12/14

4 Design Applicant Information			
Last Name	SOSKIN	First Name	ALEXANDER
		Middle Initial	
Business Name	A&D ENGINEERING, PLLC	Business Phone	(718) 872-6122
		Business Fax	(347) 673-6290
Business Address	2613 EAST 65TH STREET		Mobile Phone
City	BROOKLYN	State	NY
		Zip	11234
		E-Mail	AD@ADNYENG.COM
License Number	083057	Choose One:	☒ P.E. ☐ R.A. ☐ Sign Hanger ☐ Other (specify) _____

5 Owner/Lease Holder Information			
Last Name	MANKIN	First Name	HOWARD
		Middle Initial	
Business Name	AARONS REALTY, LLC	Business Phone	
		Business Fax	
Business Address	USPS BOX BOX 2901		Mobile Phone
City	HUNTINGTON STA	State	NY
		Zip	11746
		E-Mail	INFO@AARONSREALTY.

6 Design Applicant's Statements and Signatures			
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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)

ALEXANDER SOSKIN

Signature



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

7 Owner's/Lease Holder's Statements and Signatures <i>Notary only required when submitting to obtain sign-off.</i>			
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Name (print)

HOWARD MANKIN

Signature

Date

8/8/18

Notarization

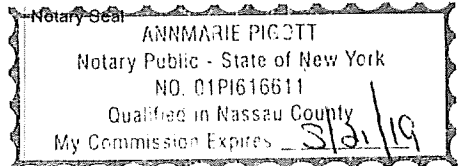
State of New York, County of Suffolk

Sworn to or affirmed under penalty of perjury

8 day of August 2018

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)		