

DEPT.BLDGS 320759924 Job Number
SC342199023 Scan Code

4 Design Applicant InformationChoose One: ☐ P.E. ☒ R.A. ☐ Sign Hanger ☐ Other (specify) _____ License Number **026707**Last Name **RESTIVO**First Name **GEORGE**

Middle Initial _____

Business Name **RESTIVO ARCHITECT**Business Phone **718-331-1222**

Business Fax _____

Business Address **32 COURT STREET**

Mobile Phone _____

City **BROOKLYN**State **N.Y.**Zip **11201**

E-Mail _____

5 Owner/Lease Holder InformationChoose One: ☒ Owner ☐ Lease HolderLast Name **DUZAHANSKY**First Name **LEONI**

Middle Initial _____

Business Name **OWNER**Business Phone **917-941-8698**

Business Fax _____

Business Address **7515 AVE.W.**

Mobile Phone _____

City **BROOKLYN**State **N.Y.**Zip **11234**

E-Mail _____

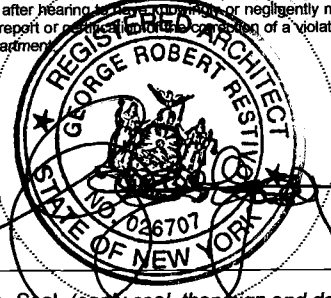
6 Design Applicant's Statements and Signatures

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)

GEORGE R. RESTIVO

Signature



7/28/14

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.*

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Name (print)

LEONI DUZAHASKY

Signature

Date

Notarization

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

Sworn to or affirmed under penalty of perjury

day of **August****20**

Notary Public Signature

Notary Seal

SHIRLEY SWIFT**Commissioner of Deeds, City of New York**

No. 2-11906

Qualified in Kings County

Commission Expires October **2014****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)		