A/EOR Certification
Request for Partial Inspection

Refer to Checklist TAA CK 12

Check one

- ☐ For occupancy
- ☐ Not for occupancy
- ☐ Emergency Work # _____

Check one

- ☐ By area
- ☐ Excluding area

Tenant Name

Facility & Location

TAA Number

TAA Title

Project A/EOR

Firm Name

Full Address

Phone

Email

Location of Completed Work ☐ NYC ☐ NY ☐ NJ

Description of Completed Work

Certification

Please be advised that the portion of work under this Alteration Application, as described herein, and as may be shown on the sketch attached to this form is complete and has been inspected by my office. In addition, all Rider comments related to this portion of work have been resolved to the satisfaction of the Port Authority of New York and New Jersey (PA).

I certify, to the best of my knowledge, that all installation(s), materials, equipment, and special inspections under this Alteration Application included in this portion of the work comply with the drawings and specifications approved by the PA, the New York City Building Code (for properties located in New York City), the Uniform Construction Code (for properties located in New Jersey), the Building Code of New York State (for properties located in NYS outside NYC) and all other applicable codes and regulations.

Check one

☐ I further certify that all applicable fire protection systems and devices have been properly installed and tested and their associated alarms have been successfully transmitted to the appropriate Fire Alarm Central Monitoring Station, as approved by the PA.

☐ I further certify that there were no changes to the existing fire alarm or fire protection system made as part of this portion of the TAA work.

Based upon the above, all areas and equipment included in this portion of work covered by this Alteration Application are ready for their intended beneficial occupancy and use.

We are requesting a Partial Inspection for beneficial occupancy and use of the space / area / equipment hereunder.

Submitted By

Name, Title

Date

Type of License ☐ PE ☐ RA

License Number

Professional Seal

To be submitted under cover letter from A/EOR.

Document cannot be altered.