# PER11 Appointment and Drop-off Request

**(A SEPARATE FORM MUST BE SUBMITTED FOR EACH JOB)**

*Application must be typewritten*

**NYC Buildings**

Select ONE of the following options:  ☐ Appointment Request  ☐ Drop-off (Plan Exam)

☐ **BRONX**
   BronxPER11**Appointments**@buildings.nyc.gov
   BronxPER11**PlanExam**@buildings.nyc.gov

☐ **BROOKLYN**
   BrooklynPER11**Appointments**@buildings.nyc.gov
   BrooklynPER11**PlanExam**@buildings.nyc.gov

☐ **MANHATTAN**
   ManhattanPER11**Appointments**@buildings.nyc.gov
   ManhPER11**PlanExam**@buildings.nyc.gov

☐ **QUEENS**
   QueensPER11**Appointments**@buildings.nyc.gov
   QueensPER11**PlanExam**@buildings.nyc.gov

☐ **STATEN ISLAND**
   StatenIslandPER11**Appointments**@buildings.nyc.gov
   StatenIslandPER11**PlanExam**@buildings.nyc.gov

| 1 | **ATTENDEE** *(Required for **all** applications)* |
|---|---|

**Name** _____  **DOB ID#** _____

**Business Phone** _____  **Cell Phone** _____

**Email** _____  **Number of Attendees** _____

| 2 | **PROPERTY DETAILS** *(Required for **all** applications)* |
|---|---|

**Address** _____

**Job Number** _____  **Document Number** _____

**Applicant** _____  ☐ P.E.  ☐ R.A.  **License #** _____

**Plan Examiner** _____

| 3 | **APPOINTMENT REQUEST** |
|---|---|

☐ **Fee Exempt Job**          ☐ **Pro-Cert Zoning Review**          ☐ **Special Audit** *(attach Objection Sheet)*

☐ **Project Advocate**        ☐ **Reassignment**                    ☐ **TCU Audit** *(attach Objection Sheet)*

☐ **Withdrawal**              ☐ **Self-Certification of Objections** *(attach Objection Sheet)*

☐ **Other** _____

| 4 | **DROP-OFF REQUEST** |
|---|---|

☐ **AI-1** *(As-Built Plans/Final Survey clearly itemized)*     ☐ **Certificate of Compliance**

☐ **PAA** *(attach Objection Sheet)*                            ☐ **Equipment Certificate of Compliance Permit**

☐ **Reassignment**                                             ☐ **Special Inspection Reports**

☐ **Reinstatement**                                            ☐ **Satisfaction of Required Items**

☐ **Other** _____

| 5 | **COMMENTS/REASON FOR MEETING** *(Provide detailed explanation for request)* |
|---|---|

| **INTERNAL USE ONLY** | |
|---|---|
| **APPOINTMENT APPROVED:**  ☐ YES  ☐ NO | **COMMENTS:** |
| **APPOINTMENT DATE:**        **TIME:** | |
| **REASSIGNED TO:** | |
| **CONFIRMATION #:** | |
| **REINSTATEMENT FEE:** | |