



SITE SAFETY Cover Sheet



Drop off Date: Application No.: Major Project: HPD: Build It Back:
 Filed at Address: AKA Address:
 Borough: Block: Lot: Community Board: BIN No.:

Application Type: No. of Buildings on lot:
 No. of Stories: Building/Tower #1: Building/Tower #2: Building/Tower #3:
 Building/Tower #4: Building/Tower #5:

General Description:
 Façade/Rehab Alteration: Shoring
 Façade/Substantial re-clad Alteration: Alternate protection
 Alteration: Vertical/Horizontal Alteration (specify): Other _____
 Alteration: Mechanical Use New Building

Submittal Format: Submission Phase:
 Submission Type:

Contact Information:
 Applicant / Company Name: Phone:
 Contact Name: Email:
 Expediting Company / Courier Name: Phone:
 Contact Name: Email:
 Contracting Company Name: Phone:
 Contact Name: Email:

Application Reviewed by:
 PRINT NAME: _____ SIGNATURE: _____

FOR INTERNAL USE ONLY			
Information provided above verified by (INITIAL): _____	Emergency Dec filed: YES	NO	
Document Attached: YES	NO	Date assigned to Examiner: _____	
Examiners name (PRINT NAME): _____			
Job Status: Approved	Disapproved	Date: _____	Objection Attached: YES NO