



Technical Report (TR6)
Periodic Inspection of Exterior Walls and Appurtenances
 Sub-Cycle 8A – February 21, 2015 – February 21, 2017
 Sub-Cycle 8B – February 21, 2016 – February 21, 2018
 Sub-Cycle 8C – February 21, 2017 – February 21, 2019

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Must be typewritten.

For all reports, submit a digital copy of report in a DVD or CD format, a BIS Façade printout, a completed TR-6 and the Batch Intake form (FB1). The digital copy must be indexed with a Control Number and BIN. E.g. Control # – BIN

Control #: 804922

1 Filing Information (Indicate if combined cycles)

Initial Filing Resubmission Amended Filing Subsequent Filing
 Report cycle: 8A Report cycle: _____ Initial filing date: _____
 Last cycle filing date: 02-17-12 Initial unsafe filing date: _____

2 Location Information

House No(s) 9 Street Name East 71st Street Zip 10021 CB No 108 BIN 1041354
 Borough MAN AKA _____ Block 1386 Lot 10

3 Inspection Report Status Information

Current Cycle: Last Inspection Date 06-24-15 SWARMP Recommended Date _____ Prior Filing Cycle 7A
 Safe Safe with repair and maintenance program (SWARMP) Unsafe Safe SWARMP Unsafe

4 Building Characteristics

Landmark Building: Yes No Landmark District: Yes No Wall(s) Subject to Inspection
 Number of stories: 7 Exterior wall type: Brick/Stone # Balconies: N/A All Partial

5 Qualified Exterior Wall Inspector (QEWI) Information

Last Name Fenniman First Name Thomas MI A
 Bus. Name Thomas A. Fenniman Architect Bus. Address One Union Square West Bus. Tel. [REDACTED]
 City New York State NY Zip 10003 Bus. Fax [REDACTED]
 NYS Lic. # 20340 [REDACTED] R.A. Mobile Phone [REDACTED]
 E-Mail [REDACTED]

6 Owner of Record Information (Not a Representative or Business Manager or Agent)

Last Name Kahn First Name Richard MI _____
 Bus. Name Maple Inc. Bus. Address 9 East 71st Street Bus. Tel. [REDACTED]
 City New York State NY Zip 10021 Bus. Fax [REDACTED]
 E-Mail [REDACTED] Mobile Phone [REDACTED]

7 Statements and Signatures

Owner / Owner Representative

(A) I hereby state that I am the owner/owner's representative of the premises referenced in the attached report. Furthermore, I have received and read a copy of the attached report and I am aware of the required repairs and/or maintenance, if any and the recommended time frame for same.
 (B) I certify that all items noted as SWARMP conditions in the previous cycle's report have been corrected/repared; or this report must be rated as Unsafe as per Administrative Code section §28-302.1, if applicable.

Name Richard Kahn Signature _____
 Relationship to owner _____ Phone [REDACTED]
 Email [REDACTED] Date _____

Qualified Exterior Wall Inspector (QEWI)

Name (please print)
Thomas A. Fenniman
 Signature _____ Date _____

I hereby state that the Owner / Owner's Representative has authorized me to submit this report. Furthermore, I hereby state that all statements are correct and complete to the best of my knowledge. A copy of this report has been given to the owner.
 P.E. / R.A. Seal (apply NYS seal, then sign and date)

§28-211.1 False statements in certificates, forms, written statements, applications, reports or certificates of correction. It shall be unlawful for any person to make a material false statement in any certificate, professional certification, form signed statement, application, report or certification of the correction of a violation required under the provisions of this code or any rule of any agency promulgated there under that such person knew or should have known to be false.