	INSPECTOR NAME	EXAMINER NAME	DATE
<u>6</u>	<u>Mr. Sunday Smith</u>		

ITEM CODE	ITEM SUB-CODE	QTY	DESCRIPTION	FLOOR NO
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				
11				
12				

COMMENTS

STATUS - CHECK AND COMPLETE

- ☐ APPROVED FOR PERMIT
☒ VIOLATIONS REPORTED

INSPECTION DATE	INSPECTOR - I.D.
<u>06/11/97</u>	<u>30022/15</u>

V.O. ISSUED	V.O. DISMISSAL / RESCIND	NOV. ISSUED
<u>D.65835 RH-7</u>	<u>1</u>	
	<u>1</u>	
	<u>1</u>	
	<u>1</u>	

ENTRY CLERK <u>[Signature]</u>	DATE <u>6/11/97</u>	AUDITOR <u>[Signature]</u>	DATE
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RANGEHOOD UNIT INSPECTION REPORT

Inspection Date: 6/11/97 Account No. 92051127
 Restaurant Name: Salomon Brothers Cafe. Folder No. _____
 Premise Address: 7 World Trade Ctr.
 Boro: Manhattan Zip: 10048

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Name of System: Ansul Model No. R102
 No. of Cylinders: 2 Gals./Lbs. 3
 System Approved? ☐ Yes ☒ No F.D. Tag No. none
 Type of Inspection: ☐ 106 Initial ☒ Reinspection
 With Plans: _____ I.O.C.: _____ Referral: _____ V.O. No.: X
 Installation Conforms to Tag/Plans? ☐ Yes ☒ No to g
 V.O.(s) Issued: _____ RH Code: _____

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Approved Filters? ☒ Yes ☐ No Quarterly Cleaning? ☒ Yes ☐ No
 Semi Annual Service By Authorized Contractor? ☒ Yes ☐ No
 Sketch / Cleaning & Operating Instructions? ☒ Yes ☐ No

N.O.V.(s) Issued: No.(s) _____

=====

Comments: Inspection unsatisfactory RH-7
where it goes

unable to locate V.O.

Harold Sunday
 Print Inspector's Name
Harold Sunday
 Sign Inspector's Name

RHINSP (11/90)



CROSS STREETS

CITY OF NEW YORK
FIRE DEPARTMENT
BUREAU OF FIRE PREVENTION

A-10(D) (1/91) 72-910143-117-P

BATTALION

D.O. 35

VIOLATION ORDER

D 65835

To: 7 World Trade Center, N.Y. 10048 Salomon Bro. Cafe
4th floor Commercial / Rest 920 511 27
ROOM NO. OF FLOOR TYPE OF OCCUPANCY NAME OF OWNER, LEASEE, OCCUPANT, ETC. ACCOUNT NO.

Sir: An inspection this date of the above premises indicates the existence of the following violations under the enforcement jurisdiction of this Department. You are hereby directed to correct such violations by compliance with the following order:

STANDARD
ORDER
FORM NO.

ITEM
NO.

- Rec'd*
- RH 1 Legalize the Longhood Fire Extinguishing System by filing plans with the Dept of Buildings. Plans to be stamped by a licensed professional engineer registered architect. Submit 3 plans - 3 applications from the Dept of Buildings to the Bureau of Fire Prevention Longhood Unit for review & approval.
- RH 2 Arrange for an inspection and test of the Fire Extinguishing System to be witnessed by a member of this Dept.

Note ~~to~~ No record in F.D. file

If this order has not been complied with in, 30 days of the issuance date, A SUMMONS will be served for violations of the Administrative Code of the City of New York.

TO 25

FOR -NUMBERING

TO 24

FOR DISMISSAL

Thomas Von Essen
Charles M. Faria

Fire Commissioner

This is to certify that I have made an inspection of said premises and have issued the above order to:

Walter Leronzetti Apic 212-783-5514
NAME OF PERSON WHO RECEIVED THIS ORDER TITLE PHONE #
M. Sunday Smith 4/11/97 Suppression
INSPECTOR DATE UNIT

Unit Address 250 Livingston St Unit Telephone 718-694-2508