



# DOB NOW: *Safety*

LL152 OF 2016: GAS PIPING SYSTEM CERTIFICATION

Industry Session

Updated July 2026

- Best Practices
- LL152 of 2016 Overview
- Initial Certification
- Certification of Correction
- Extension Request
- Property Verification
- Inspection Notification
- Unsafe or Hazardous Conditions Notification
- Waivers and Challenges

# BEST PRACTICES FOR THE VIRTUAL CLASSROOM

DOB  
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**Chat Feature**



**Mute Microphones**



**Ask Questions**



**Parking Lot**



**Feedback**

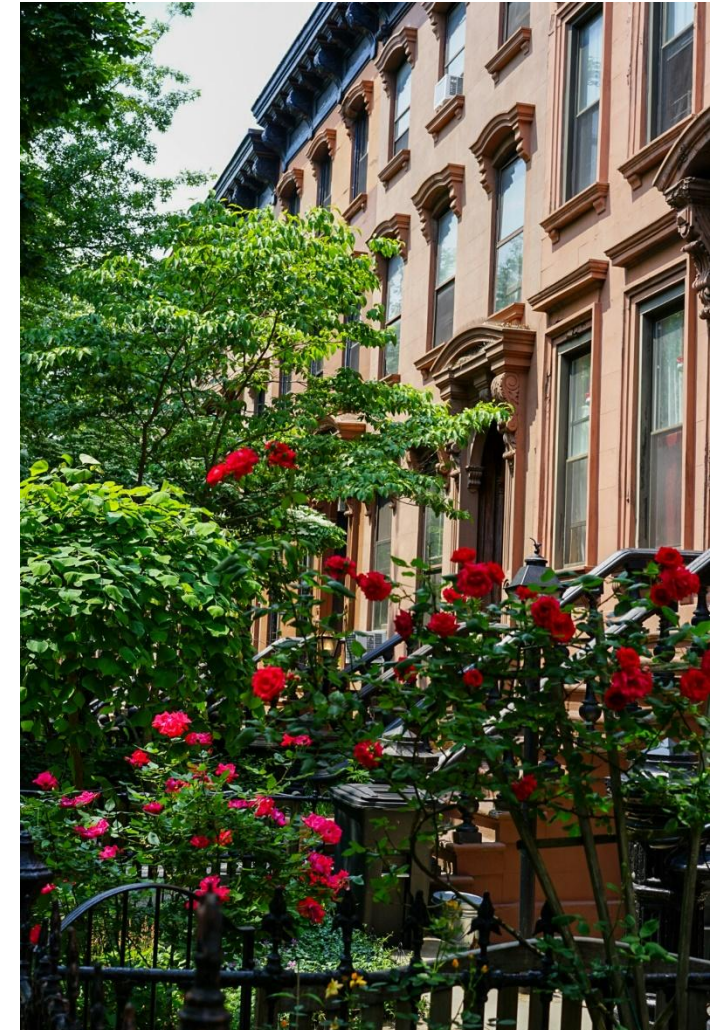


**Participate**



## LL152 OF 2016 OVERVIEW

- According to Local Law 152 of 2016, owners of buildings other than one- and two-family homes are required to meet compliance conditions:
  - If the building has an **active gas piping system**, they should have the gas piping system inspected at least once every four years by a Licensed Master Plumber (LMP), and a gas piping system **certification** must be submitted to DOB.
  - If the building does **not have a gas piping system**, they should submit a **certification** to DOB once stating that the building does not contain gas piping.
  - If the building contains a gas piping system but is not currently supplied with gas and does not contain any appliance connected to any gas piping, they should submit statements to DOB.





- Owners of **new buildings** (defined as a building, or any portion thereof, for which the Department has issued a temporary, interim, or final Certificate of Occupancy on or after December 6, 2016) are **not required to have gas piping system inspections until the tenth year** after the Department issued a certificate of occupancy for the building.
- After that first inspection, the building will be required to have the inspection and submit the certification during the Cycle/Sub Cycle for the Community District in which the building is located.

# DOB NOW: *Safety* – LL152 CERTIFICATION OF CORRECTION



- If a Gas Piping Initial Certification identifies issues or condition(s) that need to be corrected, owners must correct those items and then submit a **Certification of Correction**.
- In the Inspection where the issue is identified, the time needed to correct the issue must be identified as **120 days or 180 days** from the date of inspection.
- If the initial Inspection specifies 120 days, owners can request an extension up to the 180-day limit.



- LL152 gas piping inspection certification submission was done through an online portal (GPS2).
- As of **July 27, 2026**, all LL152 submissions will be filed through DOB NOW: *Safety*. This includes:
  - Initial Certification
  - Certification of correction
  - Extension requests
  - Property Verification
  - Unsafe or hazardous conditions notification

# DOB NOW: *Safety* – LL152 SUB-CYCLES



| Sub-Cycle | Community Districts | Cycle 1                                | Cycle 2                                | Cycle 3                                |
|-----------|---------------------|----------------------------------------|----------------------------------------|----------------------------------------|
| A         | 1, 3, 10            | January 1, 2020 –<br>June 30, 2021     | January 1, 2024 –<br>December 31, 2024 | January 1, 2028 –<br>December 31, 2028 |
| B         | 2, 5, 7, 13, 18     | January 1, 2021 –<br>June 30, 2022     | January 1, 2025 –<br>December 31, 2025 | January 1, 2029 –<br>December 31, 2029 |
| C         | 4, 6, 8, 9, 16      | January 1, 2022 –<br>December 31, 2022 | January 1, 2026 –<br>December 31, 2026 | January 1, 2030 –<br>December 31, 2030 |
| D         | 11, 12, 14, 15, 17  | January 1, 2023 –<br>December 31, 2023 | January 1, 2027 –<br>December 31, 2027 | January 1, 2031 –<br>December 31, 2031 |

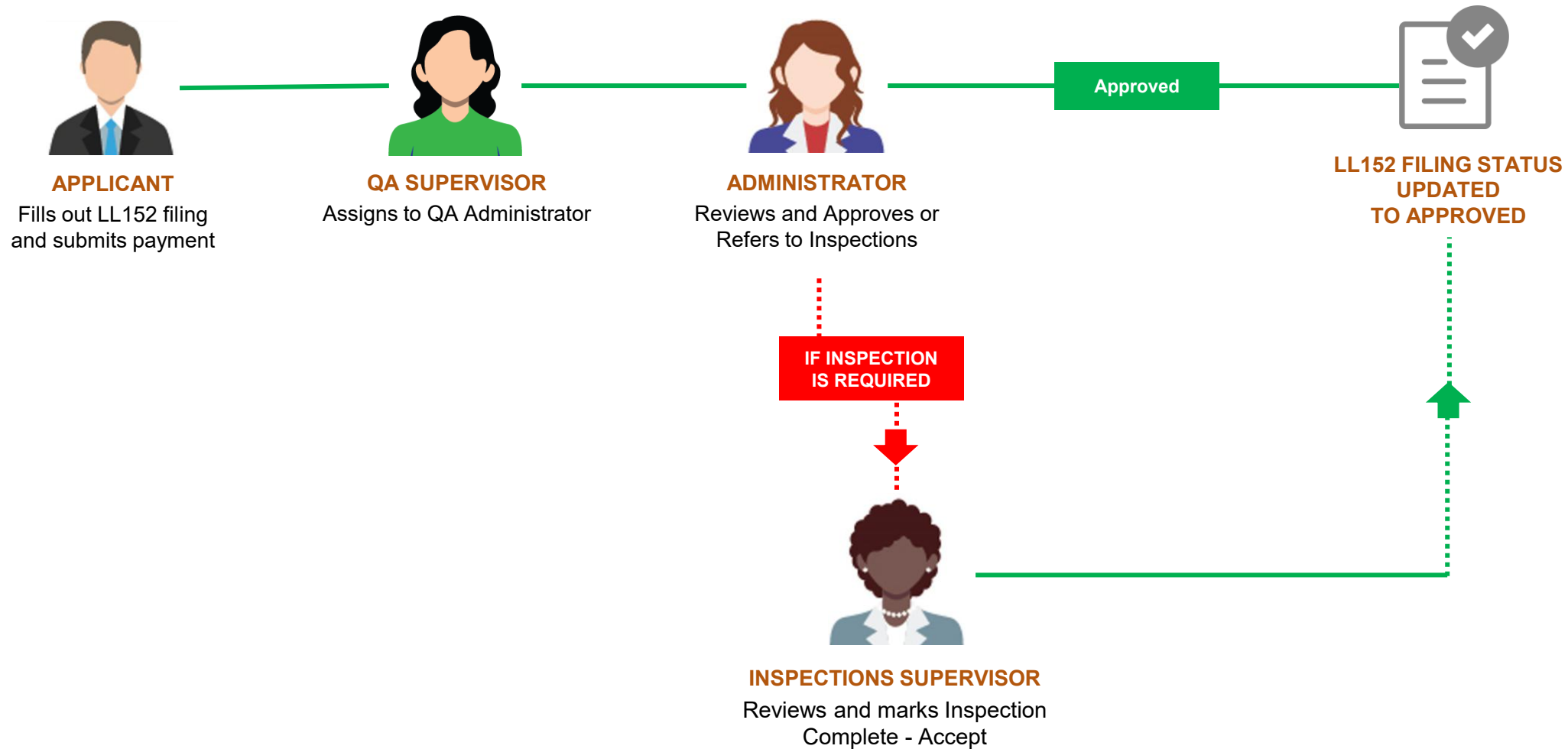
## DOB NOW: *Safety* – LL152 FILING FEES (PRIVATE OWNERS ONLY)



| CERTIFICATION FILING TYPE                                | FILING FEE |
|----------------------------------------------------------|------------|
| Initial Certification: Has Gas Service                   | \$35       |
| Initial Certification: Has Gas Piping but No Gas Service | \$480      |
| Initial Certification: No Gas Piping                     | \$375      |
| Inspection Notification                                  | No Fee     |
| Certification of Correction                              | \$35       |
| Certification of Correction Extension Request            | \$35       |
| Initial Certification Extension Request                  | \$35       |
| Property Verification                                    | No Fee     |
| Unsafe or Hazardous Conditions Notification              | No Fee     |

# LL152 PROCESS

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# DOB NOW: *Safety* – LL152 CHALLENGES AND WAIVERS



- If building owners do not comply with the LL152 filing requirements, DOB may issue a **Violation**.
- When DOB issues an **LL152 Violation**, the building owner may submit a **Challenge** to the civil penalty or request a **Waiver** of the violation.

- All Gas Piping Systems filings are visible on the **Public Portal** for the building under the **SAFETY: Compliance Filings** section.

