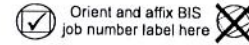




Scan Code



4 Design Applicant Information

Last Name Kosuri First Name Eshwar Middle Initial _____
 Business Name Kosuri engineering & consultin Business Phone 516-365-7400 Business Fax 516-365-2029
 Business Address 31 KNOLLS DRIVE Mobile Phone _____
 City NEW HYDE PARK State NY Zip 11040-1110 E-Mail ekosuri@kec-pc.com
 License Number 061875 Choose One: ☒ P.E. ☐ R.A. ☐ Sign Hanger ☐ Other (specify) _____

5 Owner/Lease Holder Information

Last Name TOMASSETTI First Name ROCCO Middle Initial _____
 Business Name MESEROLE STREET ASSO Business Phone 718-384-3000 Business Fax 718-384-3113
 Business Address 430 MASPETH AVENUE Mobile Phone _____
 City BROOKLYN State NY Zip 11211 E-Mail DTAMMARO@EMPIRET

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)

ESHWAR KOSURI

Signature

Date

12/9/19

P.E. / R.A. Seal (apply seal 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)

ROCCO TOMASSETTI

Signature

Date

12/10/19

Notarization

State of New York, County of: Kings

Sworn to or affirmed under penalty of perjury

19th day of December 20 19

Notary Public Signature

Dina Tammaro

Notary Seal

DINA TAMMARO
 Notary Public State of New York
 No. 01TA4806992
 Qualified in Queens County
 Commission Expires 6/30/2022

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)		