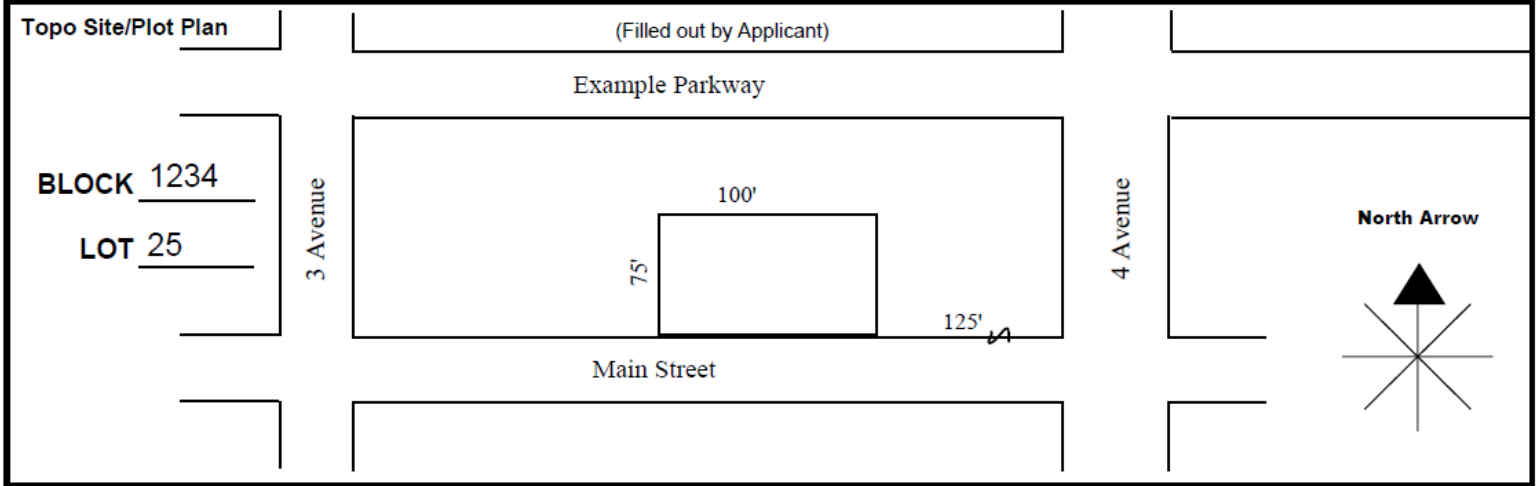




How To Apply For House Number Approval

House Number assignment is now required twice for a full approval. Based on your scope of work, you must first apply for an Initial (temporary) house number assignment and then, once you are ready for final certificate of occupancy, bring back your approved TF-1 Form and apply for Final house number assignment for all the applicable entrances of your building.



TF-1 FORM: PLOT DIAGRAM

Example showing the correct way to fill out the diagram above

1. **NO RED INK/PENCIL** ON TOPO OR DOB FORMS
2. Fill in your **TAX Block** and **TAX lot** information.
3. Always fill out the Topo Plot Plan. Plan **must** include:
 - **North arrow**
 - All street names
 - Tax lot diagram- Not zoning lot
 - (the lot lines must go to the street)
 - Dimensions of tax lot
 - Distance to nearest corner
 - Location of entrance with marker only ▲

TF-1 FORM: Purpose of Application

Select the box that aligns with your scope of work
(if you are unsure, ask a representative before submission)

Initial Assignments are for:

- Jobs that need a new BIN
- Jobs that have a new building
- ADU and/or Garages
- Tax lot Mergers
- Tax lot Subdivisions or Reconfigurations
- Jobs with demolition of the building except the foundation
- Vacant land - No DOB Work
- ALT - CO filings where DOB has required verification
- Addresses for structures that are NOT a building

Final Assignments are for:

- Jobs that need a Final Certificate of Occupancy (Final CO)
- Jobs that are ALT - CO
- Jobs that have a DOF - RP602 Form (NOT RP602c)
- Demolition address verification
- Address change requests
- Additional Address for USPS or EMS - NO DOB work
- Vanity Address applications

Proceed to filling out the TF-2 Form

Attach The Below Items Based On Your Work Type:

1. All Applications Require:

- Topo application form (TF-1 Form)
- Topo job information form (TF-2 Form)
- \$100 per entrance/per application set

2a. Applications with DOB related work also require:

- DOB PD-1 form

2b. Applications without DOB related work also require:

- Deed & Schedule A
- Notarized letter from Owner

Note: Only the Owner can apply for addresses, if owner cannot attend and there are no DOB filings involved, a notarized letter giving permission to apply on their behalf must be submitted.

