

4 Design Applicant InformationChoose One: ☐ P.E. ☒ R.A. ☐ Sign Hanger ☐ Other (specify) _____ License Number 014318Last Name WeissFirst Name Sandor

Middle Initial _____

Business Name Gelu Durus MusicaBusiness Phone 718-692-0800Business Fax 718-692-1914Business Address 1317 Avenue

Mobile Phone _____

City BrooklynState NYZip 11230E-Mail anno.mundi.architect@gm**5 Owner/Lease Holder Information**Choose One: ☒ Owner ☐ Lease HolderLast Name NagalFirst Name Mordechai

Middle Initial _____

Business Name 1100 Park Place LLCBusiness Phone 718-493-4048

Business Fax _____

Business Address 1100 Park Place

Mobile Phone _____

City BrooklynState NYZip 11213E-Mail mmn770@optionline.net**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)

Sandor Weiss

Signature

Date

6-11-14

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)

Mordechai Nagal

Signature

Mordechai Nagal

Date

6-11-14

Notarization

State of New York, County of Queens

Signed to or affirmed under penalty of perjury

14 day of June2014

Notary Public Signature

San Vishwanath SahadeoNotary SAN VISHWANATH SAHADEO

NOTARY PUBLIC-STATE OF NEW YORK

No. 01SA6281989Qualified In Queens CountyMy Commission Expires May 13, 2017**Internal Use Only****Work Area****PW3 Cost Detail 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 Original ☐ Revised Cost Needed (solver)