

4 Design Applicant Information

Last Name **HUANG** First Name **XIAO** Middle Initial
 Business Name **NYX ENGINEERING, PLLC** Business Phone **9173787262** Business Fax
 Business Address **6801 NEW UTRECHT AVE** Mobile Phone **(347)853-5650**
 City **BROOKLYN** State **NY** Zip **11219** E-Mail **YGZENGINEER@GMAIL.**
 License Number **091151** Choose One: ☐ P.E. ☒ R.A. ☐ Sign Hanger ☐ Other (specify)

5 Owner/Lease Holder Information

Last Name **CHEN** First Name **JIN** Middle Initial
 Business Name **N/A** Business Phone Business Fax
 Business Address **3134 FULTON ST** Mobile Phone
 City **BROOKLYN** State **NY** Zip **11208** E-Mail **YGZHU50@GMAIL.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 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)

XIAO HUANG

Signature

Date

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

7 Owner's/Lease Holder's Statements and Signatures

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Name (print)

JIN CHEN

Signature

Jin Chen

Date

10/17/17

Notarization

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

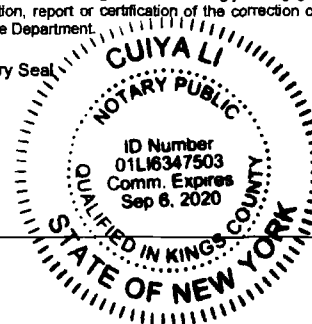
Sworn to or affirmed under penalty of perjury

17th day of October 2017

Notary Public Signature

Cuiya Li

Notary Seal

**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)		