



B Form 10: Elevator Amendment
Amendment must be TYPEWRITTEN and filed in TRIPLICATE.

APPLICATION NO. BLOCK LOT
(N.B., Alt., Elv., Ebn.)

LOCATION House Number Street

BOROUGH Date 20

Application is hereby made to the Commissioner for approval of the following AMENDMENT to the specifications and plans filed with the above numbered application, with the stipulation that this amendment is to become a part of the aforesaid original application and subject to all the conditions, agreements and statements therein contained.

Applicant Signature

Address

Device Num

Estimated Cost: This Amendment \$ Fee Required \$ Verified by

Fee Paid

NOTE- The applicant must not use the back of this sheet. If more space is needed, additional sheets must be used. No item must be contained over to another sheet, but each item must be complete in the sheet on which it appears. Only those items that appear above the endorsement at the bottom of the page can be considered.

EXAMINED AND RECOMMENDED

FOR APPROVAL ON 20 Examiner

APPROVED 20 Borough Commissioner