



4 Design Applicant Information

Last Name **WAPNER** First Name **DANIEL** Middle Initial _____
 Business Name **DANIEL WAPNER PE, PC** Business Phone **6466215011** Business Fax _____
 Business Address **747 TENTH AVENUE, 25 FL** Mobile Phone _____
 City **NEW YORK** State **NY** Zip **10019** E-Mail **MARGUERITECONNELLY**
 License Number **057210** Choose One: ☒ P.E. ☐ R.A. ☐ Sign Hanger ☐ Other (specify) _____

5 Owner/Lease Holder Information

Last Name **SCHNEUR** First Name **EUGENE** Middle Initial _____
 Business Name **GOOD NEIGHBOR APT HOU** Business Phone **6465027192** Business Fax _____
 Business Address **909 THIRD AVENUE 21ST FLOOR** Mobile Phone _____
 City **NEW YORK** State **NY** Zip **10022** E-Mail **MTHOMAS@ONLYLLC.C**

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)

Signature

Date

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

7 Owner's/Lease Holder's Statements and Signatures *Notary only required when submitting to obtain sign-off.*

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 is punishable by a fine or 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)

EUGENE SCHNEUR

Signature

Date

9.11.20

Notarization

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

Sworn to or affirmed under penalty of perjury

11 day of **September** 20 **20**

Notary Public Signature

K. Connolly

Notary Seal **MERRIANN CONNELLY**
 Commissioner of Deeds, City of New York
 No. 5-7515
 Cert. Filed in Richmond County
 Commission Expires on 07-01-20**21**

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)		