

4 Design Applicant Information

Last Name **RUDITSER** First Name **OLEG** Middle Initial _____
 Business Name **ENGINEERING PROF. SRV** Business Phone **718-339-9116** Business Fax **718-998-6362**
 Business Address **1839 OCEAN PKWY** Mobile Phone _____
 City **BROOKLYN** State **NY** Zip **11223** E-Mail **OLEG@MEPDESIGN.NET**
 License Number _____ Choose One: ☐ P.E. ☐ R.A. ☐ Sign Hanger ☐ Other (specify) _____

5 Owner/Lease Holder Information

Last Name **SILBERSTEIN** First Name **ISAAC** Middle Initial _____
 Business Name **HART GROUP USA LLC** Business Phone **347-876-1936** Business Fax _____
 Business Address **320 ROEBLING ST #634** Mobile Phone _____
 City **BROOKLYN** State **NY** Zip **11211** E-Mail **ISAAC165@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 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)

OLEG RUDITSER

Signature

Date

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)

ISAAC SILBERSTEIN

Signature


 Date **11/14/17**

Notarization

State of New York, County of _____

Notary Seal

Sworn to or affirmed under penalty of perjury

_____ day of _____ 20____

Notary Public Signature

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)		

OK
11-15-17