

4 Design Applicant Information

Last Name **WEISS** First Name **SANDOR** Middle Initial _____
 Business Name **GELU DURUS MUSICA** Business Phone **718-6920800** Business Fax **718-692-1914**
 Business Address **1317 AVE J** Mobile Phone _____
 City **BROOKLYN** State **NY** Zip **11230** E-Mail **anno.mundi.architect@gm**
 License Number **014318** Choose One: ☐ P.E. ☒ R.A. ☐ Sign Hanger ☐ Other (specify) _____

5 Owner/Lease Holder Information

Last Name **BATRA** First Name **SONU** Middle Initial _____
 Business Name **Eastshore Group** Business Phone **917-445-6945** Business Fax _____
 Business Address **1407 Broadway suite 1706** Mobile Phone **917-445-6945**
 City **New York** State **NY** Zip **10023** E-Mail **sonu@eastshorellc.com**

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)

Signature

Date

Notarization

State of New York, County of **Bronx**

Sworn to or affirmed under penalty of perjury

23rd day of **August** 20 **17**

Notary Public Signature

Notary Seal

DHANRAJ BACHAN

Notary Public, State of New York

No. 01BA6318307

Qualified in Bronx County

Commission Expires 1/26/2019

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)		