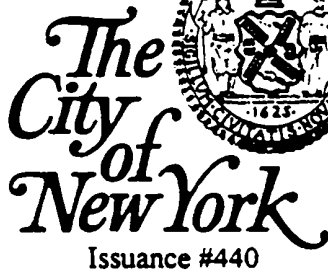


MAR 20 1995



Issuance #440

DEPARTMENT OF BUILDINGS

EXECUTIVE OFFICES
60 HUDSON STREET, NEW YORK, N.Y. 10013

JOEL A. MIELE, Sr., P.E., COMMISSIONER

BARRY G. COX
Assistant Commissioner
Borough Operations
(212) 312-8004

**OPERATIONS POLICY & PROCEDURE NOTICE #03/94
REVISED**

TO: Distribution
FROM: Barry G. Cox
RE: Professional Certification of Inspections/Tests of Selected Plumbing Work.
DATE: March 9, 1995

EFFECTIVE DATE: Immediate

REVISED: Operations PPN 3/94

REFERENCES: Technical PPN 4/94, Operations PPN 1/89, Operations PPN 5/94, Assistant Commissioner of Borough Operations memo of 03/20/95 and Deputy Commissioner for Technical Affairs memo of 09/22/94.

PURPOSE: *To supercede PPN 3/94 which established an optional system allowing Licensed Master Plumbers, Licensed Fire Suppression Contractors, Professional Engineers, Registered Architects and Utility Companies (Authorized Representative) to certify that certain plumbing, sprinkler and standpipe related work had been performed in accordance with the NYC administrative code (CHANGES OR ADDITIONS ARE IN ITALICS.)*

SPECIFICS:
Work That Can Be Certified:
Any plumbing related work which does not require an inspection by another agency may be certified. *(Fire Extinguishing Equipment such as Ansul Systems may NOT be certified.)*

Work Types/Tests

The following work types may be certified:

Plumbing, Sprinkler, Standpipe

The following tests may be certified:

Gas, Hydrostatic, Water, Oxygen, Finished Plumbing (Smoke, Peppermint or Equivalent), Nitrous Oxide, Fire Pump, Air

Authorized Representatives may certify that the work listed above was installed in accordance with the NYC Administrative Code and approved plans.

A gas test can be certified *consistent with Technical PPN 4/94*. An authorized representative of a UC may also certify a gas test. A LFSC may only certify fire suppression work for which the LFSC is licensed.

Authorized Representatives must take responsibility for all work covered by the permit and must take responsibility for performing all inspections/tests involved with that permit.

Notification Requirements

NOTIFICATION OF A PROPOSED SELF-CERTIFICATION OF PLUMBING AND/OR FIRE SUPPRESSION INSPECTION/TEST (OP-38)

As indicated below, the Borough Office must be notified at least two work days prior to an *Underground, Roughing, Gas test or Sprinkler/Standpipe walk through inspection only*. *This notice must come from the LMP or LFSC who pulled the permit.*

SELF-CERTIFICATION OF INSPECTION FORM (OP-39)

As indicated below, an *OP-39* must be sent to the local Borough Office for all plumbing related work which has been inspected and professionally certified. *It must be signed and sealed by the Authorized Representative certifying the job. The OP-39 must be signed and sealed by the LMP/LFSC who pulled the permit.*

Sprinkler/Standpipe

The hydrostatic test required for a Sprinkler or Standpipe should be self-certified on an OP-39 if done by a LFSC or LMP or on a TR-1 if done by a PE/RA. The subsequent walk-through inspection may also be self-certified but the Department must be informed of the anticipated date on an OP-38.

PROCEDURE:

APPLICANT/CERTIFYING *Authorized Representatives*

1. Inspections/tests that *are being self-certified* must parallel the inspection/test sequence made by this department, as applicable.
2. The inspections/tests which require a notification to the Department of

Buildings prior to self certification are an *Underground, Roughing, Gas Test and a Sprinkler/Standpipe walk-through inspection.*

