

4 Design Applicant Information

Last Name Schaefer First Name James Middle Initial
 Business Name James Schaefer Architect Business Phone Business Fax
 Business Address 899 Union St Mobile Phone
 City Brooklyn State NY Zip 11215 E-Mail james@schaeferarchitect.
 License Number 028025 Choose One: ☐ P.E. ☒ R.A. ☐ Sign Hanger ☐ Other (specify)

5 Owner/Lease Holder Information

Last Name Gandolfo First Name Vincent Middle Initial
 Business Name 534 Court St LLC Business Phone Business Fax
 Business Address 534 Court St Mobile Phone
 City Brooklyn State NY Zip 11231 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)

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)

Vincent Gandolfo

Signature

Date

Notarization

State of New York, County of: Suffolk

Sworn to or affirmed under penalty of perjury

14th day of January 2020

Notary Public Signature

Notary Seal

Morgan Ann Sternlicht
 Notary Public, State of New York
 No. 01ST6445861
 Qualified in Suffolk County
 Commission Expires January 03, 2027

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)		