

NEW YORK STATE DEPARTMENT OF PUBLIC SERVICE

METHOD OF SERVICE FORM

This form should be filed with all new petitions and applications that require action by the Commission. It will allow us to serve you with the Commission decision using the method you select.

Name:	ROBERT FRIESS
Your Company/Organization:	RA Engineering PC
Mailing Address:	259 Mineola Blvd, Mineola, NY 11501
Company/Organization you represent, if different from above:	327 Central Brkwest Condominium
E-Mail Address:	RAFR1ESS@MSN.COM
Case/Matter # (if known)	16-E-0695

If you consent to receive Commission-issued orders electronically, you will receive all Commission-issued documents electronically. If you do not consent to receive Commission-issued orders electronically, you will receive all Commission-issued documents by mail.

Check the box(es) in A or B, below:

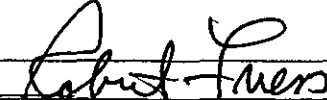
A:

☒ I am authorized by the party I represent to grant consent to receive electronic-only service of Commission-issued orders, AND

☒ I, on behalf of myself or the party I represent, knowingly waive the right specified in Public Service Law §23(1) to be served personally or by mail with orders that affect me or the party I represent and consent to receive service of Commission-issued orders by electronic means only. This consent remains in effect until revoked.

B:

☐ I do not consent to receive electronic service and instead request that the DPS mail Commission-issued document(s) to me.

Signature: 	Date: 8/17/17
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Please note that this form applies to this filing only.

To the extent possible, please file this form in .pdf format.

RA ENGINEERING, PC

259 Mineola Blvd, Suite 204

Mineola, New York 11501

Tel (516)-741-2732 Fax (516)-741-4798

August 18, 2017

State of New York

Department of Public Service

3 Empire Plaza

Albany, New York 12223

Attention: Ms. Elizabeth Burgess

Secretary to the Commission

Reference: Email dated 7/13/17 from Mr. Craig Carroll to Robert Friess indicating that 327 Central Park West was previously approved for Submetering. (attached)

Dear Ms. Burgess,

The email referenced above has indicated that 327 Central Park West has been previously approved for Submetering. This email shall be retained as their official approval to submeter.

The following responds to the issues raised in the referenced email:

1. 327 Central Park West is in complete compliance with 16 NYCRR Part 96. Specifically the meters installed this summer, Satec Indoor Multi-Family (BFM-136) has been approved by the NYS PSC Staff. Additionally each apartment at 327 Central Park West has a electrical breaker located in the basement providing remote turn-Off of power should this be required.
2. 327 Central Park West is in full compliance with 16NYCRR Part 92. The Meter Test Plan for 327 Central Park West was filed with our original Petition to Submeter dated 12/8/17. We have now filed the plan under Case 11-M-0710. A copy is attached to this letter.

If you have any additional questions please do not hesitate to contact me at 516-658-0676.

Very truly yours,

A handwritten signature in black ink, appearing to read "Robert Friess". The signature is fluid and cursive, with the first name "Robert" and last name "Friess" clearly distinguishable.

Robert Friess, P.E.

President

NYSPSC ANNUAL IN-SERVICE SUBMETER TEST FORM

Please fill out this form completely. Use additional sheets if needed

Date: August, 2017
Building Property Management: Orsid Realty Corpl
Contact Name: Ben Shuman
Address: 1740 Broadway
New York, New York 10019
Telephone Number: 212-247-2603
Email Address: bshuman@orsidr.com

Name(s) of any third Party(s) conducting testing

Name: Satec Power Solutions
Address: 10 Milltown Court
Union, NJ 07083
Telephone: 908-686-9510
Email: sales@satec-global.com
Meter Type: BFM-136 Multi Family
Meter Manufacturer: Satec Power Solutions
Model: BFM-136
Class: Not Applicable

Building Address: 327 Central Park West
New York, New York 10025

Sampling Method Used:

Periodic

- a) List the number of all meters of this tupe in use for billing: 85
- b) List how many meters of this type will be excluded: 0
- c) Number of meters included in the test population: 85
- d) List the number of meters of this type to be tested: 4
- e) Indicate the general location of this meter type: Basement
- f) Describe the meter test equipment to be used: Satec test Rig
- g) Describe Your test schedule: Meter were installed 7/17 and
4 meters will be tested during the period 7/17-7/18
- h) Please provide any relevant additional information: None