3. ***Using an OP-38, notification must be given to the respective DOB Borough Office at LEAST two work days in advance of the time, date, place, and type inspection/test and under what permit number a certifying inspection/test will take place.***
4. ***Following the certifying inspection, the *Authorized Representative*, using an OP-39, shall notify the respective Borough Office of the results of the inspection/test. No results will be accepted if this Department *had not been previously notified* of the upcoming Inspection/Test or where there is not a permit on the job.***
5. ***Using the information listed on the OP-39, this Department will data enter the inspection results.***
6. ***When all inspections have been completed the necessary paperwork required to signoff the entire permit must be available. This includes other agency approvals as well as Fire Department forms: B Form FP 10, 84, 85 and 86 must be provided by the certifying Authorized Representative with the OP-39. This Department will then forward these forms to the Fire Department.***
7. ***For Gas Tests Only: The Authorized Representative must submit the original and a copy of the OP-39. The copy will be forwarded to the utility company to notify them that a gas test was conducted/witnessed by the Authorized Representative. The Authorized Representative must note on the form the following information: the utility company which is providing gas, the number of meters and risers and their location, as well as the end use of the gas. The Department will not accept nor process any OP-39s without this information. THE UTILITIES WILL ONLY ACCEPT THE OP-39 DIRECTLY FROM THE AUTHORIZED REPRESENTATIVE IF PERFORATED BY THE DEPARTMENT. THESE PERFORATED OP-39s WILL BE AVAILABLE AT THE END OF THE DAY.***
8. ***For Sprinkler/Standpipe Hydrostatic Test only: A signed and sealed TR-1 from a PE/RA may be submitted with an OP-39 to indicate the required test was made. The TR-1 need not be the same date as the OP-39. If a LFSC or LMP is certifying the hydrostatic test, he should do so on the OP-39.***
9. ***The OP38 & OP39 may be typed or hand written (printed). Minor corrections made by the Authorized Representative on the form prior to submission are acceptable.***

10. *The OP39 requires the signature and seal of the Authorized Representative, AS CERTIFIER (ie: If the plumber on the job is also the certifier he must sign AS CERTIFIER.)*
11. *The date the Authorized Representative signs the OP39 must not precede the date of inspection. The Authorized Representative's signature date, however, does not necessarily have to be the same as the date of inspection.*
12. *The OP-38 & OP-39 inspection time & date must be within normal work hours on work days. (Mon-Fri: 8:30AM-2:30PM)*
13. *Legalizations may be self-certified on an OP-39 after payment of the required LL58/88 penalties. (See PPN 1/89)*
14. *If for any reason the Authorized Representative is unable to perform the inspection/test identified on the OP-38, he/she must notify the Department no later than the day of the scheduled inspection. If, upon spot check, a Authorized Representative is not present, and the Authorized Representative has not notified DOB, the spot check will be forwarded to IDU for appropriate action.*
15. *If for some reason, the LMP or LFSC no longer wishes to be associated with an on-going job which has an active plumbing related permit, he/she must notify the Department to have the permit voided. A letter should be sent to the A/C for Borough Operations listing the address, permit number, permit type, a description of the work completed and the reason for the void request. The letter must be accompanied by the actual permit.*

**BOROUGH OFFICE
INSPECTORIAL**

1. **The Borough Office shall keep open one inspection per day per inspector for "spot check" inspections. Twenty percent (20%) of the total number of OP-38s are to be spot checked at the discretion of the Plumbing Chief. Any notification of illegal plumbing may be given a priority. The inspector must wait for 20 minutes at the designated location to meet the Authorized Representative.**
2. **The results of the spot check inspection shall be noted on the inspector's work order and any comments about the inspection shall also be noted. The white copy shall be returned to the Department of Buildings to be data entered onto the system. The yellow copy given to the Chief Inspector for his records and the pink copy to the Authorized Representative in the field. On Spot Check inspections where the Authorized Representative is not at the site, where walls are closed, or where work is not finished refer to the memo of Assistant Commissioner for Borough Operations dated 03/20/95. For jobs which, according**

to this memo, may no longer be self-certified, the self-certification inspection work order should note in the comments section "DOB CANCEL": "This job can not be self-certified in accordance with the results of spot check inspection number _____."

3. *When a clerk discovers that an OP-38 or OP-39 was filed for work for which no permit exists or which is beyond the scope of the permit, a complaint form must be completed and a complaint inspection scheduled by the Chief. Along with the OP-38 and OP-39 the results of that inspection should also be forwarded to IDU. See Number 1 under "Clerical".*
4. *When the entire work type is to be signed off, a review takes place to assure all work under the work type permitted is complete. This is particularly important on jobs where multiple (secondary) permits are pulled by several plumbers covering the scope of work for which he is responsible. The signoff is entered into the computer.*
5. *505 cards will not be issued for BIS plumbing/sprinkler jobs where inspections and the results of these inspections were scheduled through the plumbing module. In these cases, applicants can obtain plumbing/sprinkler job signoff information from the borough office public access terminals or from their office terminals if they subscribe to the system. For Pre-BIS jobs 505 cards will be issued.*
6. *Each week the Chief Inspector must complete the statistical sheet on the number of OP-38s and OP-39s received as well as the number and results of the spot checks performed. This report must be forwarded to Operations/60 Hudson Street no later than Close of Business on the Monday of the following week. With the report the Chief is required to enclose a copy of each spot check performed that week.*

CLERICAL

1. *Upon receipt of an OP-38 & OP-39, the borough office shall data enter the information listed on the notification. The plumbing clerk shall verify that a permit was issued for the work. The clerk **MUST** make certain that the work to be self-certified is covered by the scope of the permit. If the clerk finds that no permit exists or that the OP-38 (or OP-39) exceeds the scope of the permit, the clerk must reject the OP-38 (or OP-39), complete a complaint form with DOB listed as the complainant, and alert the Chief so that he may schedule a complaint inspection. A copy of the OP-38 (or OP-39) must then be forwarded to IDU.*
2. *The Borough Office must determine that any LMP or LFSC certifying work is in fact licensed by verifying the BIS licensing system.*

