

Emergency Response Agencies C/O Notification Affidavit (Prior to C/O or Sign-off)

This is to certify that I, _____, as the applicant for the TC/O or C/O detailed below, have provided the Emergency Response Agencies: NYPD, FDNY, EMS, and the Department of City Planning with a site plan that shows the nearest Mapped Streets that are open and in use and shows the access route from such Mapped Streets to the subject building or location.

Location				
Borough	Block	Lot(s)	BIN	C.B. No.
House No(s).	Street Name	Apt/Condo No(s).		Floors
Special Place Name	Building Type (check one box only):		1,2,3 Family <input type="checkbox"/>	Other <input type="checkbox"/>

Application Data				
Job Number	C/O Number		Final C/O	Temporary C/O

Job or C/O Applicant						P.E./R.A. Seal
Last Name		First Name		M.I.		
Business Name			Business Phone ()			
Address		City		State ZIP		
P.E.	R.A.	Lic. No.		Date		
P.E./R.A. Signature				Date		