

4 Design Applicant InformationChoose One: ☒ P.E. ☒ R.A. ☐ Sign Hanger ☐ Other (specify) _____ License Number 031839Last Name CHOIFirst Name JUNGMiddle Initial HBusiness Name NIC DESIGN INC.Business Phone 718-714-7379

Business Fax _____

Business Address 7213 16 AVE

Mobile Phone _____

City BROOKLYNState NYZip 11204

E-Mail _____

5 Owner/Lease Holder InformationChoose One: ☒ Owner ☐ Lease HolderLast Name HUIFirst Name LUU

Middle Initial _____

Business Name N/A

Business Phone _____

Business Fax _____

Business Address 2727 WEST 15 STREETMobile Phone 917-312-3888City BROOKLYNState NYZip 11224E-Mail ISANDME@YAHOO.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)

JUNG H. CHOI

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)

LUU HUI

Signature

Date

Notarization

State of New York, County of:

Sworn to or affirmed under penalty of perjury

1 day of Oct 2014

Notary Public Signature

Notary Seal

KO SIU WONG
Notary Public, State of New York
No. 01WO6107198
Qualified in Kings County
Term Expires March 22, 2016

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)		