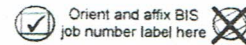




Scan Code



12/14

4 Design Applicant Information

Last Name	Farahnik	First Name	Joseph	Middle Initial	
Business Name	Joseph Farahnik Cons Engr	Business Phone	516-498-2947	Business Fax	
Business Address	54 Devon Road	Mobile Phone		E-Mail	
City	Great Neck	State	NY	Zip	11023
License Number	064632	Choose One:	☒ P.E. ☐ R.A. ☐ Sign Hanger ☐ Other (specify)		

5 Owner/Lease Holder Information

Last Name	Sari	First Name	Alexander	Middle Initial	
Business Name	6485-6495 Bdwy Apt Corp	Business Phone	646-453-5411	Business Fax	
Business Address	210 E. 23rd street 5th fl	Mobile Phone		E-Mail	
City	New York	State	NY	Zip	10010

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 is 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)

Joseph Farahnik

Signature



P.E. / R.A. Seal (apply seal over 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 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)

Alexander Sari

Signature

Date

7-24-19

Notarization

State of New York, County of:

NY

Sworn to or affirmed under penalty of perjury

24 day of July 20 19

Notary Public Signature

Notary Seal

SARAH ELIZABETH GREENBAUM
NOTARY PUBLIC, State of New York
No. 01GR6302475
Qualified in Kings County
Commission Expires May 5, 2022

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)		