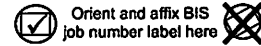




Scan Code

12/14

4 Design Applicant Information

Last Name **CHUNG** First Name **CHI WAI** Middle Initial _____
 Business Name **L&C ASSOCIATES** Business Phone **718-690-3660** Business Fax **718-228-7601**
 Business Address **36-54 MAIN ST, 2ND FLOOR** Mobile Phone _____
 City **FLUSHING** State **NY** Zip **11354** E-Mail **EFILE@LNCARCH.COM**
 License Number **098751** Choose One: ☒ P.E. ☐ R.A. ☐ Sign Hanger ☐ Other (specify) _____

5 Owner/Lease Holder Information

Last Name **PRODUN** First Name **YURIY** Middle Initial _____
 Business Name **2154 EAST 38 LLC** Business Phone **6467704630** Business Fax _____
 Business Address **4159 BEDFORD AVENUE, 1FL** Mobile Phone _____
 City **BROOKLYN** State **NY** Zip **11229** E-Mail **JPRODUN@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)

CHI WAI CHUNG

Signature



P.E. / R.A. Seal (app. must sign and date over seal)

7 Owner's/Lease Holder'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 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)

YURIY PRODUN

Signature

Date

05/06/2020

Notarization

State of New York, County of: **KINGS**

Sworn to or affirmed under penalty of perjury

6 day of **MAY** 20 **20**

Notary Public Signature

Notary Seal

STEVE ROMANENKO
 Notary Public, State of New York
 No. 01RG0242711
 Qualified in Kings County
 Commission Expires June 6, 20__

STEVE ROMANENKO
 Notary Public, State of New York
 No. 01RG0242711
 Qualified in Kings County
 Commission Expires June 6, 20__

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)		