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

FIR 165630 01

INSPECTION ORDER

DATE	ACCOUNT	TYPE	ALPHA PREFIX	D.O.	ADM CO	NO FEE ACT	SEE ATT. LIST	CURRENT PERMIT EXPIRES
11/13/97	92051077	11	G	35	RC12	X		12/97

PLEASE INDICATE ANY OF THESE COLUMN CHANGES AT RIGHT → CHANGES | CHANGES | CHANGES | CHANGES

16 01

☐ CHECK HERE FOR ANY CHANGES AND INDICATE BELOW OR ON REVERSE

CIO ☐ CIC ☐ CIMA ☐ CIN ☐

INSPECTION TYPE: 1 - SCHEDULED, 2 - RE-INSPECTED, 3 - REQUESTED, 4 - COMPLAINT

VIO # D65836A
MORE VIOLATIONS EXIST

PREMISES ADDRESS	AKA ADDRESS
C/O WALTER LORENZETTE 7 WORLD TRADE CENTER NEW YORK, NY 10048	
MAILING ADDRESS	**ACCOUNT NAME**
7 WORLD TRADE CENTER NEW YORK, NY 10048	SALOMON BROS.CAFETERIA

ITEM CODE	SUB CODE	QTY	DESCRIPTION	FLOOR NO.
864	00	1	RANGEHOOD ANNUAL INSPECTION	45

	A FL 45*HOOD B	FL 45*HOOD	C FL *HOOD D FL *HOOD E FL *HOOD F FL
NZ:	APP NZ*APP NZ:	APP NZ*APP	NZ:APP NZ*APP NZ:APP NZ*APP NZ:APP NZ*APP NZ:APP NZ
2 :	OVN 0 *OVN 0 :	*	: * : * : * :
2 :	*BPN 0 :	*	: * : * : * :
1 :	*TSK 2 :	*	: * : * : * :
1 :	*TSK 0 :	*	: * : * : * :
0 :	* :	*	: * : * : * :

COMMENTS (CIC)

R102-3G/OP HRS 7AM-8PM/TAG#

TEL#212-783-5514/APIC J.ALESSI/

FDP# /F /

ITEMS TO BE ADDED OR DELETED (CIC)

	ITEM CODE	ITEM SUB-CODE	NEW QTY.	DESCRIPTION	FLOOR NO.
1					
2					
3					
4					
5					
6					

STATUS CHECK AND COMPLETE

☑ APPROVED FOR PERMIT
☐ MINOR VIOLATIONS REPORTED

NEXT INSPECTION SCHEDULED DATE

☐ VOID WITH REASON ENTER CODE
☐ NOT APPROVED WITH REASON ENTER CODE

INDICATE CHANGES BELOW
PLEASE **PRINT** ALL INFORMATION

PREMISES ADDRESS

ADDITIONAL PREMISES INFO

STREET NUMBER PREFIX

STREET NAME

TYPE SUFFIX ZIP BORO

AKA ADDRESS

STREET NUMBER PREFIX

STREET NAME

TYPE SUFFIX

ACCOUNT NAME (CIN) - OWNER NAME (CIO)

X - IF CHANGE IN NAME ONLY

X - IF CHANGE IN OWNER

DATE OF OWNER CHANGE

MAILING ADDRESS (CIMA)

ADDITIONAL MAILING INFO

STREET NUMBER PREFIX

STREET NAME

TYPE SUFFIX ZIP BORO

ENTER HERE FOR OUT OF TOWN ADDRESS (CIMA)

CITY STATE ZIP

REMARKS

INSPECTOR V. Povelatsky	DATE 02/17/98	INSPECTOR I.D. S20649 130	COMMENTS	
EXAMINER	DATE			
ENTRY CLERK L. Dias	DATE 4/8/98			
AUDITOR	DATE			

INSPECTOR	DATE	INSPECTOR I.D.	COMMENTS	
EXAMINER	DATE			
NTRY CLERK	DATE			
AUDITOR	DATE			

RANGEHOOD UNIT INSPECTION REPORT

Inspection Date: 02.17.98 Account No. 92057077

Folder No. _____

Restaurant Name: SALOMON BROS. CAFETERIA

Premise Address: 7 WORLD TRADE CENTER 45F

Boro: MAN Zip: 10048

Name of System: ANSUL Model No. R102

No. of Cylinders: 3 (Gals)/Lbs. 3x3

System Approved? ☐ Yes ☑ No F.D. Tag No. —

Type of Inspection: ☐ 106 Initial ☑ Reinspection

With Plans: ___ I.O.C.: ___ Referral: ___ V.O. No.: D65836

Installation Conforms to Tag/Plans? ☐ Yes ☑ No

V.O.(s) Issued: _____ RH Code: _____

_____ _____

Approved Filters? ☑ Yes ☐ No Quarterly Cleaning? ☑ Yes ☐ No

Semi Annual Service By Authorized Contractor? ☑ Yes ☐ No

Sketch / Cleaning & Operating Insructions? ☑ Yes ☐ No

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

Comments: SATISFACTORY PORT AUTHORITY

VADIM POVOLOTSKIY
Print Inspector's Name

Vadim Povolotskiy
Sign Inspecor's Name

RHINSP (11/90)

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

REQUESTED

INSPECTION ORDER

DATE	ACCOUNT	TYPE	ALPHA PREFIX	D.O.	ADM CO	NO FEE ACT	SEE ATT. LIST	CURRENT PERMIT EXPIRES
09/16/96	92051077	11	G	35	R012	X		12/96