3. Applications with 50FT of street frontage require:

- 1st Floor plans (with requirements from TF-2 form)
- OR**
- Pictures of each street side of property & neighbors

4. Applications with a Tax Lot changes:

- DOF - RP602 form
- A Street Number Application for all new or affected lots listed on the RP602 Form

Note: Every tax lot listed in the "new lot(s)" or "affected lot(s)" area at the bottom, must apply for address assignment or verification. We must have all applications to move forward with any application. If your team is not working on that lot, please coordinate with the owner to have those other applications submitted

5. Application with Tax Map discrepancies:

- Survey (ONLY when requested by Topo Staff)



**THE HOUSE NUMBER(S) ASSIGNED MUST BE DISPLAYED PROPERLY
TITLE 3, CH. 5 § 3-505 ACCNY & TITLE 45, CH. 2 §2-01 RCNY**

Topo Site/Plot Plan	(Filled out by Applicant)	
BLOCK _____ LOT _____		North Arrow

PURPOSE OF APPLICATION

INITIAL ASSIGNMENT	FINAL ASSIGNMENT
<p>New Building - New BIN - Existing Tax Lot (TF-2 Form & DOB: PD-1 REQUIRED)</p> <p>New ADU - New BIN - Existing Tax Lot (TF-2 Form & DOB: PD-1 REQUIRED)</p> <p>New Garage - New BIN - Existing & New Tax Lot (TF-2 Form & DOB: PD-1 REQUIRED)</p> <p>New Subdivision / Reconfiguration / Merger ONLY (TF-2 Form & DOB: PD-1 & Signed RP602 form REQUIRED)</p> <p>Existing BLDG - No Work - New BIN (TF-2 Form & DOB: PD-1 REQUIRED)</p> <p>Existing BLDG - ALT-CO - Existing BIN (TF-2 Form & DOB: PD-1 REQUIRED)</p> <p>Other - NOT BLDG - New BIN - Existing Tax Lot (TF-2 Form & DOB: PD-1 REQUIRED)</p>	<p>New Building - Existing Tax Lot - Final CO (TF-2 Form & DOB: PD-1 REQUIRED)</p> <p>ADU or Garage - Existing Tax Lot - Final CO (TF-2 Form & DOB: PD-1 REQUIRED)</p> <p>Demolition - Existing BIN - Existing Tax Lot (TF-2 Form & DOB: PD-1 REQUIRED)</p> <p>Existing BLDG - ALT-CO - Final CO (TF-2 Form & DOB: PD-1 REQUIRED)</p> <p>Existing BLDG - No Work - New Address (TF-2 Form & Deed and Schedule A)</p> <p>Existing BLDG - No Work - Additional Address (TF-2 Form & Deed and Schedule A)</p> <p>Existing BLDG - No Work - Verification of Address (TF-2 Form & Deed and Schedule A)</p>

FILLED OUT BY TOPO STAFF

<i>Sanborn Atlas Information</i>	<i>Approval Status</i>	<i>Topo Sign off</i>	<i>Intake Status</i>
VOL. _____		INITIAL ASSIGNED BY : _____	<input type="checkbox"/> DROP OFF <input type="checkbox"/> MAIL IN
PAGE _____		FINAL ASSIGNED BY : _____	# of Addresses _____ APPLICATION ACCEPTED: _____
<i>Topo Approval Notes:</i>			<i>(Dated by Topo Dept.)</i>

\$100 Fee per House Number Assignment or Verification

(Bank Certified Checks/Money Orders payable to Brooklyn Borough President's Office, Credit/Debit Cards accepted)



1 Contact Information for Pick Up – MUST BE FILLED OUT COMPLETELY

Name of Representative dropping off application(s) (please print):

Business Name: _____

Business Address: _____

City: _____ State: _____ Zip: _____

Business Telephone: _____ Cell Number: _____

EMAIL (for Pick Up notification): _____

2 Location Information

House Number: _____ Street Name: _____

Borough: _____ Block: _____ Lot: _____ Zipcode: _____

BIN: _____ DOB Job Number: _____

Apt/Condo No(s): _____ Total Tax lot sqft: _____

3 Job/Project Type: Required for all applications. Choose one.

Check off the box that most aligns with the scope of your address request:

New Building Alteration filing Subdivision/Merger (Tentative RP602 form required)

Demolition Mail Delivery / USPS Other (explain): _____

4 Applicant Information: Required for all applications filing with DOB

Last Name: _____ First Name: _____

Choose one: P.E. R.A. License Number: _____

Business Name: _____

Email Address: _____

Business Telephone: _____ Cell Number: _____

Business Address: _____

City: _____ State: _____ Zip: _____

5 Filing Representative: Those filing with TOPO on behalf of applicant/owner

Last Name: _____ First Name: _____

Business Name: _____

Registration Number: _____

Email Address: _____

Business Telephone: _____ Cell Number: _____

Business Address: _____

City: _____ State: _____ Zip: _____

6 Property Owner Information

Owner Type: Tenant/Shareholder Individual Partnership/ Corporation Condo/Co-Op
 NYCHA/HHC/SCA NYC Agency Other Government Agency