## SAFETY: Compliance Filings

Compliance Type:

Certification of Initial Filing

Certification of Correction

Initial Certification Extension Request

Certification of Correction Extension Request

Unsafe or Hazardous Conditions Notification

| View ▾                                                                              | Certification Number ▾  | Gas Piping System ID ▾ | Cycle ▾ | Sub Cycle ▾ | Addr  |
|-------------------------------------------------------------------------------------|-------------------------|------------------------|---------|-------------|-------|
|  | GPSIC-BGPS0009893-2C... | BGPS0009893            | 2       | 2C          | 238 5 |

- A new **LL152 Gas Piping System Compliance** feature on the public portal allows users to know if and when their building is required to comply with Local Law 152 of 2016.



LL152 Gas Piping System Compliance

Use this tool to see if and when your building is required to comply with Local Law 152 of 2016.

House Number\*

Street Name\*

Borough\*

- Possible results of the search:
  - **BIN found:** This address is in Community District (XX) and is required to comply with Local Law 152 by (date).

House Number  
417

Street Name  
WEST 46 STREET

Borough  
Manhattan

Start Date  
01/01/2026

End Date  
06/29/2027

This address is in Community District 4 and is required to comply with Local Law 152 by **06/29/2027**.

Visit the [Periodic Gas Piping System Inspections](http://www.nyc.gov/buildings) web page at [www.nyc.gov/buildings](http://www.nyc.gov/buildings) for more information.

Notification

BIN not found. One- and two-family homes, and other buildings classified in Occupancy Group R-3, are not required to comply with Local Law 152.

OK

- **BIN not found:** BIN not found. One- and two-family homes, and other buildings classified in Occupancy Group R-3, are not required to comply with Local Law 152.

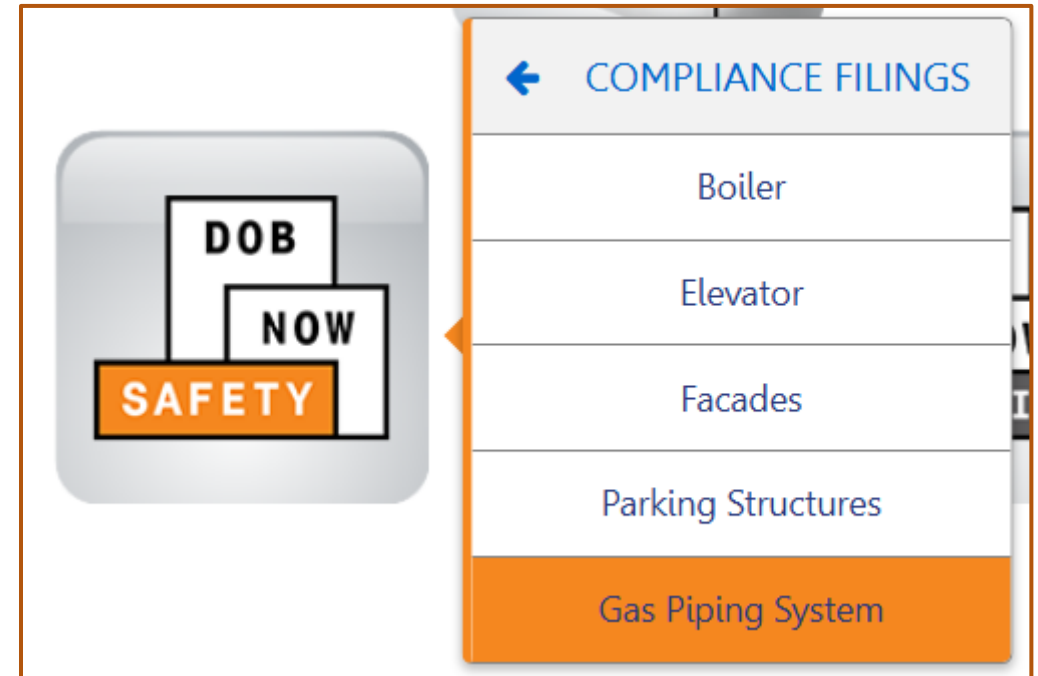
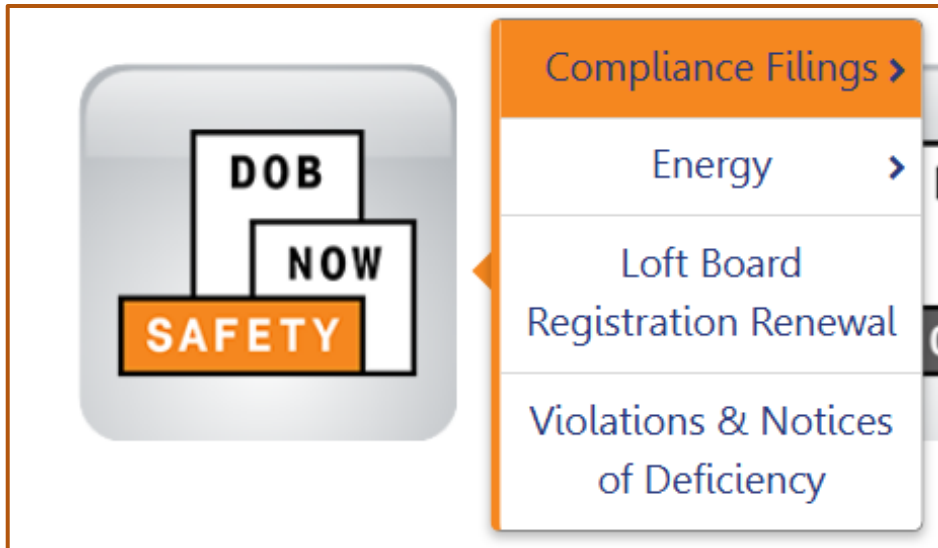


**LL152 INITIAL CERTIFICATION**

# DOB NOW: *Safety* – LL152 INITIAL CERTIFICATION



- From the DOB NOW landing page, hover over the **DOB NOW: *Safety*** icon and select **Compliance Filings**.
- Next, click on **Gas Piping System**.



# DOB NOW: *Safety* – LL152 INITIAL CERTIFICATION



- On the main Gas Piping System Certification dashboard, hover over the **Gas Piping System Certification** button and select **+Initial Certification**.

- In the General Information tab, you can search for your Gas Piping System by:
  - **BIN**
  - **Address**
  - **Gas Piping System ID**
- Click **Search & Add**.

General Information

Gas Piping System Search\*

Search for Gas Piping System by: \*

☒ Address ☐ BIN ☐ Gas Piping System ID

House Number\*  Street Name\*  Borough\*



A **Gas Piping System ID** will be generated each Cycle/Sub-Cycle when you click **Search & Add**. This is a number assigned to all buildings required to comply with LL152, regardless of whether the building has a gas piping system.

# DOB NOW: *Safety* – LL152 INITIAL CERTIFICATION

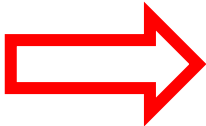


- On the **Gas Piping System Location Information** pop-up, click the radio button and then click **Add**.

Gas Piping System Location Information - Initial Certification

Selected: BGPS0010206

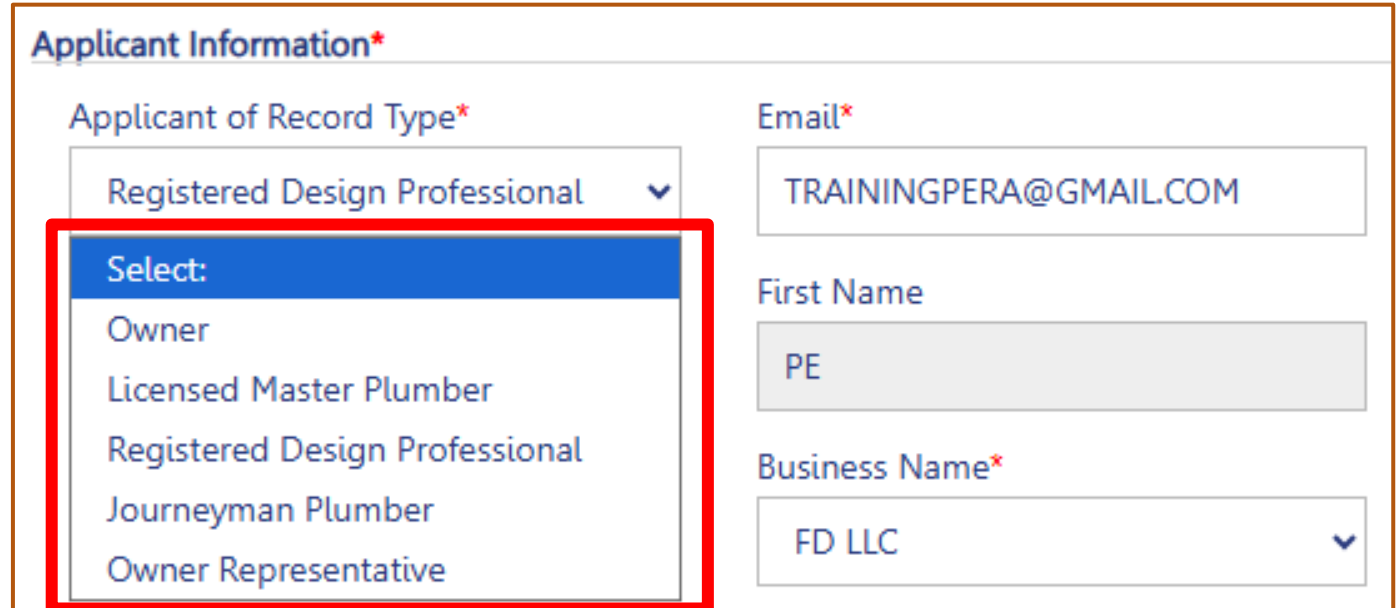
|                                  |                                            |                   |                       |                                          |   |
|----------------------------------|--------------------------------------------|-------------------|-----------------------|------------------------------------------|---|
| <input checked="" type="radio"/> | <b>Gas Piping System ID</b><br>BGPS0010206 | <b>Cycle</b><br>2 | <b>SubCycle</b><br>2C | <b>Address</b><br>283 5 AVENUE, Brooklyn | ▼ |
|----------------------------------|--------------------------------------------|-------------------|-----------------------|------------------------------------------|---|



- The **Certification Information** will be auto filled.

| Certification Information            |                                         |                     |
|--------------------------------------|-----------------------------------------|---------------------|
| House Number<br>283                  | Street Name<br>5 AVENUE                 | Borough<br>Brooklyn |
| Block<br>970                         | Lot<br>9                                | BIN<br>3020795      |
| Community District<br>6              | Zip Code<br>11215                       |                     |
| Report Type<br>Initial Certification | Gas Piping System ID<br>BGPS0010206     | Report Cycle<br>2   |
| Report Sub Cycle<br>2C               | Last Cycle Filing Date<br>Not Available |                     |

- Select the **Applicant of Record Type**:
  - Owner
  - Licensed Master Plumber
  - Registered Design Professional
  - Journeyman Plumber
  - Owner Representative
- Enter that person's **email address**.



