

4	Design Applicant Information
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Choose One: ☐ P.E. ☐ R.A. ☐ Sign Hanger ☐ Other (specify) _____ License Number _____

 Last Name First Name Middle Initial

 Business Name Business Phone Business Fax

 Business Address Mobile Phone

 City State Zip E-Mail

5	Owner/Lease Holder Information
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Choose One: ☒ Owner ☐ Lease Holder

 Last Name Pignataro First Name Richard Middle Initial

 Business Name Business Phone Business Fax

 Business Address Mobile Phone

 City State Zip E-Mail

6	Design Applicant's Statements and Signatures
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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)

Signature

Date

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

7	Owner's/Lease Holder's Statements and Signatures <i>Notary only required when submitting to obtain Sign-off.</i>
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Name (print)

Richard Pignataro

Signature

Richard Pignataro

Date 3/11/11

Notarization

State of New York, County of: Kings

Sworn to or affirmed under penalty of perjury

11th day of March 20 11

Notary Public Signature

Brian T. Levitt

Notary Seal

BRIAN T. LEVITT

Notary Public, State of New York

No. 01LE6195188

Qualified in Suffolk County

Commission Expires Oct. 20, 2012

Internal Use Only			
Work Area	PW3 Cost Details 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 Revised Submission (Resolved)		