



APPLICATION FOR INSPECTION PRIOR TO DEMOLITION  
(AND PRE-DEMOLITION REPORT)

Application must be typewritten.

BEST USE ONLY  
DEMOLITION #  
**3300**

**Applicant, please complete all information requested below:** (For mechanical demolition requests complete form BEST-4 as well.)

Number of structures at this address you intend to demolish (a separate application is required for each):

Name: Janet Forde Company: JAM Consultants, Inc.

E-mail: JForde@JAMNY.com Phone: 212-244-4427 Fax: 212-244-4497

Application date: 2/28/07  Bronx  Brooklyn  Manhattan  Queens  Staten Island

Structure type (check only one):  House  Garage  Shed  Commercial Building  Other: Warehouse

Building address: 800 Pacific Street Legalizing a completed demolition?  Yes  No

Cross streets: Carlton Ave & Vanderbilt Ave BIN: 3027642 Block: 1129 Lot: 25

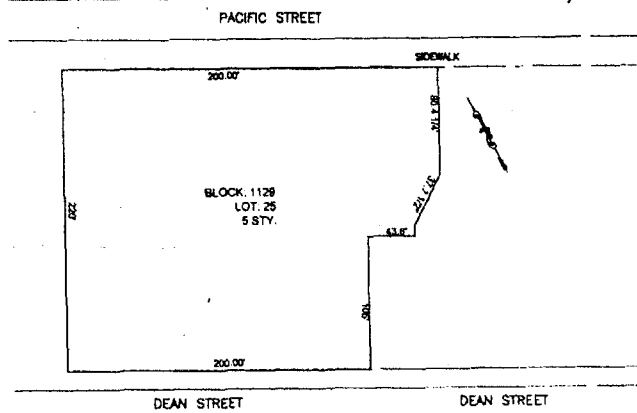
All AKA's ("Also-Known-As", if applicable): 774 Pacific Street

BIS job # for demolition (DM) filing: 302303451 Other related BIS job #s (if applicable): N/A

Distance from nearest street corner (in feet): 186' Mechanical demolition requested?  No  Full  Partial

**BEST must be notified in writing 24 hours prior to the commencement of any demolition (see AC §27-195).**

**PLOT DIAGRAM (MUST INDICATE ZONE OF SAFETY ON DIAGRAM)**



The north point of the diagram must agree with the arrow

**APPROVED  
BEST SQUAD**

A survey may be submitted in addition to or in lieu of a plot diagram as long as the zone of safety is indicated.

**DO NOT WRITE BELOW THIS LINE: OFFICIAL USE ONLY**

Date of report: 03.01.07 Number of stories: 3 Height of building: 35'

Occupancy: Is building vacant?  Yes  No Sidewalk shed required?  Yes  No

If yes, has a sidewalk shed been erected?  Yes  No If yes, provide permit number: 301906882

Does the building have fire escapes or other exits used jointly with an adjoining or abutting building?  Yes  No

Will the removal of the fire escape or other exit affect the adjoining building?  Yes  No

Does the building have party walls or walls enclosing an adjoining building?  Yes  No

If yes, please describe:

Has the demolition of the building commenced?  Yes  No If yes, answer the following questions:

Has work been stopped?  Yes  No Have the police been notified?  Yes  No

Has an ECB violation been issued?  Yes  No If yes, provide ECB violation number:

Comments:

Inspection Result:  Pass  Fail

Inspected by: J. Beaudé Signature: [Signature] Badge # 1841 Date: 03.01.07

Supervisor: [Signature] Signature: [Signature] Badge # 2178 Date: 3/3/07

Administrative Comments: