



**TR1: Technical Report  
Statement of Responsibility**  
*This form must be typewritten*

DEPT BLDGS Job No. 121275707  
Scan Code ESHS6603865

**1 Location Information** Required for all applications.

House No(s) 2461 Street Name BROADWAY

Work on Floor(s) CEL,ROF,01 thru 15

**2 Applicant Information** Required for all applications.

Choose all that apply: ☐ Design Applicant 3A, 4A, 5 ☒ Special Inspections Applicant 3B-D, 6-9 ☐ Progress Inspections Applicant 4B-D, 6-9

Last Name SETTEDUCATE

First Name SEBASTIAN

Middle Initial

Business Name SPECIAL TESTING & CONSULTING, LLC

Business Telephone (631) 755-1112

Business Address 144 TOLEDO STREET

Business Fax (631) 755-1117

City FARMINGDALE

State NY

Zip 11735

Mobile Telephone

License Type choose one: ☒ P.E. ☐ R.A. ☐ Other:

License Number 065563

Special Inspection  
Agency Number 001688

**3 Special Inspection Categories** Required for all applications, continued on page 2; ☒ indicates report required.

3A Identification of Requirement		Code/Section	3B Identification of Responsibilities	3C Certificate of Complete Inspections / Tests	3D Withdraw Responsibilities
Y	N		Initial & Date	Initial & Date	Initial & Date
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Structural Steel - Welding	BC 1704.3.1		
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Structural Steel - Details	BC 1704.3.2		
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Structural Steel - High Strength Bolting	BC 1704.3.3		
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Structural Cold-Formed Steel	BC 1704.3.4		
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concrete - Cast-In-Place	BC 1704.4		
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concrete - Precast	BC 1704.4		
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concrete - Prestressed	BC 1704.4		
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Masonry	BC 1704.5		
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Wood - Installation of High-Load Diaphragms	BC 1704.6.1		
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Wood - Installation of Metal-Plate-Connected Trusses	BC 1704.6.2		
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Wood - Installation of Prefabricated I-Joists	BC 1704.6.3		
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Subgrade Inspection	BC 1704.7.1		
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Subsurface Conditions - Fill Placement & In-Place Density	BC 1704.7.2 BC 1704.7.3		
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Subsurface Investigations (Borings/Test Pits)	TR4 BC 1704.7.4		
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Deep Foundation Elements	TR5 BC 1704.8		
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Helical Piles (BB # 2014-020)	TR5H BC 1704.8.5		
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Vertical Masonry Foundation Elements	BC 1704.9		
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Wall Panels, Curtain Walls, and Veneers	BC 1704.10		
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Sprayed fire-resistant materials	BC 1704.11		
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Mastic and Intumescent Fire-resistant Coatings	BC 1704.12		
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Exterior Insulation and Finish Systems (EIFS)	BC 1704.13		
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Alternative Materials - OTCR Buildings Bulletin #	BC 1704.14		
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Smoke Control Systems	BC 1704.15		
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Mechanical Systems	BC 1704.16		
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Fuel-Oil Storage and Fuel-Oil Piping Systems	BC 1704.17		
<input type="checkbox"/>	<input checked="" type="checkbox"/>	High-Pressure Steam Piping (Welding)	BC 1704.18		
<input type="checkbox"/>	<input checked="" type="checkbox"/>	High Temperature Hot Water Piping (Welding)	BC 1704.18		
<input type="checkbox"/>	<input checked="" type="checkbox"/>	High-Pressure Fuel-Gas Piping (Welding)	BC 1704.19		
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Structural Stability - Existing Buildings	BC 1704.20.1		
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Excavations--Sheeting, Shoring, and Bracing	BC 1704.20.2		
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Underpinning	BC 1704.20.3 BC 1814		
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Mechanical Demolition	BC 1704.20.4		



# TR1: Technical Report Statement of Responsibility

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## 3 Special Inspection Categories (continued) Required for all applications, continued on page 2; ■ indicates report required.

