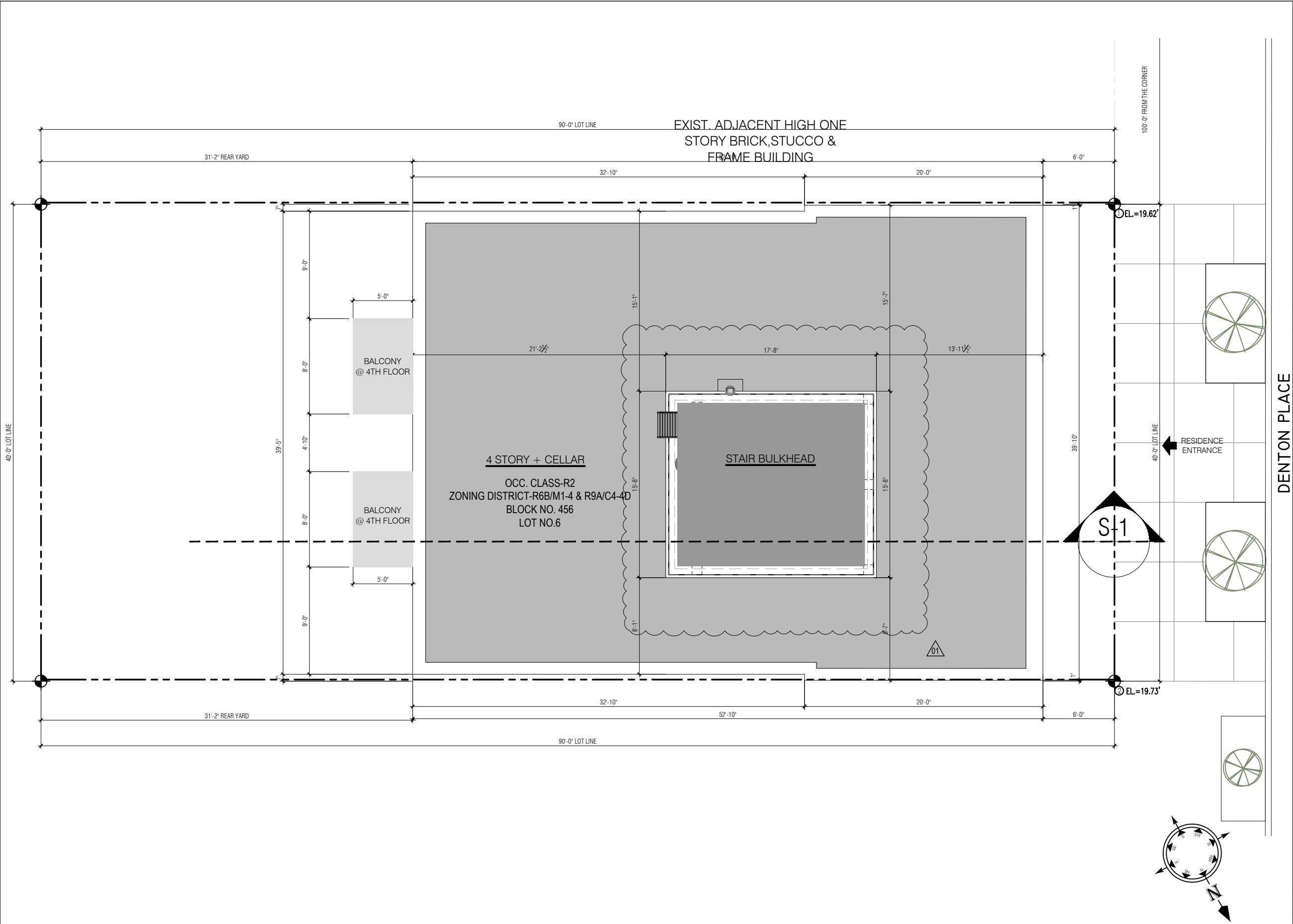




SITE PLAN DIAGRAM
1/8" = 1'-0"

ZD1 Zoning Diagram

Must be typewritten.

☒ Orient and affix BIS job number label here ☒

Submitted to resolve objections stated in a notice of intent to revoke issued pursuant to rule 101-15.

