



DEPARTMENT OF BUILDINGS

EXECUTIVE OFFICES
60 HUDSON STREET, NEW YORK, NY 10013

CHARLES M. SMITH, Jr., R.A., Commissioner

Issuance # 34

STEWART D. O'BRIEN
Deputy Commissioner
Administration & Operations

OPERATIONS 312-8001
POLICY AND PROCEDURE NOTICE # 13/87

To: Distribution

From: Stewart D. O'Brien, Deputy Commissioner

Subject: Applicant Notification to Community Boards
for Demolition Projects

Date of Issuance: July 31, 1987

7/31/87 SDO

Purpose

To provide Community Boards with timely notification of proposed demolition projects in their respective areas, applicants will be required, for each application, to mail a copy of the pertinent Docket Information Sheet to the appropriate Community Board.

Specifics

A. Borough Office

1. The Borough Application/Information Clerk will distribute to each applicant, along with the demolition application forms:
 - a. A copy of the Notice to Applicant CB (appropriate to borough) which notes the applicant's responsibility in this regard, and provides a list of Community Boards and addresses and a borough map delineating Community Board areas.
 - b. A copy of Applicant's Statement of Notification to Community Board.
2. The Cashier will not accept the filing fee unless the demolition application papers include a completed Applicant's Statement of Notification to Community Board.

RESCINDED

PLAN EXAMINATION APPOINTMENT SCHEDULE

Examiner: _____

	Monday	Tuesday	Wednesday	Thursday	Fri
9:00	Application # Name Telephone # Organization				
9:20	Application # Name Telephone # Organization				
9:40	Application # Name Telephone # Organization				
10:00	Application # Name Telephone # Organization				
10:20	Application # Name Telephone # Organization				
10:40	Application # Name Telephone # Organization				
11:00	Application # Name Telephone # Organization				
11:20	Application # Name Telephone # Organization				
11:40	Application # Name Telephone # Organization				
12:00	Application # Name Telephone # Organization				
12:20	Application # Name Telephone # Organization				
12:40	Application # Name Telephone # Organization				

RESCINDED

PLAN EXAMINATION APPOINTMENT SCHEDULE

Owner: _____

	Monday	Tuesday	Wednesday	Thursday	Friday
00 Application # Name Telephone # Organization					
20 Application # Name Telephone # Organization					
40 Application # Name Telephone # Organization					
:00 Application # Name Telephone # Organization					
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RESCINDED