



3	Cost Details <i>Required for all applications.</i>
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Categories of Work (Must match all applicable categories indicated on PW1.)

- | Category of Work* | Description of Work | Area/Units | Unit Cost (\$) | Total Cost (\$) | Work Category Total Cost (\$) |
|-------------------|-------------------------------|------------|--------------------|-----------------|-------------------------------|
| GC | CRACK BRICK REPAIR ON PARAPET | 200 SQ.F | 40/SQ.FT | | 8000.00 |
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| | | | TOTAL JOB COST: \$ | | 8000.00 |

12/14

4 Design Applicant Information

Last Name **O'CONNOR** First Name **BRIAN** Middle Initial _____
 Business Name **GREEN DESIGN ARCHITECT** Business Phone **5164768168** Business Fax _____
 Business Address **130 N WINDHORST AVENUE** Mobile Phone _____
 City **OZONE PARK** State **NY** Zip **11714** E-Mail _____
 License Number **035839** Choose One: ☐ P.E. ☒ R.A. ☐ Sign Hanger ☐ Other (specify) _____

5 Owner/Lease Holder Information

Last Name **PILLER** First Name **MOSHE** Middle Initial _____
 Business Name **N/A** Business Phone _____ Business Fax _____
 Business Address **1276 50 STREET STE# 4** Mobile Phone **7189721752**
 City **BROOKLYN** State **NY** Zip **11219** E-Mail **toby@mprealtymgmt.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)

BRIAN O'CONNOR

Signature

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

7 Owner's/Lease Holder'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 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)

MOSHE PILLER

Signature

Date

Notarization

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

Sworn to or affirmed under penalty of perjury

11th day of Oct 2019

Notary Public Signature

Notary Seal

ELIZABETH PRERO
 NOTARY PUBLIC, STATE OF NEW YORK
 Registration No. 01775234356
 Qualified in Kings County
 Commission Expires January 24, 2023

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)		