



Retaining Wall Inspection Program (RWIP) RWIP3: Notification of Unsafe Conditions

Application must be typewritten

1 Retaining Wall Location Information

House No(s)	Street Name	Zip	CB No	BIN
Borough	AKA	Block	Lot	WIN

2 Owner Information

Last Name	First Name	Middle Initial
Business Name	Business Telephone	
Business Address	Business Fax	
City	State	Zip
E-Mail	Mobile Telephone	

3 Professional Information

Last Name	First Name	Middle Initial
Business Name	Business Telephone	
Business Address	Business Fax	
City	State	Zip
E-Mail	<input type="checkbox"/> P.E.	License Number

4 Notification Details

Please be advised that during the Critical Examination of the referenced retaining wall, I discovered unsafe conditions, which are detailed as follows:

5 Statement and Signatures

New York City Administrative Code 28-211.1 False statements in certificates, forms, written statements, applications, reports or certificates of correction. It shall be unlawful for any person to make a material false statement in any certificate, professional certification, form, signed statement, application, report or certification of the correction of a violation required under the provisions of this code or any rule of any agency promulgated thereunder that such person knew or should have known to be false.

Name (please print)

Signature _____ Date _____

NYS P.E. Seal (apply seal, then sign and date over seal)

Internal Use Only

Received by Borough Commissioner's Office:	Signature _____	Date _____
Received by Inspection Unit:	Signature _____	Date _____
Received by Retaining Wall Unit:	Signature _____	Date _____

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Notification Details Continued