3. **The work order shall not be printed from the system at this time.**
4. **Upon receipt of an *OP-39* the borough office shall data enter the results of the inspection and also indicate the name and license number of the Authorized Representative.**
5. **For *Underground, Roughing, Gas Test and Sprinkler/Standpipe Walk-Through Inspection* when an *OP-39* is received and an *OP-38* is not on record in the borough office, the *OP-39* shall be rejected and a copy sent to IDU and the Authorized Representative.**
6. **FOR GAS TESTS ONLY: After the clerk has verified that the job was permitted and the results have been data entered, the copy of the *OP-39* shall be perforated and sent to the respective utility company. *NO OP-39 will be accepted if the OP-39 does not include the name of the utility company, the number of meters, the number of risers, their location and the end use of the gas. All of this data must be data entered onto BIS.***
7. ***All data entry should be completed within one-two days of receipt.***
8. ***OP-38s, OP-39s, and spot check results shall all be filed with the job. There must be no "separate" files for OP-38s and OP39s. It is imperative that all paperwork pertaining to the job including the OP-38, OP-39 and the spot check(s) be kept together so that review for signoff will be possible.***

OPERATIONS/60 HUDSON STREET

1. ***Each week Operations will forward to IDU a copy of the spot check results. Operations will maintain a copy of the spot check for its records.***
2. ***A statistical report will be generated summarizing the results of the reports generated by the boroughs.***



OP-38

**Notification of proposed self-certification of
plumbing and/or sprinkler/standpipe
inspection/test**

1 General Information		
Permit number	Permit type: ___ PRA ___ PL ___ SPK ___ S	
Address	Job number:	
	Document number:	
Name & licence no. of LMP or LFSC on job		
Address of LMP or LFSC on job		
Phone number		
Inspection/test scheduled for: / / Time: : AM/PM		
Location where inspection/test will take place:		
Floors:	Area/zone:	Apts:
Inspector meet licensed professional where:		

1.1

2 Inspection and/or test		
(check as applicable)		
<input type="checkbox"/>	Underground	<input type="checkbox"/>
<input type="checkbox"/>	Roughing	Water
<input type="checkbox"/>	Sprinkler/Standpipe	Hydrostatic
<input type="checkbox"/>		Fire pump
<input type="checkbox"/>	Gas piping	Mercury

Name and number of the Licensed Plumber _____



OP-39

Self-certification of inspection/test

1 General Information	
Permit number	Permit type: <u> </u> PRA <u> </u> PL <u> </u> SPK <u> </u> ST
Address	Job number
	Document number
Name & licence no. of Lmp or LFSC on job	
Address of LMP or LFSC on job	
Name & License no. of certifying authorized representative	
Address of certifying authorized representative	
Inspection/test held on: / /	Time: : AM/PM
Inspection location:	
Floors:	
Apts:	Area/Zone:

2 Inspection type and/or test (check as applicable)	
<input type="checkbox"/> Underground	<input type="checkbox"/> Water
<input type="checkbox"/> Roughing	<input type="checkbox"/> Water
<input type="checkbox"/> Fixtures	
<input type="checkbox"/> Sprinkler/Standpipe	<input type="checkbox"/> Hydrostatic
	<input type="checkbox"/> Fire Pump
<input type="checkbox"/> Gas piping	<input type="checkbox"/> Mercury (Utility Company _____)
<input type="checkbox"/> Other	<input type="checkbox"/> Smoke/Peppermint or Equivalent
	<input type="checkbox"/> Nitrous Oxide Air Oxygen
<input type="checkbox"/> Removal of roughing/fixtures	

3 Results (check as applicable)	
<input type="checkbox"/> Inspection/test ok/no further action	
<input type="checkbox"/> Inspection ok/paperwork or other agency approvals pending	
<input type="checkbox"/> Work not finished	
<input type="checkbox"/> Gas test passed	<input type="checkbox"/> Gas service ok
<input type="checkbox"/> Process for signoff	
# of meters:	Location: End Use:

Comments:

I certify the statements herein are correct and comply with the NYC Building code. I meet the requirements of the NYC Building code as they relate to the experience requirements set forth for gas tests. I realize falsification of any statement is a misdemeanor under section 26-124 of the Administrative code punishable by a fine or imprisonment or both and may result in removal from participation in the self-certification program and/or disciplinary action by the Master Plumber and Fire Suppression Licensing Board.

Name, signature and seal of certifying Authorized Representative. Date

Name, signature & seal of Licensed Master Plumber or Licensed Fire Suppression Contractor who pulled the Permit. Date

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