



Professional and Owner Certification

Please file three (3) originals

1. Professional's Certification

"I hereby state that I have exercised a professional standard of care in certifying that the filed application is complete and in accordance with applicable laws, including the rules of the Department of Buildings, as of this date. I am aware the Commissioner will rely upon the truth and accuracy of this statement. I have notified the owner that this application has been professionally certified. If an audit or other exam discloses non-compliance, I agree to notify the owner of the remedial measures that must be taken to meet legal requirements. I further realize that any misrepresentation or falsification of facts made knowingly or negligently by me, my agents or employees, or by others with my knowledge, will render me liable for legal and disciplinary action by the Department of Buildings and other appropriate authorities, including termination of participation in the professional certification program of the Department of Buildings."

Professional's Seal

018275

Professional's License No.



Professional's Signature & Date

2. Owner's Statement

"I have read and am fully aware of the applicant's above statement that this job will be professionally certified, and agree to bring into compliance any construction which is found not to comply with all applicable laws and regulations."

Owner's Signature & Date

3. Applicant's Contact Information

	Fax Numbers	Email Addresses
Applicant	(516) 939-0033	john@jwbarch.com
Owner	(718) 601-5030	gdentico@TerraceHealthCare.com
Filing Representative	(718) 533-0556	lavbdc@yahoo.com