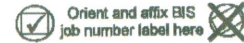




Scan Code



4 Design Applicant Information

Last Name	RUGGIERO	First Name	SANDOLO	Middle Initial	
Business Name	RUGGIERO AND ASSOCIAT	Business Phone	347-423-4323	Business Fax	
Business Address	806 149th STREET			Mobile Phone	
City	QUEENS	State	NY	Zip	11357
E-Mail					
License Number	Choose One: ☐ P.E. ☒ R.A. ☐ Sign Hanger ☐ Other (specify) _____				

5 Owner/Lease Holder Information

Last Name	ROSENBERG	First Name	ALAN	Middle Initial	
Business Name	ALROSE GROUP MANG.	Business Phone	516-984-4036	Business Fax	
Business Address	751 CONCOURSE VILLAGE WEST			Mobile Phone	
City	BRONX	State	NY	Zip	10451
E-Mail	arosenberg@alrosegroupp				

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)

SANDOLO RUGGIERO

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)

ALEN ROSENBERG

Signature

Date

Notarization

State of New York, County of:

Sworn to or affirmed under penalty of perjury

15 day of October 20 20

Notary Public Signature

Notary Seal

MARIA GONZALEZ
 NOTARY PUBLIC, State of New York
 No. 01605053878
 Qualified in Kings County
 Commission Expires Jan. 2, 22

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)		