3A Identification of Requirement			3B Identification of Responsibilities	3C Certificate of Complete Inspections / Tests	3D Withdraw Responsibilities
Y	N	Special Inspections	Initial & Date	Initial & Date	Initial & Date
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Raising and Moving of a Building	BC 1704 20 5		
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Soil Percolation Test - Private On-Site Storm Water Drainage Disposal Systems, and Detention Facilities ■	BC 1704.21.1 2		
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Private On-Site Storm Water Drainage Disposal Systems, and Detention Facilities Installation	BC 1704 21.2	10/2/19	
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Individual On-Site Private Sewage Disposal Systems Installation	BC 1704 22		
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Soil Percolation Test - Individual On-Site Private Sewage Disposal Systems ■	BC 1704 22		
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Sprinkler Systems	BC 1704.23		
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Standpipe Systems	BC 1704 24		
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Heating Systems	BC 1704 25	10/2/19	
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Chimneys	BC 1704.26		
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Fire-resistant Penetrations and Joints	BC 1704.27		
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Aluminum Welding	BC 1704 28		
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Flood Zone Compliance (attach FEMA elevation/dry floodproofing certificate where applicable)	BC 1704.29 BC G105		
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Luminous Egress Path Markings ■ TR7	BC 1704 30 BC 1024 8		
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Emergency and Standby Power Systems (Generators)	BC 1704 31		
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Post-installed Anchors (BB# 2014-018, 2014-019)	BC 1704 32		
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Seismic Isolation Systems	BC 1707 8		
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concrete Design Mix ■ TR3	BC 1905 3 BC 1913.5	Submit TR3 to complete this item	
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concrete Sampling and Testing ■ TR2	BC 1905.6 BC 1913 10	Submit TR2 to complete this item	

## 4 Progress Inspection Categories Required for all applications. ■ indicates report required.

4A Identification of Requirement			4B Identification of Responsibilities	4C Certificate of Complete Inspections / Tests	4D Withdraw Responsibilities
Y	N	Progress Inspections	Initial & Date	Initial & Date	Initial & Date
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Preliminary	28-116 2 1, BC 110 2		
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Footings and Foundation	BC 110.3.1		
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Lowest Floor Elevation	BC 110 3 2		
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Structural Wood Frame	BC 110 3 3		
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Energy Code Compliance Inspections ■ TR8	BC 110.3.5	Submit TR8 to complete this item	
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Fire-Resistance Rated Construction	BC 110 3 4		
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Public Assembly Emergency Lighting	28-116 2 2		
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Final* 28-116 2 4 2, BC 110 5, Directive 14 of 1975, and 1 RCNY §101-10			

\* For column 4C, indicate date when the actual final inspection was performed

## 5 Design Applicant's Statements and Signatures P.E./R.A. responsible for plans, choose both below and sign/seal.

☒ I have identified all of the special inspections, progress inspections and tests required for compliance

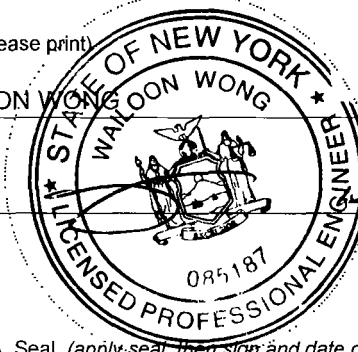
☒ I certify that the Special Inspection and Approved Agencies engaged by the owner to supervise the work specified above are acceptable. (BC 1704.1)

Name (please print)

WAILOON WONG

Signature

Date



P.E. / R.A. Seal (apply seal, then sign and date over seal)

**6 Owner's Statement and Signature for Progress/Special Inspector Required when inspection applicant identifies responsibilities.**

I have reviewed the information provided herein and, to the best of my knowledge and belief, attest to its accuracy. I approve the identification of the responsible inspector. 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 a fine or imprisonment, or both. I understand that if I am found after 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 this code or of a rule of any agency, I may be barred from filing further applications or documents with the Department.

