



THE CITY OF NEW YORK DEPARTMENT OF ENVIRONMENTAL PROTECTION

Bureau of Environmental Compliance 59-17 Junction Boulevard, 9th Floor, Flushing, New York 11373 Records Control (718) 595–3855

L ETTER OF AL	ITHODIZATION		
LETTER OF AC	JTHORIZATION		
	Date:		
	Re.: Premises:		
		Street Address	
	Lot No.:	Block No.:	Borough
I,, have auth	norized		P.E. /R.A.
Owner's Name		PE / RA Name	
PE / RA Street Address	Borough	State	Zip
to file the applications and have authorized	Installer's Nam	е	
Installer's Address	Borough	State	Zip
to make the installation of the equipment at the premise I hereby affirm under penalty of perjury that the information probelief, and that the equipment and/or apparatus concerned will requirements of the NYC Air Pollution Control Code. I hereby a my behalf. I hereby acknowledge that false statements are pur the NYC air pollution control code and sec. 210-45 of the penalthe NYC DEP Bureau of Environmental Compliance shall also agencies including but not limited to the Federal Government Enpeartment of Labor Board of Standards and Appeals, Fire Demeets all applicable Safety Standards. DEP reserves the right audit inspections of this facility by DEP to verify the equipment Engineering Criteria. The signature of the owner constitutes an agreement that the cuse of the equipment or control apparatus concerned in accord Pollution Control Code.	ovided on this form is true to be installed, altered and operathorize the P.E./R.A. naminishable as a class A misder all law. All equipment and approper the requirements of other and the partment of NY, and NYC Is to revoke this permit for cause in this application and to very owner assumes responsibilities.	perated in accordance of herein to file this meanor pursuant to paratus in addition to ther federal, state an mental Conservation, Department of Buildingse. I understand the erify its compliance with for the installation,	e with the application on sec. 24-190 of complying with d local NYS ags. This project at there may be with the DEP
Signature of Owner	Name of incorporated entity		
	Street Address		
If corporation, provide title of officer signing	City	State	Zip
Email Address	Phone Number		