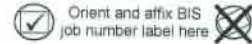




Job Number

Scan Code



1/10

4 Design Applicant InformationChoose One: ☒ P.E. ☐ R.A. ☐ Sign Hanger ☐ Other (specify) _____

License Number 050090

Last Name JUNG

First Name SHIN

Middle Initial Y

Business Name EXPERT DESIGNER DESIG

Business Phone 718-380-2695

Business Fax

Business Address 77-16 164 STREET

Mobile Phone 917-463-7241

City FRESH MEADOWS State NY

Zip 11366

E-Mail TATO77@JUNO.COM

5 Owner/Lease Holder InformationChoose One: ☒ Owner ☐ Lease Holder

Last Name orejuela

First Name CHRISTIAN

Middle Initial

Business Name

Business Phone

Business Fax

Business Address 979 ANDERSON AVENUE

Mobile Phone 917 599-6454

City BRONX

State NY

Zip 10452

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)

SHIN JUNG

Signature

Date

2-18-14

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)

CHRISTIAN OREJUELA

Signature

Date

2-18-14

Notarization

State of New York, County of

Sworn to or affirmed under penalty of perjury

18 day of FEB 20 14

Notary Public Signature

Notary Seal

M CARMELLE JEAN FRANCOIS

Notary Public - State of New York

NO. 01J6224432

Qualified in Queens County

My Commission Expires 7/6/14

Internal Use Only

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