Name (print) ROBERT ROSENTHAL

Title OWNER'S REPRESENTATIVE

Signature 

Date 9/26/19

**7 Inspection Applicant's Identification of Responsibilities****Check all that apply below:**

- ☒ For the **special inspections** indicated above in section 3, I certify that I am the principal/director of the special inspection agency accepting responsibility for conducting the inspections. I further certify that I have read the applicable sections of the New York City Construction Codes in connection with special inspections as well as 1 RCNY 101-06 Rule, which specifies the qualifications required for each inspection and that this agency meets those qualifications for each and every special inspection for which I/we take responsibility. I agree that both I and the agency will comply with all provisions of the New York City Construction Codes and the Rule. I am aware of the additional sanctions imposed on false filings by §28-211.1.2 of the Administrative Code.
- ☐ For the **progress inspections** indicated above in section 4, except energy code inspections on the TR8 form, and/or **concrete test items** indicated in section 3, I assume the responsibility and I personally, or where permitted by the New York City Construction Codes, qualified personnel under my direct supervision, will perform the required inspections and tests on such forms and in such matter as the Department requires or requests. I am aware of the additional sanctions imposed on false filings by §28-211.1.2 of the Administrative Code.

**Final Inspection:**

I will make final inspection of the construction work, including those inspections during its progress necessary to my certification upon final

- ☐ inspection that all work substantially conforms to approved construction documents and applicable laws and rules. I will confirm that the performance of progress inspections and other inspections has been documented before I report the work complete. As prescribed by 1 RCNY 101-10, I will perform the final inspection within 1 year from the expiration of the last valid permit of the work.

Upon completion of the work and within 30 days of my final inspection, I will file a certification attesting to the fact that all work was performed and completed in accordance with the approved construction documents, laws and rules, except as reported otherwise.

- ☒ I understand that my failure to file a certification of completion or to notify the Department of my withdrawal of responsibilities within one year from expiration of the last valid permit may result in the loss of my privileges to file under Directives 2 and 14 of 1975 or issuance of a violation of both. I am aware of the additional sanctions imposed on false filings by §28-211.1.2 of the Administrative Code.

- ☐ **Change of Applicant:** I am a newly designated individual responsible for the items specified herein and I hereby state that:

- ☐ None of the inspections/tests indicated herein have been performed to date by the previously designated individual.
- ☐ Some of the inspections/tests indicated herein have been performed by the previously designated individual, as indicated in the attached report.

I am aware of the additional sanctions imposed on false filings by §28-211.1.2 of the Administrative Code.

Name (please print)

SEBASTIAN SETTE

Signature 

Date

10/02/19

P E / R A Seal (apply seal, then sign and date over seal)

**8 Inspection Applicant's Certification of Partial Completion**

- ☐ I have completed the items specified herein and certify that the all work performed substantially conforms to approved construction documents and has been performed in accordance with applicable provisions of the New York City Construction Codes and other designated rules and regulations, except as indicated in the attached report.
- ☐ **Withdrawal of Applicant:** I am withdrawing responsibility for the items of special/progress inspections and/or tests indicated herein and herewith submit the results or status of the work performed to date.

I am aware of the additional sanctions imposed on false filings by §28-211.1.2 of the Administrative Code.

Name (please print)

Signature

Date

P E / R A Seal (apply seal, then sign and date over seal)

**9 Inspection Applicant's Certification of Full Completion**

All work performed substantially conforms to approved construction documents and has been performed in accordance with applicable provisions of the New York City Construction Codes and other designated rules and regulations.

I am aware of the additional sanctions imposed on false filings by §28-211.1.2 of the Administrative Code.

Name (please print)

Signature

Date

P E / R A Seal (apply seal, then sign and date over seal)