**Applicant Information\***

Applicant of Record Type\*  
Registered Design Professional ▼

Select:  
Owner  
Licensed Master Plumber  
Registered Design Professional  
Journeyman Plumber  
Owner Representative

Email\*  
TRAININGPERA@GMAIL.COM

First Name  
PE

Business Name\*  
FD LLC ▼

- If the Applicant of Record Type is a **Journeyman Plumber**, information must also be entered for the **Licensed Master Plumber (LMP)** who is supervising the journeyman plumber.

**Licensed Master Plumber (LMP) Information\***

|                                                         |                                           |                      |
|---------------------------------------------------------|-------------------------------------------|----------------------|
| Email*                                                  | License Type*                             | License Number       |
| <input type="text" value="Please enter email address"/> | <input type="text" value="Select Type:"/> | <input type="text"/> |
| First Name                                              | Middle Initial                            | Last Name            |
| <input type="text"/>                                    | <input type="text"/>                      | <input type="text"/> |
| Business Name*                                          | Business Telephone*                       | Business Address     |
| <input type="text" value="Select Type:"/>               | <input type="text"/>                      | <input type="text"/> |
| City                                                    | State                                     | Zip Code             |
| <input type="text"/>                                    | <input type="text"/>                      | <input type="text"/> |

# DOB NOW: *Safety* – LL152 INITIAL CERTIFICATION

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- The **Owner** information will be auto filled if the Owner is also the Applicant of Record. Otherwise, enter the Owner's email.
- Specify the **Owner Type** and fill in any missing information.



If the Owner Type is anything other than Private, you must upload the **ACRIS Report** in the Documents tab as proof.

**Owner Information\***

|                                               |                                                                                                                                                                    |                          |
|-----------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|
| <b>Email*</b><br>TRAININGPERA@GMAIL.COM       | <b>Owner Type*</b><br>Select Type:<br>Select Type:<br>Private<br>City Owned Non-NYCHA<br>NYCHA<br>State<br>Federal<br>Diplomat<br>Non-Profit - Tax-Exempt<br>10007 | <b>First Name</b><br>PE  |
| <b>Middle Initial</b><br>                     |                                                                                                                                                                    | <b>Title</b><br>         |
| <b>Business Name/ Agency Name*</b><br>DOB LLC |                                                                                                                                                                    | <b>City*</b><br>NYC      |
| <b>State*</b><br>NY                           |                                                                                                                                                                    | <b>Mobile Phone*</b><br> |
| <b>Business Telephone*</b><br>2128748774      |                                                                                                                                                                    |                          |

# DOB NOW: *Safety* – LL152 INITIAL CERTIFICATION

DOB  
NOW

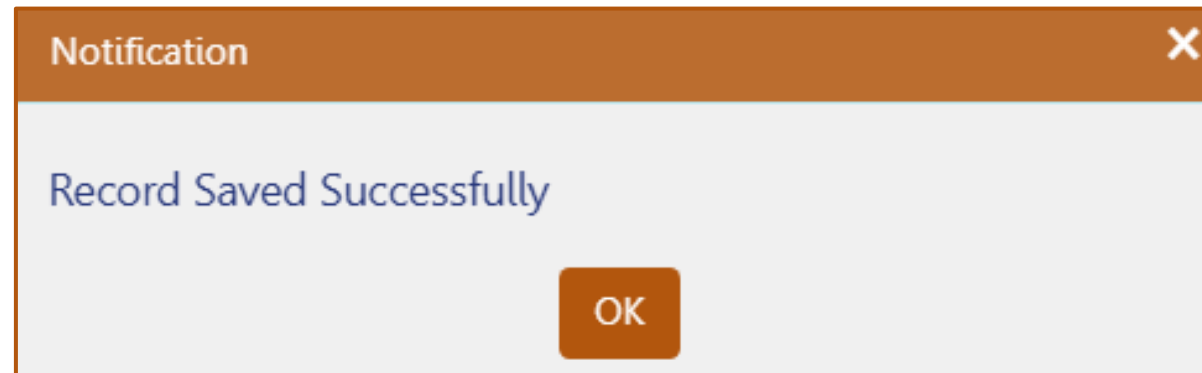
| Owner Representative                                    |                      |                       |
|---------------------------------------------------------|----------------------|-----------------------|
| Email                                                   | Registration Number  | First Name            |
| <input type="text" value="Please enter email address"/> | <input type="text"/> | <input type="text"/>  |
| Middle Initial                                          | Last Name            | Business Name         |
| <input type="text"/>                                    | <input type="text"/> | <input type="text"/>  |
| Business Telephone                                      | Business Address     | Relationship to Owner |
| <input type="text"/>                                    | <input type="text"/> | <input type="text"/>  |
| City                                                    | State                | Zip Code              |
| <input type="text"/>                                    | <input type="text"/> | <input type="text"/>  |

- Enter the **Owner Representative** information if appropriate.
- If the Applicant is the Owner Representative, this section will be auto filled.

- Click **Save** at the top of the page.



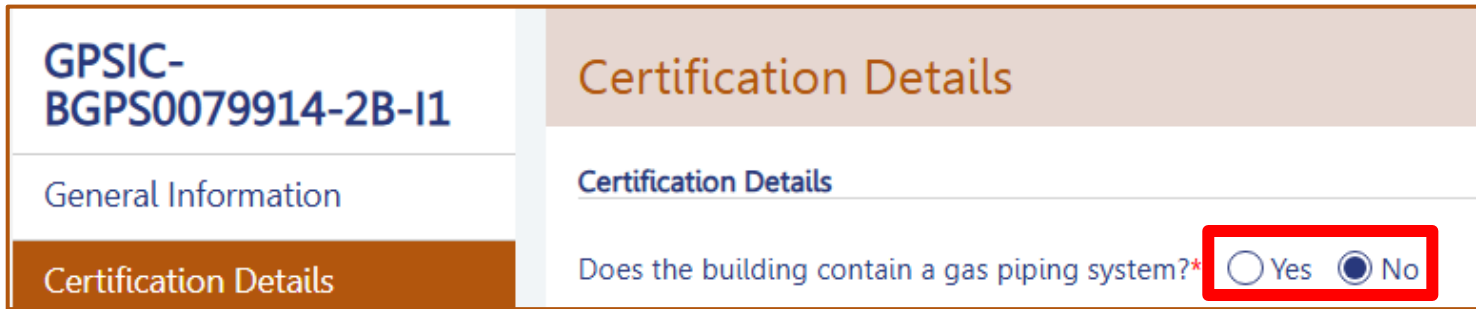
- Click **OK** on the **Notification** pop up.



# DOB NOW: *Safety* – LL152 INITIAL CERTIFICATION

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- On the Certification Details tab, answer if the building contains a gas piping system.



GPSIC-  
BGPS0079914-2B-I1

General Information

Certification Details

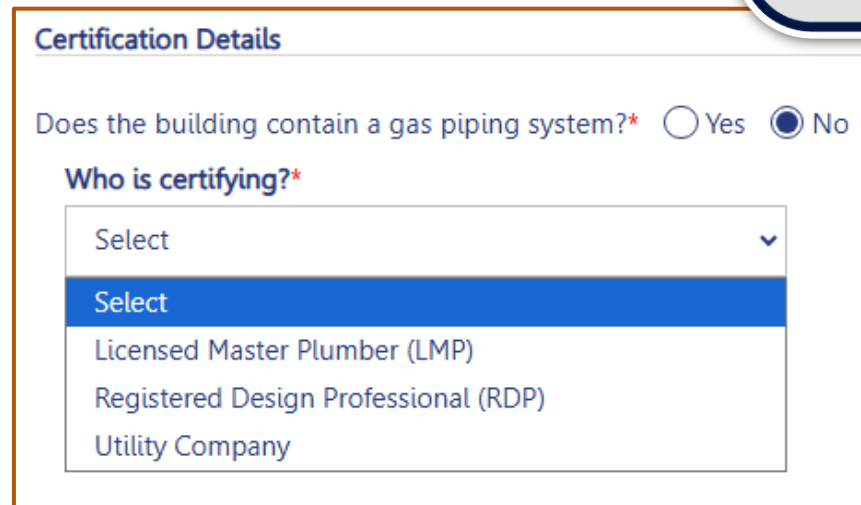
Certification Details

Does the building contain a gas piping system?\* ☐ Yes ☒ No



If the Utility Company is certifying, you can upload the **Utility Company Certification of No Gas Piping System** document as proof.

- If **No**, specify **who is certifying**:
  - Licensed Master Plumber
  - Registered Design Professional
  - Utility Company



Certification Details

Does the building contain a gas piping system?\* ☐ Yes ☒ No

Who is certifying?\*

Select

Select

Licensed Master Plumber (LMP)

Registered Design Professional (RDP)

Utility Company

# DOB NOW: *Safety* – LL152 INITIAL CERTIFICATION

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- If the building does contain a gas piping system, additional questions will appear.
- Answer all questions that appear and then click **Save**.

|                                                                    |                                                                                     |
|--------------------------------------------------------------------|-------------------------------------------------------------------------------------|
| Does the building contain a gas piping system?*                    | <input checked="" type="radio"/> Yes <input type="radio"/> No                       |
| Is the building currently supplied with gas (active gas service)?* | <input checked="" type="radio"/> Yes <input type="radio"/> No                       |
| Date of Inspection*                                                |                                                                                     |
| <input type="text"/>                                               |  |



If the building contains a gas piping system but no active gas service, you can upload the **Utility Company Statement of Gas Service** document as proof.

# DOB NOW: *Safety* – LL152 INITIAL CERTIFICATION



- If conditions were identified during the inspection, answer how much time you need to correct the conditions (120 days or 180 days from inspection date).
- Conditions/Defects can be entered by clicking **+Add Defects**.

A screenshot of a web form for "LL152 INITIAL CERTIFICATION". The form has a light gray header with the question "Were any conditions identified during the inspection and included in the Inspection Report provided to the building owner?\*" and two radio buttons, "Yes" (selected) and "No". Below this is a white section with the question "How much time do you need to correct the conditions?\*" and a dropdown menu labeled "Select:". The bottom section has a brown header labeled "Conditions/Defects\*" and a white area containing a brown button labeled "+ Add Defects". A large red arrow points from the right towards the "+ Add Defects" button.

# DOB NOW: *Safety* – LL152 INITIAL CERTIFICATION



## Defect Details

Categories

Location

Hazardous

*Enter Defect Observed:*

Category\* (Select applicable category)

Select Category

Sub-category\*

Select Sub-category

Condition\*

*Please describe condition*

500 characters remaining

Save

Cancel

- In the **Defect Details** pop up, enter the **Category** and **Sub-category** of the defect on the **Categories** tab.
- Describe the **Condition** in the text box.

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- On the **Location** tab, enter the location of the defect (Cellar, Basement, 1<sup>st</sup> Floor, Roof, and/or Other).
- If you choose **Other**, describe the other location.

