

4 Design Applicant Information

Last Name **PETKANAS** First Name **EVAN** Middle Initial _____
 Business Name **STONE ENGINEERING PC** Business Phone **718-361-6708** Business Fax **718-361-6709**
 Business Address **38-70 REVIEW AVENUE** Mobile Phone **917-494-9514**
 City **LIC** State **NY** Zip **11101** E-Mail **EVAN@STONEENGINEER**
 License Number **081090** Choose One: ☒ P.E. ☐ R.A. ☐ Sign Hanger ☐ Other (specify) _____

5 Owner/Lease Holder Information

Last Name **THOMAS** First Name **ARMINA** Middle Initial _____
 Business Name **MAIDEN LANE PROPERTIES** Business Phone **516-488-3000** Business Fax _____
 Business Address **100 MAIDEN LANE** Mobile Phone _____
 City **NEW YORK** State **NY** Zip **10038** E-Mail _____

6 Design Applicant's Statements and Signatures

I hereby state the information on this form is correct and complete to the best of my knowledge. I understand falsification of any statement is a misdemeanor and punishable by a fine, imprisonment, or both. I also understand it is unlawful to give to a city employee, or for a city employee to accept, any benefit, monetary or otherwise, either as a gratuity for properly performing the job or in exchange for special consideration. Violation is punishable by imprisonment or fine or both. I understand that if I am found after hearing to have knowingly or negligently made a false statement or to have knowingly or negligently falsified or allowed to be falsified any certificate, form, signed statement, application, report or certification of the correction of a violation required under the provisions of this code or of a rule of any agency, I may be barred from filing further applications or documents with the Department.

Name (print)

EVAN PETKANAS

Signature

P.E. / R.A. Seal (apply seal, then sign and date over seal)

7 Owner's/Lease Holder's Statements and Signatures

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Name (print)

ARMINA THOMAS

Signature

Date

07/11/17

Notarization

State of New York, County of: **NASSAU**

Sworn to or affirmed under penalty of perjury

11th day of **JULY**, 2017

Notary Public Signature

Notary Seal

JENNIFER ORT**NOTARY PUBLIC-STATE OF NEW YORK****No. 01OR6158428****Qualified in Nassau County****My Commission Expires January 02, 2019****Internal Use Only**

Work Area	PW3 Cost Details Validation	Comments (May include cost guidance.)	Initials
Plan Examination:	☐ Accept Original ☐ Revised Cost Needed		
C of O:	☐ Accept Original ☐ Revised Cost Needed		
Plan Examination/C of O:	☐ Accept Revised Submission (Resolved)		