PLEASE INDICATE ANY OF THESE COLUMN CHANGES AT RIGHT →

CHANGES	CHANGES	CHANGES	CHANGES

☐ CHECK HERE FOR ANY CHANGES AND INDICATE BELOW OR ON REVERSE

CIO ☐ CIC ☐ CIMA ☐ CIN ☐

INSPECTION TYPE 1

1 - SCHEDULED
2 - RE-INSPECTED
3 - REQUESTED
4 - COMPLAINT

VIO # D223530
MORE VIOLATIONS EXIST

PREMISES ADDRESS	AKA ADDRESS
C/O WALTER LORENZETTE 7 WORLD TRADE CENTER NEW YORK, NY 10048	

BILLING ADDRESS	ACCOUNT NAME
7 WORLD TRADE CENTER NEW YORK, NY 10048	SALOMON BROS. CAFETERIA

ITEM CODE	SUB CODE	QTY	DESCRIPTION	FLOOR NO.
364	DU	1	RANGEHOOD ANNUAL INSPECTION	45

)OD A FL 45	*HOOD B FL 45	*HOOD C FL	*HOOD D FL	*HOOD E FL	*HOOD F FL
'P NZ: APP NZ	*APP NZ: APP NZ	*APP NZ: APP NZ	*APP NZ: APP NZ	*APP NZ: APP NZ	*APP NZ: APP NZ
3R 2✓: OVN 0	*OVN 0✓:	* :	* :	* :	* :
'N 2✓:	*BPN 2✓:	* :	* :	* :	* :
'P 1✓:	*TSK 0✓:	* :	* :	* :	* :
'R 1✓:	*TSK 0✓:	* :	* :	* :	* :
TM 0✓	*SAL 2✓:	* :	* :	* :	* :

COMMENTS (CIC)

R102-3G/OP HRS 7AM-3PM/TAG#

TEL#212-783-5514/APIC J.ALESSI/

FDP# /F /

ITEMS TO BE ADDED OR DELETED (CIC)

	ITEM CODE	ITEM SUB-CODE	NEW QTY.	DESCRIPTION	FLOOR NO.
1	864	00	01	RH ANNUAL INSP	45
2					
3					
4					
5					
6					

STATUS CHECK AND COMPLETE

☐ APPROVED FOR PERMIT
☐ MINOR VIOLATIONS REPORTED

☐ VOID WITH REASON
ENTER CODE

☒ NOT APPROVED WITH REASON V.O. # D65836
ENTER CODE
Recind V.O. # D223530

NEXT INSPECTION SCHEDULED DATE

INDICATE CHANGES BELOW
PLEASE **PRINT** ALL INFORMATION

PREMISES ADDRESS

ADDITIONAL PREMISES INFO

STREET NUMBER PREFIX

STREET NAME

TYPE SUFFIX ZIP BORO

AKA ADDRESS

STREET NUMBER PREFIX

STREET NAME

TYPE SUFFIX

ACCOUNT NAME (CIN) - OWNER NAME (CIO)

X - IF CHANGE IN NAME ONLY

X - IF CHANGE IN OWNER

DATE OF OWNER CHANGE / /

MAILING ADDRESS (CIMA)

ADDITIONAL MAILING INFO

STREET NUMBER PREFIX

STREET NAME

TYPE SUFFIX ZIP BORO

ENTER HERE FOR OUT OF TOWN ADDRESS (CIMA)

CITY STATE ZIP

REMARKS

INSPECTOR [signature]	DATE 04/01/97	INSPECTOR I.D. 50028/25	COMMENTS insp - unsat
EXAMINER	DATE / /		
ENTRY CLERK	DATE / /		
AUDITOR	DATE / /		

INSPECTOR	DATE / /	INSPECTOR I.D.	COMMENTS
EXAMINER	DATE / /		
ENTRY CLERK	DATE / /		
AUDITOR	DATE / /		

RANGEHOOD UNIT INSPECTION REPORT

Inspection Date: 4/1/97 **Account No.** 920 51077

Folder No.

Restaurant Name: Salomon Brothers Cafeteria

Premise Address: 7 World Trade Center

Boro: N.Y. NY **Zip:** 10048

Name of System: Amerel **Model No.** RC02

No. of Cylinders: 3 **Gals./Lbs.** 1

System Approved? ☐ Yes ☒ No **F.D. Tag No.** None

Type of Inspection: ☒ 106 Initial ☐ Reinspection

With Plans: ___ **I.O.C.:** ☒ **Referral:** ___ **V.O. No.:** ___

Installation Conforms to Tag/Plans? ☐ Yes ☒ No Survey

V.O.(s) Issued: _____ **RH Code:** _____

Approved Filters? ☒ Yes ☐ No **Quarterly Cleaning?** ☒ Yes ☐ No

Semi Annual Service By Authorized Contractor? ☒ Yes ☐ No

Sketch / Cleaning & Operating Insructions? ☒ Yes ☐ No

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

Comments: Inspection unsatisfactory no tags.

4-11-97 Checked F.D. files rec'ind V.O.# D22353C issued legalize V.O.#D 65836 RH-2

Mary Lou Sandra Smith
Print Inspector's Name

Mary Lou Sandra Smith
Sign Inspecor's Name

RHINSP (11/90)