Defect Details

Categories

Location

Hazardous

Location\*

(Select all that apply)

☐ Cellar

☐ Basement

☐ 1st Floor

☐ Roof

☒ Other

Describe Other\*

Describe other location

500 characters remaining

Save

Cancel

### Defect Details

Categories

Location

**Hazardous**

Appliance/Equipment

Reporting

Hazardous Condition \*

☒ Yes ☐ No

Save

Cancel

- Answer if the condition is hazardous on the **Hazardous** tab.
- If **Yes**, two additional tabs appear: **Appliance/Equipment** and **Reporting**.

### Defect Details

Categories

Location

Hazardous

**Appliance/Equipment**

Reporting

**Appliance/Equipment\*** (Select all that apply)

☐ Boiler

☐ Hot Water Heater

☐ Dryer

☐ Cooking

☐ Fireplace

☐ Furnace

☐ Unit Heater

☐ Generator

☐ Barbeque

☒ Other

Describe Other\*

Describe other appliance/equipment

500 characters remaining

Save

Cancel

- On the **Appliance/Equipment** tab select as many options as appropriate from the list (Boiler, Hot Water Heater, Dryer, Cooking, Fireplace, Furnace, Unit Heater, Generator, Barbeque, and/or Other). Enter details if **Other** is selected.

Defect Details

Categories

Location

Hazardous

Appliance/Equipment

Reporting

Valve

Reported to Utility \*

☒ Yes ☐ No

Utility Service Partial Shut Down / Locked \*

☒ Yes ☐ No

Save

Cancel

- On the **Reporting** tab, answer if the Defect was reported to the Utility.
- Also answer if the Utility Service was partially shut down or locked. A **Yes** answer to this question opens a new **Valve** tab.

- On the **Valve** tab, enter which Valve(s) were closed (Appliance, Riser, Meter, House, Service Valve, Branch, or Other). If Other is chosen, describe details in the text box.
- If you choose **Other**, describe the other location in the text box.
- Click **Save** when complete.

Defect Details

Categories Location Hazardous Appliance/Equipment Reporting **Valve**

Which Valve was closed?\* (Select all that apply)

☐ Appliance ☐ Riser ☐ Meter ☐ House

☐ Service Valve ☐ Branch ☒ Other

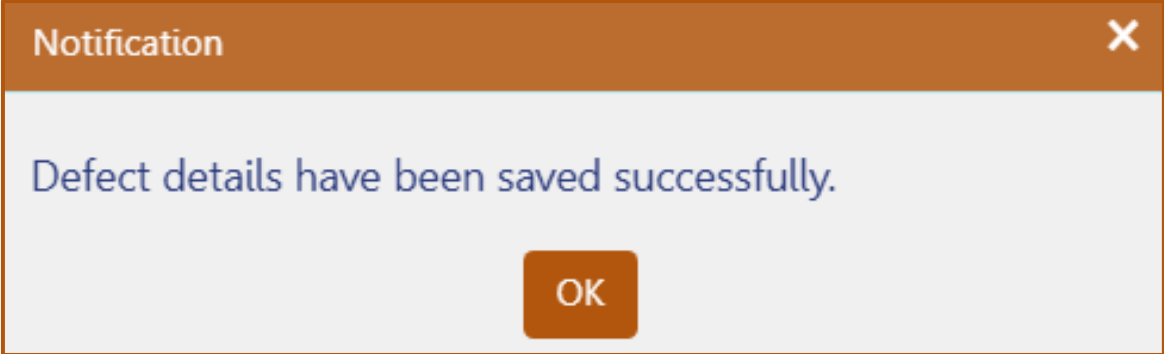
Describe Other\*

*Describe other valve*

500 characters remaining

 **Save** Cancel

- Click **OK** on the Notification pop up.



- The **Condition** details will appear on the grid. Repeat the process for any other Conditions identified.

[+ Add](#)

| Actions                                                                                                                                                               | Location   | Condition | Category               | Defect Sub Category:..  | Appliance / Ec |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------|-----------|------------------------|-------------------------|----------------|
|   | FirstFloor |           | Inappropriate use o... | Prohibited locations... | Cooking        |

- On the **Documents** tab, press the **Upload** button to add required or optional documents.

| Required Documents |                 |             |                                                                                                                                                                         |
|--------------------|-----------------|-------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Document Name      | Document Status | Uploaded On | Actions                                                                                                                                                                 |
| ACRIS Report       | Required        |             |   |

- Click **Choose File** to navigate to the document.
- Press **Upload** when done.

### Upload Document

Document Name\*

ACRIS Report

Document Type\*

ACRIS Report

Document

**Choose File** No file chosen

 Upload  Cancel

# DOB NOW: *Safety* – LL152 INITIAL CERTIFICATION

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## Attestation of Registered Design Professional (RDP)\*

I hereby swear or affirm that I personally inspected the gas piping system(s) of the premises listed herein, in accordance with all applicable Department laws, rules, and requirements, including Article 318 of Title 28 of the New York City Administrative Code and Section 103-10 of Title 1 of the Rules of the City of New York. I hereby swear or affirm that all statements and information contained herein are correct and complete to the best of my knowledge.

I understand that falsification of any statement is a misdemeanor and punishable by a fine, imprisonment, or both. I also understand that 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 a fine or both. I understand that if I am found after a hearing to have knowingly or negligently made a false statement, or to have knowingly or negligently falsified or allowed to be falsified any certificate, form, signed statement, application, report, or certification of the correction of a violation required under the provisions of Title 28 of the NYC Administrative Code or of a rule of any agency, I may be barred from filing further applications or documents with the Department.

☐

I have personally reviewed all information in this submission. I understand and agree that by personally clicking on the box at the left, I am electronically signing this submission and expressing my agreement with the Statement terms herein. I understand that this electronic signature shall have the same validity and effect as a signature affixed by hand.

Name

Date

- On the Statements & Signatures tab, if a Journeyman Plumber is the applicant of record, then the **Licensed Master Plumber (LMP)** must attest.
- If an LMP or **Registered Design Professional** is the **Applicant of Record**, then they must attest.

- If the Applicant is a **Journeyman Plumber**, both the Journeyman plumber and the LMP supervising must attest. The LMP's attestation is on the previous slide, while the Journeyman's attestation is here.

## Attestation of Journeyman Plumber\*

I hereby swear or affirm that I have personally inspected, under the direct and continuing supervision of the Licensed Master Plumber identified herein, the gas piping system(s) of the building listed herein in accordance with all applicable Department laws, rules, and requirements, including Article 318 of Title 28 of the New York City Administrative Code and Section 103-10 of Title 1 of the Rules of the City of New York, and including the requirement that the journeyman plumber must have successfully completed a training course acceptable to the Department. I hereby swear or affirm that all statements and information contained herein are correct and complete to the best of my knowledge.

I understand that falsification of any statement is a misdemeanor and punishable by a fine, imprisonment, or both. I also understand that 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 a fine or both. I understand that if I am found after a hearing to have knowingly or negligently made a false statement, or to have knowingly or negligently falsified or allowed to be falsified any certificate, form, signed statement, application, report, or certification of the correction of a violation required under the provisions of Title 28 of the NYC Administrative Code or of a rule of any agency, I may be barred from filing further applications or documents with the Department.



I have personally reviewed all information in this submission. I understand and agree that by personally clicking on the box at the left, I am electronically signing this submission and expressing my agreement with the Statement terms herein. I understand that this electronic signature shall have the same validity and effect as a signature affixed by hand.

Name

Date

- The **Building Owner** (and the **Building Owner's Representative** if applicable) must click the checkbox to attest on the **Statements & Signature** tab.

**Attestation of Building Owner\***

I hereby swear or affirm that the information on this form is correct and complete to the best of my knowledge. I understand that falsification of any statement is a misdemeanor and punishable by a fine, imprisonment, or both. I also understand that 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. I understand that if I am found after a hearing to have knowingly or negligently made a false statement or to have knowingly or negligently falsified or allowed to be falsified any certificate, form, signed statement, application, report, or certification of the correction of a violation required under the provisions of Title 28 of the NYC Administrative Code or of a rule of any agency, I may be barred from filing further applications or documents with the Department.

☐ I hereby swear or affirm that I have personally reviewed all information in this submission. I understand and agree that by personally clicking on the box at the left, I am electronically signing this submission and expressing my agreement with the Statement terms herein. I understand that this electronic signature shall have the same validity and effect as a signature affixed by hand.

|                      |                      |
|----------------------|----------------------|
| Name                 | Date                 |
| <input type="text"/> | <input type="text"/> |

# DOB NOW: *Safety* – LL152 INITIAL CERTIFICATION

- If there is a fee, click **Pay to File**.



- Click **Yes** on the **Payment Confirmation** popup to be brought to NYC CityPay.

**Payment Confirmation**

Are you sure you want to make a payment now for **\$480.00**?

Payment is not the last step. After the payment is processed, click the Preview to file/Submit button at the top of the screen to submit the application.

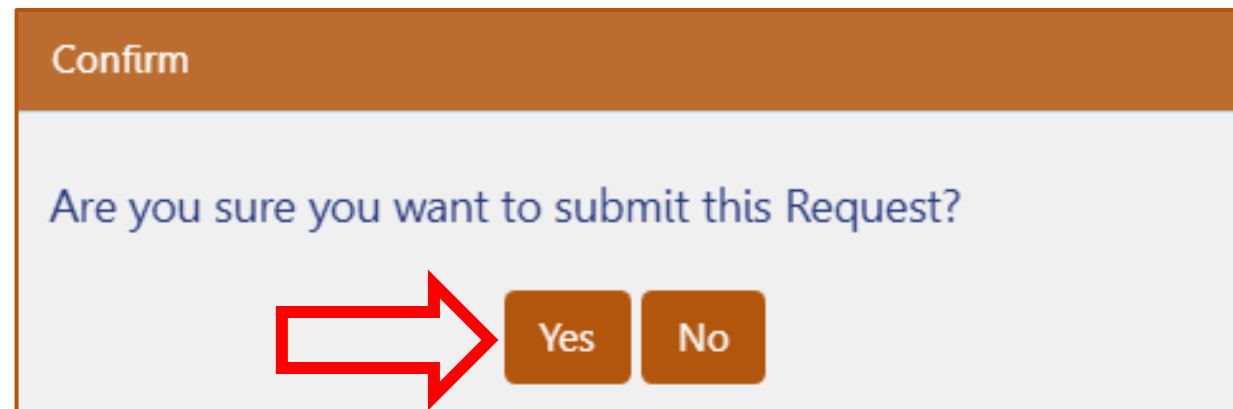
Please confirm that your pop-up blocker is turned off before proceeding to Payment.



- If there is no fee, the button will be labeled **Submit**.



- Click **Yes** on the **Confirm** pop up.





**LL152 CERTIFICATION OF CORRECTION**

- If the Initial Certification identified conditions that needed to be corrected, the Owner is responsible for notifying DOB that the corrections have been completed by filing a **Certification of Correction**.
- From the Gas Piping System Certification Dashboard, hover over the **Gas Piping System Certification** button and select **+Certification of Correction**.