☐ Yes ☒ No

Location Information

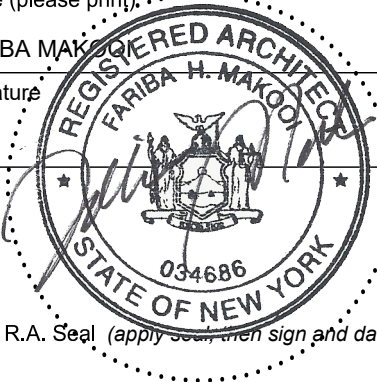
House No(s)	21
Street Name	DENTON PLACE
Borough	Brooklyn
Block	456
Lot	6
BIN	3395605

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. I understand that if I am found after hearing 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 (please print),

FARIBA MAKOOJIAN

Signature _____ Date _____



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

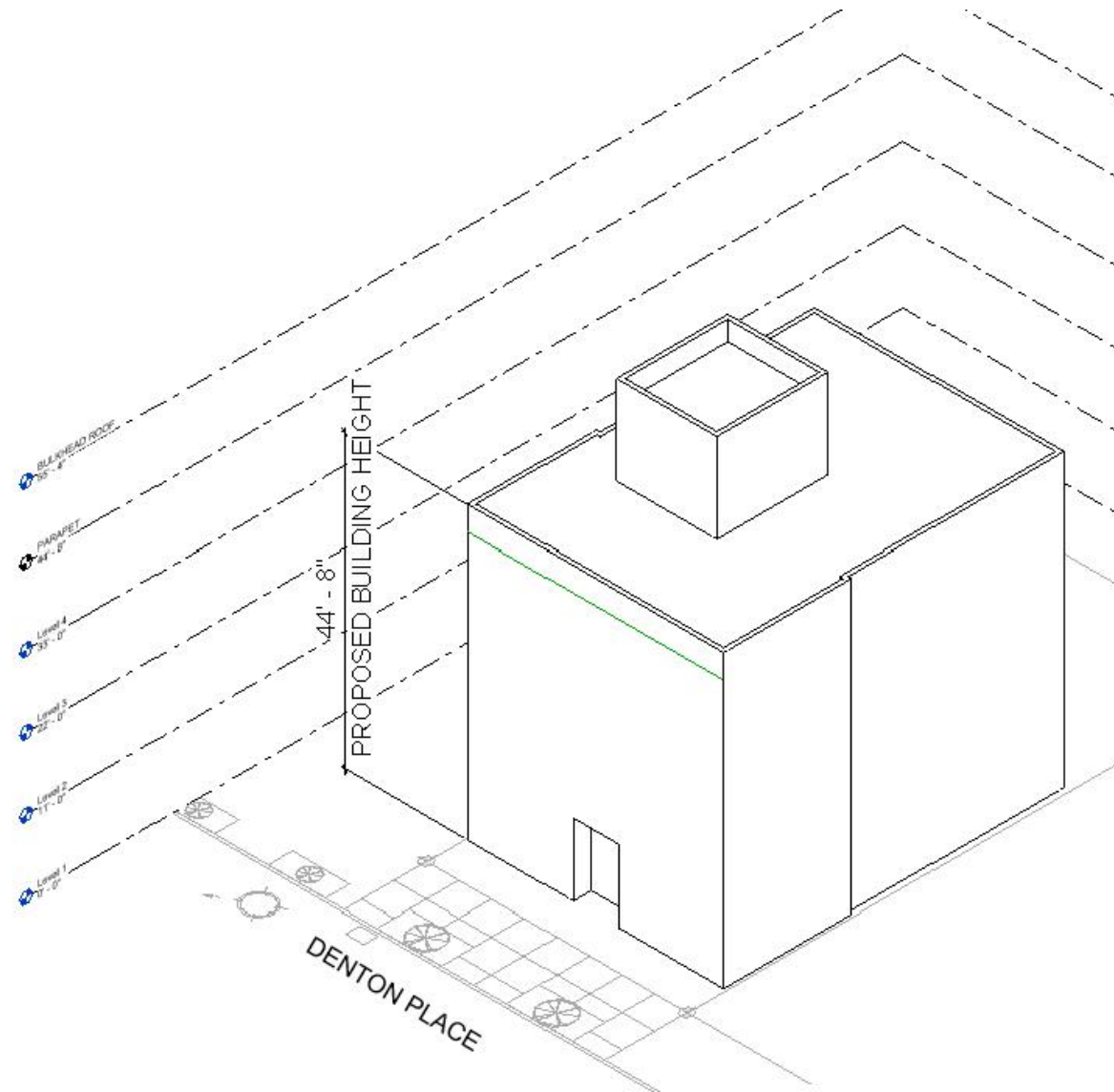
Internal Use Only

BIS Doc # _____

PLAN EXAMINER SIGN AND DATE



DENTON PLACE ELEVATION
1/8" = 1'-0"



AXONOMETRIC DIAGRAM
N.T.S.

ZD1 Zoning Diagram

Must be typewritten.

☒ Orient and affix BIS
job number label here ☒

Submitted to resolve objections stated in a
notice of intent to revoke issued pursuant to
rule 101-15.

☐ Yes ☒ No

Location Information

House No(s) 21
Street Name DENTON PLACE

Borough Brooklyn
Block 456
Lot 6
BIN 3395605

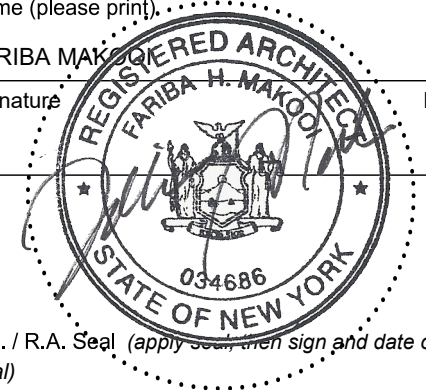
Falsification of any statement is a misdemeanor
and is punishable by a fine or imprisonment, or
both. It is unlawful to give to a city employee, or
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I am found after hearing to have knowingly or
negligently falsified or allowed to be falsified any
certificate, form, signed statement, application
report or certification of the correction of a viola-
tion 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 (please print),

FARIBA MAKOO

Signature

Date



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

Internal Use Only

BIS Doc #

PLAN EXAMINER SIGN AND DATE



