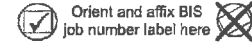




Scan Code



4 Design Applicant Information

Last Name	Dunzik	First Name	Daniel	Middle Initial	
Business Name	N/A	Business Phone	908-872-3664	Business Fax	
Business Address	370 Burnt Hill Road			Mobile Phone	
City	Skillman	State	NJ	Zip	08558
License Number	039534	Choose One:	☐ P.E. ☒ R.A. ☐ Sign Hanger ☐ Other (specify)	E-Mail	

5 Owner/Lease Holder Information

Last Name	LUNA	First Name	CRISTOPHER	Middle Initial	
Business Name		Business Phone		Business Fax	
Business Address	952 E 232nd St			Mobile Phone	
City	Bronx	State	NY	Zip	10466
E-Mail	permits@momentumsolar.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 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)

Daniel Dunzik

Signature



P.E. / R.A. Seal (only for R.A. 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)

CRISTOPHER LUNA

Signature

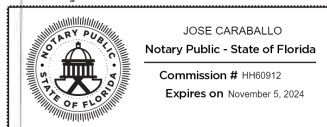
CRISTOPHER LUNA

Date 12/09/2022

Notarization
State of Florida
County of: MiamiSworn to or affirmed under penalty of perjury
9th day of December 2022

Notary Public Signature

Notary Seal



Notarized online using audio-video communication

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)		