# DOB NOW: *Safety* – LL152 CERTIFICATION OF CORRECTION



- Applicants can search for the Gas Piping System by Address, BIN, Gas Piping System ID, or Initial Certification Number. Click **Search & Add**.

### Gas Piping System Search\*

Search for Gas Piping System by: \*

☒ Address☐ BIN☐ Gas Piping System ID☐ Initial Certification Number

House Number\*

Street Name\*

Borough\*

Search & Add

# DOB NOW: *Safety* – LL152 CERTIFICATION OF CORRECTION

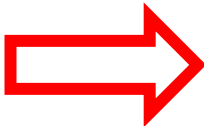


- On the **Gas Piping System Location Information** pop-up, click the radio button and then click **Add**.

Gas Piping System Location Information - Certification of Correction

Selected: BGPS0009893

|                                  |                                            |                   |                       |                                          |   |
|----------------------------------|--------------------------------------------|-------------------|-----------------------|------------------------------------------|---|
| <input checked="" type="radio"/> | <b>Gas Piping System ID</b><br>BGPS0009893 | <b>Cycle</b><br>2 | <b>SubCycle</b><br>2C | <b>Address</b><br>238 5 AVENUE, Brooklyn | ▼ |
|----------------------------------|--------------------------------------------|-------------------|-----------------------|------------------------------------------|---|



## DOB NOW: *Safety* – LL152 CERTIFICATION OF CORRECTION



- The information for all stakeholders will be auto filled from the initial certification, but that information can be changed if appropriate. Click **Save**.
- On the **Certification Details** tab all defects identified in the initial certification will be listed. Answer if all conditions identified have been corrected. (Note that if this question is answered “No,” the user will not be able to proceed.)

All conditions identified have been corrected?\*

☐ Yes ☐ No

- If documents are required, upload them on the **Documents** tab.
- Complete all Attestations on the **Statements & Signatures** tab.
- Pay the fee (if appropriate) and Submit the filing.

# DOB NOW: *Safety* – LL152 CERTIFICATION OF CORRECTION

DOB  
NOW

Initial Certification

Certification of Correction

Initial Certification Extension Request

Certification of Correction Extension Request

Property Verification

Inspection Notification

Unsafe or Hazardous Conditions Notification

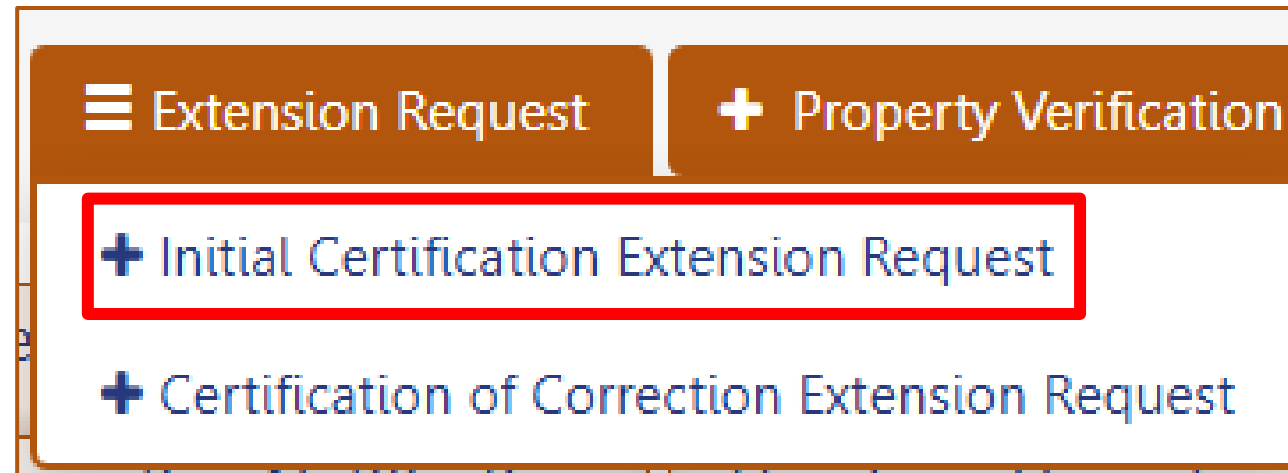
| View... | Filing Action  | Certification Number     | Gas Piping System ID ... | Address      | Borough  | Gas Piping System Status | Certificati |
|---------|----------------|--------------------------|--------------------------|--------------|----------|--------------------------|-------------|
|         | Select Action: | GPSCOC-BGPS0009893-2C-C3 | BGPS0009893              | 238 5 AVENUE | BROOKLYN | Conditions Exist         | Pre-filing  |

- These requests will appear on the **Certification of Correction** tab of the dashboard.



## LL152 EXTENSION REQUESTS

- Owners may request extensions for filing initial certifications at any point prior to their sub cycle end date.
- Extensions grant an **extra 180 days past the end of the sub-cycle** to file the initial certification.
- Hover over the **Extension Request** button and select **+Initial Certification Extension Request**.



# DOB NOW: *Safety* – LL152 EXTENSION REQUESTS



## General Information

### Gas Piping System Search\*

Search for Gas Piping System by: \*

☒ Address ☐ BIN ☐ Gas Piping System ID

House Number\*

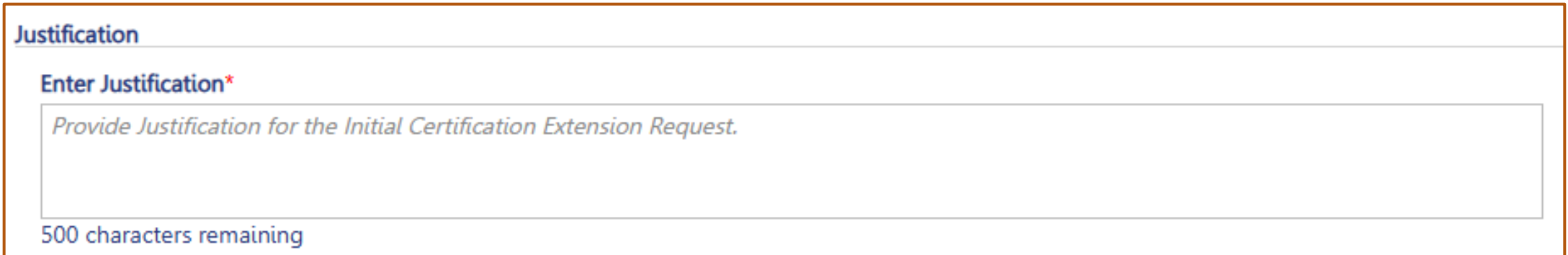
Street Name\*

Borough\*

Select Borough ▼

- Search for your building by **Address**, **BIN**, or **Gas Piping System ID**.
- Click **Search & Add**.
- Confirm the location on the pop-up window.

- Enter **Applicant**, **Owner** and **Owner Representative** information as described in the Initial Certification section.
- Enter the **Justification** for the request in the text box at the bottom of the General Information tab.

A screenshot of a web form section titled 'Justification'. It features a label 'Enter Justification\*' in blue text. Below the label is a large, empty text input area. At the bottom left of the input area, there is a placeholder text 'Provide Justification for the Initial Certification Extension Request.' in a light blue, italicized font. At the bottom left of the entire section, below the input area, it says '500 characters remaining' in blue text.

- Save the request.
- Pay the **fee** if the Owner Type is **Private**.
- Complete the **Documents** and the **Statements & Signatures** tabs before Submission.

# DOB NOW: *Safety* – LL152 EXTENSION REQUESTS

DOB  
NOW

Initial Certification

Certification of Correction

Initial Certification Extension Request

Certification of Correction Extension Request

Property Verification

Inspection Notification

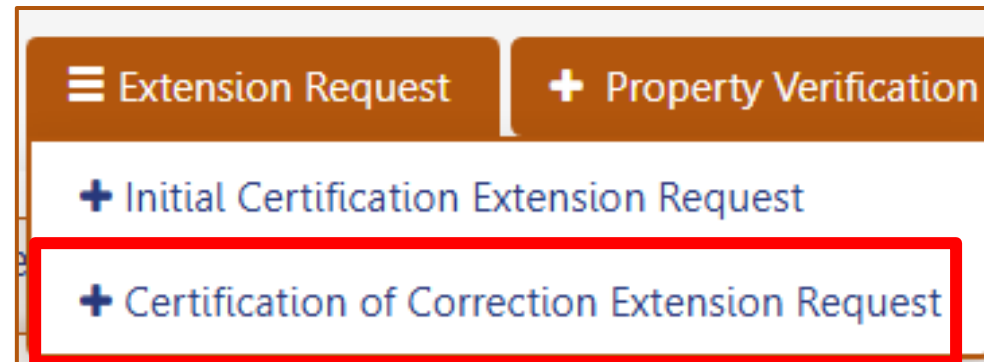
Unsafe or Hazardous Conditions Notification

Refresh

| View... | Filing Action  | Request Number            | Gas Piping System ID ... | Address          | Borough  | Request Status | Payment Status | Applicant  | Owner       |
|---------|----------------|---------------------------|--------------------------|------------------|----------|----------------|----------------|------------|-------------|
|         | Select Action: | GPSEXT-BGPS0009847-2C-002 | BGPS0009847              | 768 UNION STREET | BROOKLYN | Pre-filing     | No Fee         | PE TRAINER | HMO License |

- These requests will appear on the **Initial Certification Extension Request** tab of the dashboard.

- As part of reporting conditions on the Initial Certification, the applicant is asked how long will be needed to correct the condition. The options are 120 days or 180 days from the date of inspection.
- If the applicant indicates 120 days to correct the condition, users may request an extension up to the 180-day deadline.
- Hover over the **Extension Request** button and select **+Certification of Correction Extension Request**.



# DOB NOW: *Safety* – LL152 EXTENSION REQUESTS



**Justification\***

**Enter Justification\***

*Provide Justification for the Initial Certification Extension Request.*

500 characters remaining

- Search for the property as shown above.
- Stakeholder information will be auto filled from the initial certification.
- Enter **Justification** in the text box.
- Upload any required **documents** and complete the **Statements & Signatures** tab before submission.
- Applicants must also pay the fee if the owner type is Private.

# DOB NOW: *Safety* – LL152 EXTENSION REQUESTS

DOB  
NOW

Initial Certification

Certification of Correction

Initial Certification Extension Request

Certification of Correction Extension Request

Property Verification

Inspection Notification

Unsafe or Hazardous Conditions Notification

| View... | Filing Action  | Request Number             | Gas Piping System ID ... | Address      | Borough  | Request Status | Payment Status |
|---------|----------------|----------------------------|--------------------------|--------------|----------|----------------|----------------|
|         | Select Action: | GPSCEXT-BGPS0009893-2C-002 | BGPS0009893              | 238 5 AVENUE | BROOKLYN | Pre-filing     | No Fee         |

- These requests will appear on the **Certification of Correction Extension Request** tab of the dashboard.



