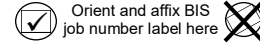




# CCD1: Construction Code Determination Form

Must be typewritten.



Do not use this form for Zoning Resolution determination requests - use ZRD1 form

## 1 Location Information Required for all requests on filed applications.

House No(s)	Street Name			
Borough	Block	Lot	BIN	CB No.

## 2 Applicant Information Required for all requests on filed applications.

Last Name	First Name	Middle Initial
Business Name	Business Telephone	
Business Address	Business Fax	
City	State	Zip
E-Mail	Mobile Telephone	
License Type		License Number
<input type="checkbox"/> P.E. <input type="checkbox"/> R.A. <input type="checkbox"/> RLA <input type="checkbox"/> Elevator (Co) Director <input type="checkbox"/> Master Electrician		DOB PENS ID # (if available)

## 3 Attendee Information Required if different from Applicant in Section 2 or no Applicant.

Relationship to the property:  Attorney    Filing Representative (Class 2)    Other

Last Name	First Name	Middle Initial
Business Name	Business Telephone	
Business Address	Business Fax	
City	State	Zip
E-Mail	Mobile Telephone	
License/Registration # (if P.E./R.A./R.L.A./Attorney/Lic.(Co)Director/Master Electrician)		

## 4 Nature of Request Required for all requests. Only one request may be submitted per form.

Determination request is for:  Determination    Predetermination

Determination request issued to:  Borough Commissioner's Office (Initial)    Technical Affairs (Appeal)    Elevators

Job associated with this request?  Yes (provide job # / doc # / obj # / examiner name below)    No

Job/Application #: \_\_\_\_\_ Document #: \_\_\_\_\_ Objection #: \_\_\_\_\_ Examiner/Inspector: \_\_\_\_\_

Has this request or a similar one been previously denied?  Yes (**attach all denied request form(s) and attachment(s)**)    No

Enter short description of Technical Topic (5 words or less): \_\_\_\_\_

Construction Code (if applicable):  2022 Code    2014 Code    2008 Code    1968 Code    Prior to 1968 Code

Electrical Code (if applicable):  2011 Code    2007 Code    2004 Code    Prior to 2004 Code

Enter All Control #(s) for related CCD1/ZRD1 requests: \_\_\_\_\_

Request for 1-3 family dwelling?  Yes    No   For HPD Affordable Housing?  Yes    No   Fee Exempt per 28-112.1?  Yes    No

Zoning District(s): \_\_\_\_\_ MDL: \_\_\_\_\_

Zoning Overlay(s): \_\_\_\_\_ BBs: \_\_\_\_\_

Special District(s): \_\_\_\_\_ Other: \_\_\_\_\_

ZR Section: \_\_\_\_\_ Code Section: \_\_\_\_\_ Rule #: \_\_\_\_\_ TPPN, Memo: \_\_\_\_\_

Indicate all Buildings Department officials that you have previously reviewed this issue with (if any):

Borough Commissioner    Code & Zoning Specialist    General Counsel's Office

Deputy Borough Commissioner    Chief Plan Examiner    Elevators    Other

## ADMINISTRATIVE USE ONLY

Control #:	Appointment date:
Appointment Scheduled With:	
Comments:	
Review Team Members:	
Reviewed By:	Date

# CCD1: Construction Code Determination Form

**5 Description of Request** (utilize page 3/Section 7 if additional space is needed to properly describe this request)

This is a request for:

- Interpretation or clarification
- Variation of Building Code or Rules per § 28-103.3 (please state in detail the practical difficulty that is specific to this project, and provide the analysis as to equally safe alternative, as per NYC Charter Section 645(b)(2))
- Variation of Multiple Dwelling Law (MDL) § 277.16 for Article 7B Buildings (please state in detail the practical difficulty that is specific to this project and provide the analysis as to equally safe alternative, as per NYC Charter Section 645(b)(2))
- Variation of Electrical Code or Rules per NYC Electrical Code § 90.4 (please state in detail the practical difficulty \_\_\_\_\_ and provide safe alternative method \_\_\_\_\_ for establishing and maintaining effective safety.

*NOTE: Variations of any other MDL provisions must be filed with the Board of Standards and Appeals (BSA) per MDL § 310.*

Please itemize all attachments, including plans/sketches, submitted with this form. (**attachment may not be larger than 11" x 17"**)  
 If request is based on a plan examiner objection, type in the applicable objection text exactly as it appears on the Objection sheet and include a copy of the Objection sheet in the submitted Pdf.

**NOTE: Department of Buildings Determination will be issued on the CCD1 Response Form**

**6 Statements and Signature** Required for all requests (If Attorney, include 'Esquire' or 'Esq.' in signature)

I hereby state that all of the above information is correct and complete to the best of my knowledge. 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.

Name (please print)	
Signature	Date
P.E. / R.A. / Master Electrician Seal (apply seal, then sign and date over seal –not required for Attorneys on unfiled applications)	

<b>ADMINISTRATIVE USE ONLY</b>	<b>Control #:</b>	
<b>Reviewed By:</b>	<b>Date:</b>	

<b>7</b>	<b>Description of Request</b> (use this section if additional space is required for description)
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**NOTE: Department of Buildings Determination will be issued on the CCD1 Response Form**

<b>8</b>	<b>Statements and Signature</b> <i>Required for all requests (If Attorney, include 'Esquire' or 'Esq.' in signature)</i>
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I hereby state that all of the above information is correct and complete to the best of my knowledge. 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.

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<b>ADMINISTRATIVE USE ONLY</b>	<b>Control #:</b>	
<b>Reviewed By:</b>		<b>Date:</b>