

4 Design Applicant Information

Last Name	RUDITSER	First Name	OLEG	Middle Initial	
Business Name	ENGINEERING PROFES. SR	Business Phone	718-339-9116	Business Fax	718-998-6362
Business Address	1839 OCEAN PARKWAY			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	BENJAMIN	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 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.*

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Name (print)

Benjamin Silberstein

Signature

[Signature]

Date

10/3/17

Notarization

State of New York, County of

Sworn to or affirmed under penalty of perjury

day of

20

Notary Public Signature

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)		