## LL152 PROPERTY VERIFICATION

## Gas Piping System Certification Dashboard



Gas Piping System Certification

Extension Request

+ Property Verification

+ Inspection Notification

+ Unsafe or Hazardous Conditions Notification



- Building owners, owner's representatives, LMPs or RDPs can ask DOB to determine:
  - Whether a building comes under the purview of LL152 compliance
  - Whether the building is a new building that is not required to comply with LL152 until the building's 10-year anniversary
- Click on **+Property Verification** on the main dashboard.

# DOB NOW: *Safety* – LL152 PROPERTY VERIFICATION

- Search for the property by Address, BIN, or Gas Piping System ID as described above.
- Enter **Applicant of Record**, **Owner** and **Owner's Representative (if appropriate)** information.
- In the **Reason for Request** section, specify the **Property Type(s)** and enter the **Justification** for exemption in the text box.

Reason for Request

Property Type \* (Select all that apply)

Property is claimed to be eligible for occupancy exemption:\*

☐ 1 or 2 family

☐ Rectory

☐ Utility plant

☐ State owned (Does not include City Owned, such as NYCHA, DOE, Parks Dept.)

☐ Building is a new building with a gas piping system and is not required to comply with Local Law 152 until the tenth year after the Certificate of Occupancy was issued

☐ Other

☐ Convent

☐ Vacant land

☐ Federally owned (Does not include City Owned, such as NYCHA, DOE, Parks Dept.)

Justification \*

Enter Justification\*

Provide Justification.

500 characters remaining

# DOB NOW: *Safety* – LL152 PROPERTY VERIFICATION



- If Owner Type is any value other than Private, ACRIS Report is required. Additional documents may be uploaded if desired.
- The Building Owner and Building Owner's Representative (if appropriate) must **attest** before submitting. There is no fee for this transaction.
- These requests appear on the **Property Verification** tab of the dashboard.

Initial Certification

Certification of Correction

Initial Certification Extension Request

Certification of Correction Extension Request

Property Verification

Inspection Notification

Unsafe or Hazardous Conditions Notification

Refresh

| View... | Filing Action        | Request Number       | Gas Piping System ID ... | Address              | Borough              | Request Status       | Applicant            |
|---------|----------------------|----------------------|--------------------------|----------------------|----------------------|----------------------|----------------------|
|         | <input type="text"/> | <input type="text"/> | <input type="text"/>     | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
|         | Select Action:       | VER00000089          | BGPS0009847              | 768 UNION STREET     | BROOKLYN             | Pre-filing           | PE TRAINER           |



## LL152 INSPECTION NOTIFICATION

# DOB NOW: *Safety* – LL152 INSPECTION NOTIFICATION



- An inspection entity qualified to conduct the gas piping inspection is required to submit an **Inspection Notification** to DOB at least 2 calendar days prior to performing the initial gas piping system inspection, informing DOB of their intent to conduct the inspection.
- To submit the notification, click the **+Inspection Notification** button.



# DOB NOW: *Safety* – LL152 INSPECTION NOTIFICATION



- Search for the property by Gas Piping System ID, BIN, or Address as described above.
- On the **Gas Piping Location Search Results**, enter the **Inspection Date**, **Inspection Start Time** and **Inspection End Time** and then click **Add**.

### Gas Piping Location Search Results



Location Details >

Gas Piping ID :

Street :

Borough :

BGPS0009893

238 5 AVENUE

BROOKLYN

Inspection Date\*



Inspection Start Time\*



Inspection End Time\*



 Add

 Cancel

- Enter all details for the **Applicant of Record** and the **Owner**.
- The Applicant of Record for the Inspection Notification can be:
  - Licensed Master Plumber
  - Journeyman Plumber
  - Registered Design Professional
- Click **Save** when finished.
- No documents are required for the notification, but additional documents can be uploaded if desired.

# DOB NOW: *Safety* – LL152 INSPECTION NOTIFICATION

DOB  
NOW

- The Applicant of Record needs to **attest** on the Statements & Signatures tab.
- There is no fee to submit the Inspection Notification.

## Attestation of Licensed Master Plumber (LMP)



I hereby swear or affirm that either I, or else the individual identified herein as the qualified non-licensed individual under my direct and continuing supervision, personally inspected the gas piping system(s) of the premises listed herein, in accordance with all applicable Department laws, rules, and requirements, including Article 318 of Title 28 of the New York City Administrative Code and Section 103-10 of Title 1 of the Rules of the City of New York and including, if the inspection was done by a non-licensed individual, in accordance with the requirements that a qualified non-licensed individual must have at least five years of experience working under a licensed master plumber and have successfully completed a training course acceptable to the Department. I hereby swear or affirm that all statements and information contained herein are correct and complete to the best of my knowledge.

I understand that falsification of any statement is a misdemeanor and punishable by a fine, imprisonment, or both. I also understand that 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 a fine or both. I understand that if I am found after a hearing to have knowingly or negligently made a false statement, or to have knowingly or negligently falsified or allowed to be falsified any certificate, form, signed statement, application, report, or certification of the correction of a violation required under the provisions of Title 28 of the NYC Administrative Code or of a rule of any agency, I may be barred from filing further applications or documents with the Department.

☐ I have personally reviewed all information in this submission. I understand and agree that by personally clicking on the box at the left, I am electronically signing this submission and expressing my agreement with the Statement terms herein. I understand that this electronic signature shall have the same validity and effect as a signature affixed by hand.

Name

Date



## **LL152 UNSAFE OR HAZARDOUS CONDITIONS NOTIFICATION**

# DOB NOW: *Safety* – LL152 UNSAFE OR HAZARDOUS NOTIFICATION



- Licensed Master Plumbers or Registered Design Professionals can notify DOB of any **unsafe conditions** they found regarding a building where they performed inspection.
- This can be submitted at any time, regardless of cycle or sub-cycle.
- There is no fee for this notification.
- Press the **+Unsafe or Hazardous Conditions Notification** button.



# DOB NOW: *Safety* – LL152 UNSAFE OR HAZARDOUS NOTIFICATION



- Search for the property as described above.
- Enter the **Applicant** and **Owner** information.
- Click **Save**.
- On the **Notification Details** tab, enter the details of the unsafe conditions in the text box.

### Notification Details

#### Unsafe Conditions\*

I discovered unsafe conditions that are detailed as follows:\*

Provide Unsafe or hazardous conditions.

5000 characters remaining

# DOB NOW: *Safety* – LL152 UNSAFE OR HAZARDOUS NOTIFICATION

DOB  
NOW

- Based on who the Applicant of Record is, the LMP or RDP must attest on the **Statements & Signature** tab before submitting the notification.

Attestation of Registered Design Professional (RDP)

I hereby swear or affirm that either I, or else the individual identified herein as the qualified non-licensed individual under my direct and continuing supervision, personally inspected the gas piping system(s) of the premises listed herein, in accordance with all applicable Department laws, rules, and requirements, including Article 318 of Title 28 of the New York City Administrative Code and Section 103-10 of Title 1 of the Rules of the City of New York and including, if the inspection was done by a non-licensed individual, in accordance with the requirements that a qualified non-licensed individual must have at least five years of experience working under a licensed master plumber and have successfully completed a training course acceptable to the Department. I hereby swear or affirm that all statements and information contained herein are correct and complete to the best of my knowledge.

I understand that falsification of any statement is a misdemeanor and punishable by a fine, imprisonment, or both. I also understand that 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 a fine or both. I understand that if I am found after a hearing to have knowingly or negligently made a false statement, or to have knowingly or negligently falsified or allowed to be falsified any certificate, form, signed statement, application, report, or certification of the correction of a violation required under the provisions of Title 28 of the NYC Administrative Code or of a rule of any agency, I may be barred from filing further applications or documents with the Department.

☐ I have personally reviewed all information in this submission. I understand and agree that by personally clicking on the box at the left, I am electronically signing this submission and expressing my agreement with the Statement terms herein. I understand that this electronic signature shall have the same validity and effect as a signature affixed by hand.