ZD1 Zoning Diagram

Must be typewritten.
Sheet _____ of _____

1	Applicant Information <i>Required for all applications.</i>
---	--

Last Name	MAKOOI	First Name	FARIBA	Middle Initial	
Business Name	FISCHER + MAKOOI ARCHITECT PLLC			Business Telephone	(212) 219-9733
Business Address	239 WEST 30TH STREET SUITE 401			Business Fax	(212) 219-8980
City	NEW YORK	State	NY	Zip	10001
				Mobile Telephone	(212) 219-9733
E-Mail	FARIBA@FMARCHITECT.COM			License Number	034686

2	Additional Zoning Characteristics <i>Required as applicable.</i>
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Dwelling Units 8 Parking area 0 sq. ft. Parking Spaces: Total 0 Enclosed 0

3	BSA and/or CPC Approval for Subject Application <i>Required as applicable.</i>
---	--

Board of Standards & Appeals (BSA)

☐ Variance	Cal. No. _____	Authorizing Zoning Section <u>72-21</u>
☐ Special Permit	Cal. No. _____	Authorizing Zoning Section _____
☐ General City Law Waiver	Cal. No. _____	General City Law Section _____
☐ Other	Cal. No. _____	

City Planning Commission (CPC)

☐ Special Permit	ULURP No. _____	Authorizing Zoning Section _____
☐ Authorization	App. No. _____	Authorizing Zoning Section _____
☐ Certification	App. No. _____	Authorizing Zoning Section _____
☐ Other	App. No. _____	

4	Proposed Floor Area <i>Required for all applications. One Use Group per line.</i>
---	--

[illegible]

ZD1

Sheet _____ of _____

4	Proposed Floor Area <i>Required for all applications. One Use Group per line.</i>
---	--

[illegible]

Total Zoning Floor Area	7747.9
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