Full Name (**not** LLC): _____

Relationship to owner: _____

Business Name/Agency: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Telephone: _____ Email: _____

7 Application Specifics

Initial Topo - Address Filing:

Type of Filing:

Final Topo - Address Filing

- | | |
|--|--|
| - Initial filing for ALT - CO applications | - New Building filing - Address for Final CO |
| - Non - Building address request | - ALT - CO filing - Address for Final CO |
| - New BIN only (Explain why in #8) | - All filings with a Tax lot Mergers |
| - New building | - All filings with a Tax lot Subdivision (No RP602c) |
| - ADU | - All filings with a Tax lot Reconfigurations |
| - Garages | - Demolition of entire building |
| - Tax lot Mergers | - Address change requests |
| - Tax lot Subdivision | - Address for USPS or EMS ONLY |
| - Tax lot Reconfigurations | - Vanity Address Applications |
| - Vacant land - No DOB Work | |
| - Demolition of the building - except the foundation | |

8 | Job Description

Please describe the work that will be done on the property, what kind of building is being built, the number of stories and **why** you are applying for or verifying an address. "Address verification" "Verify Topo Stamp" "New Building" & "New address" only are **unacceptable**

9A | Project Specifics - Building

Is this project a school? If so, explain:

Is this project a hospital or clinic? If so, explain:

Is this project a hotel or transient housing?

Is this project a government building? If so, explain:

Is this project a full or partial community facility?
Full Partial No
Explain the community facility use:

Is this an Affordable Housing Project?
Yes No

Number of Dwelling Units (Residential Use)

What percentage is affordable?

Will this project use any incentive programs?

485x 421A Other

Does the project use an HPD term sheet? If so, explain

9B | Project Specifics - Streets

Is this building fronting a private / unmapped street?
Street name:

Is this building part of a complex or campus?
Name :

Is this building part of a multi-phase project?
Project:

Is this project connected to any City Map changes?
Name/ CPC#: _____

10 | Land Use Characteristics

Is there an upland connection?
Is this located in a Waterfront Access Area?
Is there a shore public walkway/visual corridor supplemental public access area?
List all CRFN(s) Restrictive Declaration and/ or Easements:

Is this project in a Housing Priority Area as designated in The Brooklyn Comprehensive Plan?

11 | Tax Lot Changes & Characteristics

Original tax lots being merged or subdivided ONLY

All tentative tax lot numbers on RP602

12 | Comments

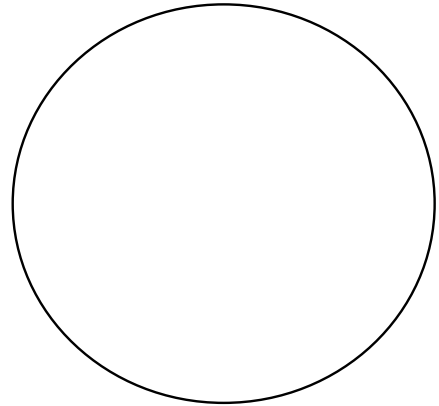


13 Applicant or Owner's Statement and Signature

I hereby certify that I prepared or supervised the preparation of the documents submitted herewith and that the information indicated in this document is true and accurate to the best of my knowledge. I have obtained permission from the owner to act on their behalf in submitting this application. I acknowledge that all street numbers are assigned based on the building's entrance location and that the Topographical Bureau will assign all addresses, including but not limited to new buildings or buildings with new entrances, as appropriately as possible. I understand that if I am found after to have falsified any information provided or forged/erased any assignment the Topographical Bureau has given, I will be barred from filing with the Bureau in the future.

Name (print): _____

Sign/Date: _____



*If P.E./ R.A. applicants:
Apply seal then sign & date*

14 PLAN INSTRUCTIONS TO APPLICANT

ADDITIONAL ADDRESSES REQUIREMENT:

All residential, commercial, retail, community facility, office and ambulatory facility entrances must apply for their own address at time of submittal.

PLAN REQUIRMENTS:

Applications with a street frontage greater than 50 ft OR with a lot size greater than 5,000 sq. ft. must include a 1-page 1st floor plan with a **site/plot plan overlay**, no bigger than 11 x17

PLANS WILL ALSO BE REQUIRED FOR ANY LOT IN WHICH ADDITIONAL ADDRESSES ARE REQUESTED OR IF THERE IS A DESCREPENCY OF WHERE AN ENTRANCE IS LOCATED.

Plans must include the following:

- No red ink
- north arrow
- all street names
- depiction of full tax lot (everything inside the tax lot not just building)
- dimensions of tax lot
- distance to nearest corner
- distance to the main entrance
- footprint of building
- BIN Number (if existing building)
- location of entrances/doors
- Seal of Registered Architect or Engineer