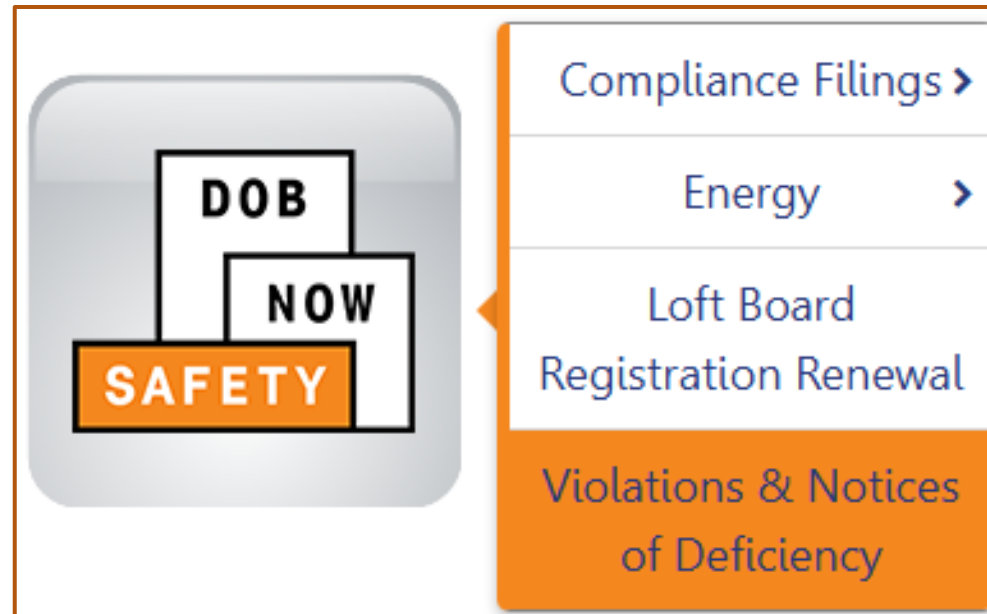
Name

Date



## **LL152 WAIVERS AND CHALLENGES**

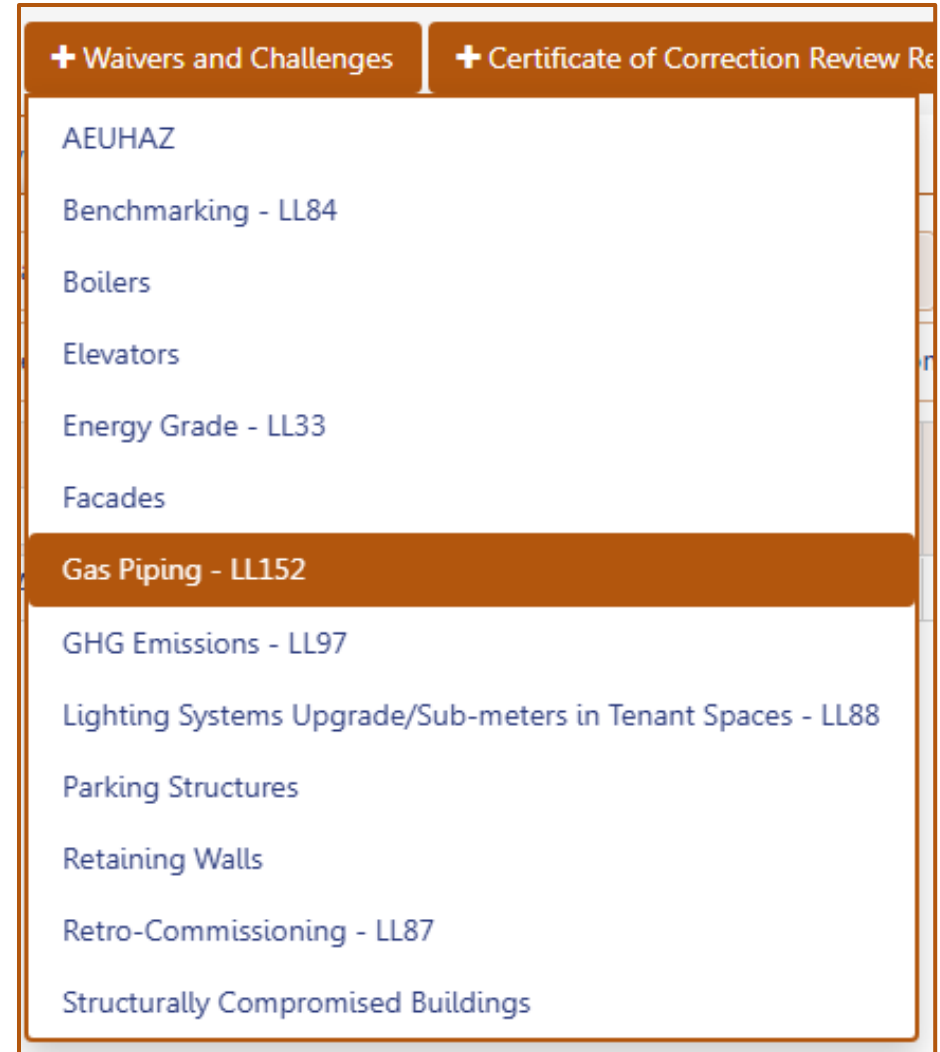
- To submit a Civil Penalty Waiver or Violation Challenge, log into DOB NOW and hover over the **DOB NOW: *Safety*** icon and choose **Violations and Notices of Deficiency**.

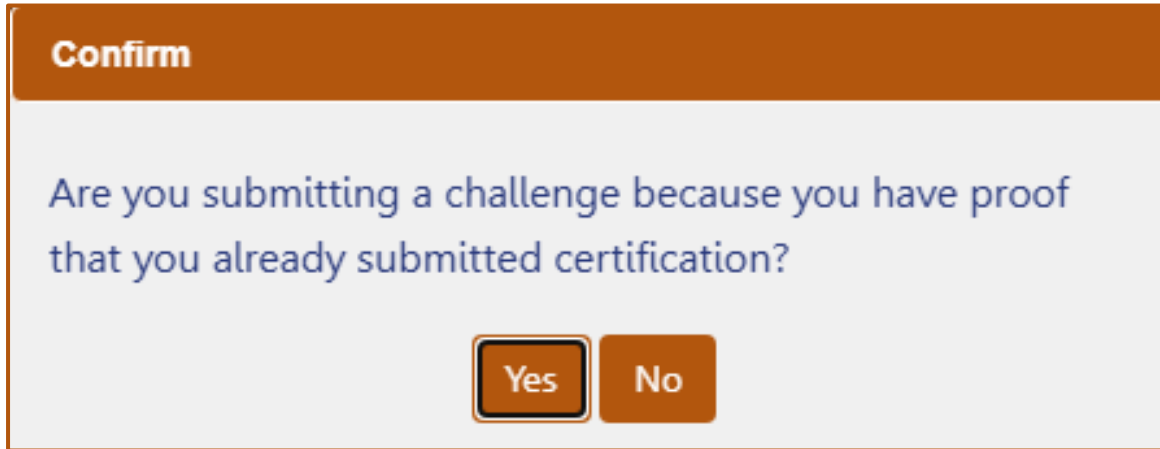


# DOB NOW: *Safety* – LL152 WAIVERS AND CHALLENGES

DOB  
NOW

- Hover over the **Waivers and Challenges** button and select **Gas Piping – LL152**.



A screenshot of a web-based confirmation dialog box. It has a brown header bar with the word "Confirm" in white. The main area has a light gray background and contains the question "Are you submitting a challenge because you have proof that you already submitted certification?" in blue text. At the bottom, there are two buttons: "Yes" and "No", both with brown backgrounds and white text. The "Yes" button is slightly larger and has a thin black border.

**Confirm**

Are you submitting a challenge because you have proof that you already submitted certification?

**Yes** **No**

- A pop-up window will ask “Are you submitting a challenge because you have proof that you already submitted certification?”
  - If you answer **Yes**, you will be taken to the **Challenge** form.
  - If you answer **No**, you will be taken to the **Waiver** form.

- For both Challenges and Waivers, start by searching for the Violation by:
  - **Violation Number**
  - **Address**
  - **BIN**
  - **BBL (Challenges only)**

Violation Search \*

Search by\*

☒ Violation Number

☐ Address

☐ BIN

☐ BBL

Violation Number\*

Enter Violation Num...

i

Q Search

Search Results for Gas Piping Violations

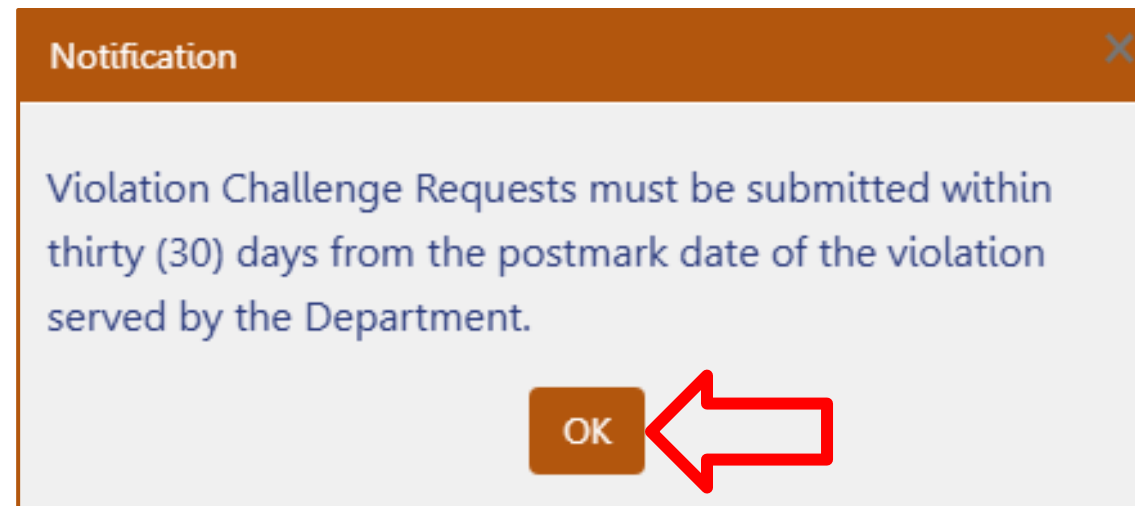
Associated Violation(s)

| Select                | Violation Number              | Violation Status | Violation Type | ISN           | Issuance Date |
|-----------------------|-------------------------------|------------------|----------------|---------------|---------------|
| <input type="radio"/> | VIO-FTF-PL-PER-202512-4181440 | Active           | FTF-PL-PER     | 2025124181440 | 04/24/2026    |

  + Add ✕ Cancel

- For Challenges, on the Search Results, select the relevant Violation by clicking the radio button and then click **+Add**.

- You will see a Notification that “Violation Challenge Requests must be submitted within thirty (30) days from the postmark date of the violation served by the Department.”
- Click **OK**.



# DOB NOW: *Safety* – LL152 CIVIL PENALTY CHALLENGES



**Violation Challenge Information**

|                                                          |                                     |                                                                                        |
|----------------------------------------------------------|-------------------------------------|----------------------------------------------------------------------------------------|
| <b>Violation Number</b><br>VIO-FTF-PL-PER-202512-4181440 | <b>Issuance Date</b><br>04/24/2026  | <b>ISN</b><br>2025124181440                                                            |
| <b>Violation Sequence</b><br>4181440                     | <b>Violation Type</b><br>FTF-PL-PER | <b>Violation Remarks</b><br>Cycle 2, Sub-cycle A (premises is in Community District 3) |

**Challenge Reason\***

☐ Certification Submitted (provide proof of submitted certification such as a completed and stamped GPS2)

**Comments**

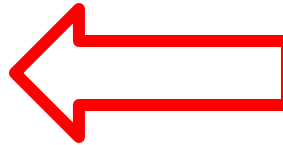
- Only one **Challenge Reason** is available: “Certification Submitted.” Click the radio button and enter **Comments** if appropriate.

# DOB NOW: *Safety* – LL152 CIVIL PENALTY CHALLENGES

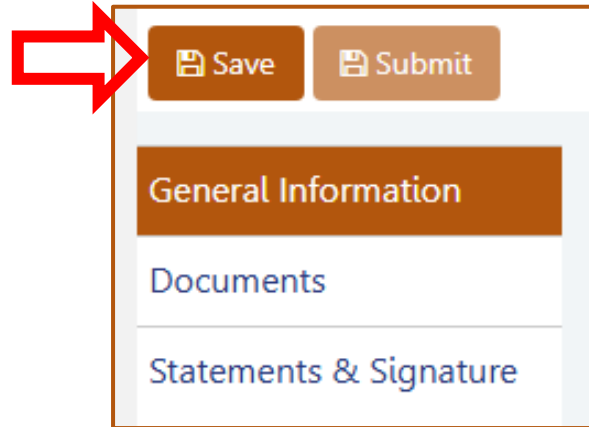


- Specify if you, as the Respondent, are the **Owner** or the **Owner's Representative**.
- A **Secondary Contact** may be added as well.

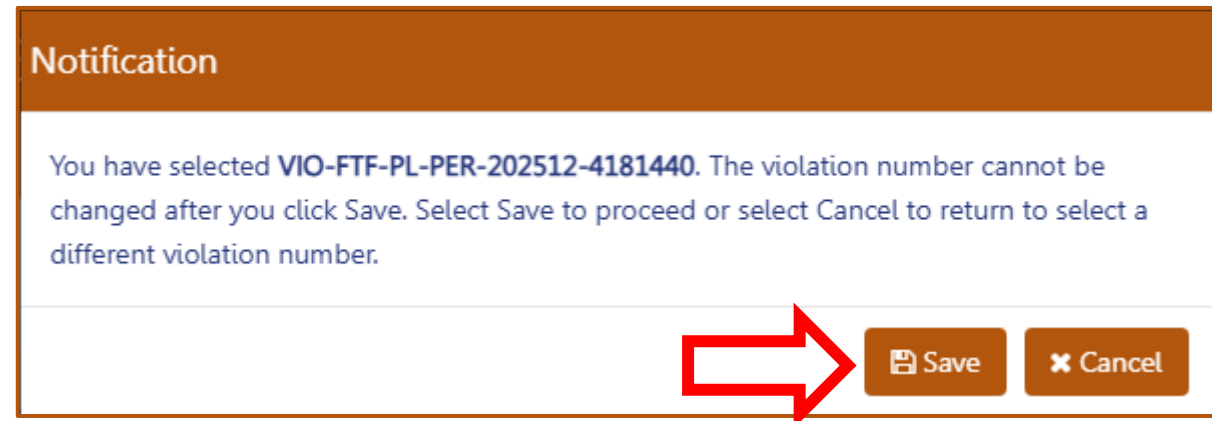
| Respondent                                                                                                    |                    |                  |
|---------------------------------------------------------------------------------------------------------------|--------------------|------------------|
| Email                                                                                                         | Last Name          | First Name       |
| TRAININGPERA@GMAIL.COM                                                                                        | TRAINER            | PE               |
| Business Address                                                                                              | City               | State            |
| 280 BROADWAY                                                                                                  | NYC                | NY               |
| Zip Code                                                                                                      | Business Telephone | Mobile Telephone |
| 10007                                                                                                         | 2128748774         |                  |
| Respondent Type*                                                                                              |                    |                  |
| <div><div>Select: ▼</div><div><div>Select:</div><div>Owner</div><div>Owner's Representative</div></div></div> |                    |                  |
|                                                                                                               |                    | Name             |



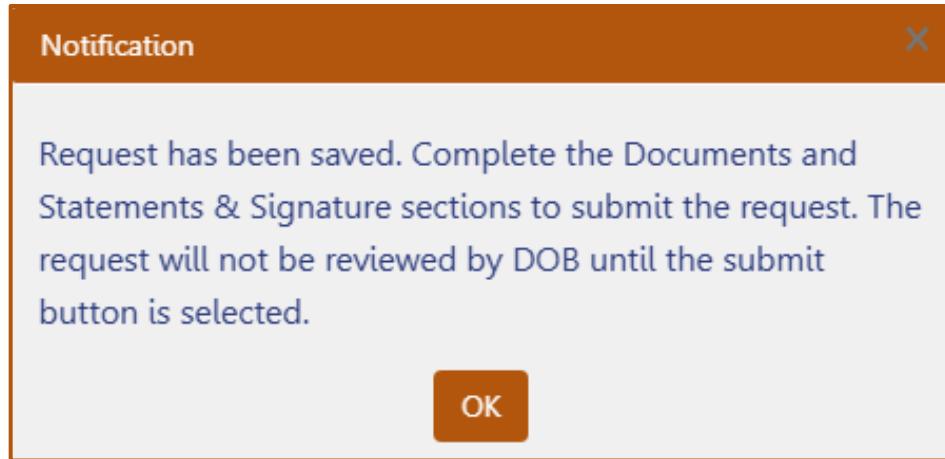
- Click **Save** at the top of the page.



- Press **Save** on the **Notification** pop-up.



# DOB NOW: *Safety* – LL152 CIVIL PENALTY CHALLENGES



- Click **OK** on the next Notification pop up.
- On the **Documents** tab, upload **Proof of Submitted Certification**. The document upload process is the same as described above.

| Required Documents >                                                                                                                                                    |                                  |                                  |                 |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------|----------------------------------|-----------------|
| Actions                                                                                                                                                                 | Document Name                    | Document Type                    | Document Status |
|   | Proof of Submitted Certification | Proof of Submitted Certification | Required        |

# DOB NOW: *Safety* – LL152 CIVIL PENALTY CHALLENGES

DOB  
NOW

**Respondent's Statement\***

I understand that falsification of any statement or record submitted to the Department is a misdemeanor and is punishable by a fine or imprisonment, or both. I understand that 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. I further understand that such actions are punishable by imprisonment, fine and/or suspension or revocation of license, registration, and/or qualification.

I have reviewed the information provided in this application and hereby attest that, to the best of my knowledge and belief, all such information is true and accurate. I further attest that all attachments submitted with this application are copies of the original documents.

☐ I understand and agree that by personally clicking on the box at left I am electronically signing this document and expressing my agreement with the certification statements above. I understand that this electronic signature shall have the same validity and effect as a signature affixed by hand.

Name

Date

- Only the Respondent is required to **Attest** on the Statements & Signature tab.
- Click **Submit** to submit the Challenge.

# DOB NOW: *Safety* – LL152 VIOLATION WAIVERS



- For Waivers, search for the Violation as described above.
- In the **Search Results** pop-up, you will need to first select the radio button and then click the appropriate checkbox(es) to specify which Violations will be part of your Waiver request. Click **+Add**.

### Search Results for Gas Piping Violations

|                                  |                               |                                       |                |                            |           |                |                     |                      |                                 |
|----------------------------------|-------------------------------|---------------------------------------|----------------|----------------------------|-----------|----------------|---------------------|----------------------|---------------------------------|
| <input checked="" type="radio"/> | Gas Piping System ID<br>N/A   | Compliance Type<br>Gas Piping - LL152 | BIN<br>5151915 | Violation Status<br>Active | ^         |                |                     |                      |                                 |
| Associated Violation(s)          |                               |                                       |                |                            |           |                |                     |                      |                                 |
| Select                           | Violation Number              | Issuance Date                         | ISN            | Compliance Report Filed    | Sub-Cycle | Violation Type | Violation Category  | Civil Penalty Status | Violation Remarks               |
| <input type="checkbox"/>         | VIO-FTF-PL-PER-202512-4181440 | 04/24/2026                            | 2025124181440  | Pending                    | B         | FTF-PL-PER     | Failure to File PER | Waiver Denied        | Cycle 2, Sub-cycle A (premis... |

0 violations selected for waiver.

 + Add ✕ Cancel

# DOB NOW: *Safety* – LL152 VIOLATION WAIVERS



| Waiver Request Reason                                                                                                           | Document Required                                                                     |
|---------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------|
| Building classified as 1- or 2-family home or other building in occupancy group R-3 (BC 310.5). Provide CO, HPD i-card, or LNO. | R-3 building classification documentation                                             |
| Building converted to R-3 occupancy group (BC 310.5) Provide Alteration job number in signed off status.                        | R-3 building classification documentation                                             |
| Building demolished (provide Full Demolition job number in signed off status)                                                   | Utility company letter confirming gas termination                                     |
| Building has no gas piping system                                                                                               | Utility company letter confirming gas termination<br>Proof of Submitted Certification |
| Gas temporarily deactivated due to work in progress (provide DOB NOW/BIS plumbing job number or LAA job number)                 | N/A                                                                                   |
| Government/Utility Ownership                                                                                                    | Proof of government/utility ownership                                                 |

# DOB NOW: *Safety* – LL152 VIOLATION WAIVERS

DOB  
NOW

| Waiver Request Reason              | Proof Required                                                                                                                                  |
|------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------|
| New Owner                          | Recorded deed (evidencing a bona fide transfer of ownership to the current owner after penalties were incurred)                                 |
| Bankruptcy                         | Bankruptcy Court Order                                                                                                                          |
| State of Emergency                 | Proof of State of Emergency                                                                                                                     |
| Sealed or Vacated building         | Provide city, court, or departmental records evidencing the order to seal or vacate the entire building.                                        |
| Building has no active gas service | Proof that the building was not supplied with gas and no appliance was connected to any gas piping on the day of the compliance filing deadline |

- Select the appropriate **Waiver Request Reason**.
- Enter **Comments** if appropriate.
- Click **Save**.

- If there are **Required Documents**, they will appear on the **Documents** tab. The upload process for documents is the same as described above.

WCPR-PL-0000003559

General Information

Documents

Statements & Signature

Documents

Additional Documents

Required Documents

| Actions                                                                                                                                                             | Document Name                             | Document Type                             | Document Status |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------|-------------------------------------------|-----------------|
|   | R-3 building Classification Documentation | R-3 building Classification Documentation | Required        |

# DOB NOW: *Safety* – LL152 VIOLATION WAIVERS

DOB  
NOW

## Respondent's Statement\*

As a condition of being granted a license, registration and/or qualification from the New York City Department of Buildings, I attest that I will comply with all applicable provisions of the New York City Administrative Code and Department rules, regulations, and directives governing how licensees, registrants, and qualification holders conduct their specific trade.

I understand that falsification of any statement or record submitted to the Department is a misdemeanor and is punishable by a fine or imprisonment, or both. I understand that 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. I further understand that such actions are punishable by imprisonment, fine and/or suspension or revocation of license, registration, and/or qualification.

I understand that, pursuant to §§ 28-401.19 and 28-401.20 of the NYC Administrative Code, my failure to cooperate fully and completely with respect to any governmental investigation may result in disciplinary measures authorized by law, including but not limited to suspension or revocation of any license, registration, or certificate of competence issued by the Department.

I have reviewed the information provided in this application and hereby attest that, to the best of my knowledge and belief, all such information is true and accurate. I further attest that all attachments submitted with this application are copies of the original documents.

☐

I understand and agree that by personally clicking on the box at left I am electronically signing this document and expressing my agreement with the certification statements above. I understand that this electronic signature shall have the same validity and effect as a signature affixed by hand.

Name

Date

- Only the Respondent is required to **Attest** on the Statements & Signature tab.
- Click **Submit** to submit the Waiver request.
- There is no fee for submitting a Waiver request.

# DOB NOW: *Safety* – LL152 WAIVERS AND CHALLENGES

DOB  
NOW

- All Waivers and Challenges will appear on the **Waivers and Challenges tab** of the dashboard.
- Click **Gas Piping** to view LL152 Waivers and Challenges.

[+ Violations Payments](#) [+ Waivers and Challenges](#) [+ Certificate of Correction Review Request](#) [Search Violations](#)

[Violations Payments](#) [Waivers and Challenges](#) [Certificate of Correction Review Request](#)

AEUHAZ 0

Benchmarking 2

Boilers 0

Elevators 0

Energy Grade 0

Facades 1

Gas Piping 1

GHG Emissions 1

Refresh

Lighting Systems Upgrade/Sub-meters in Tenant Spaces 0

Parking Structures 0

Retaining Walls 0

Retro-Commissioning 0

Structurally Compromised Buildings 0

| Actions                                                                                                                                                             | Tracking Number    | Request Type | BIN | Violation Number              | Request Status | Add |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------|--------------|-----|-------------------------------|----------------|-----|
|   | WCPR-PL-0000003559 | Waiver       |     | VIO-FTF-PL-PER-202512-4181440 | Pre-filing     |     |



# THANK YOU!

NO PAPER. NO LINES.



**NO PAPER. NO LINES.**

# QUESTIONS?