



4 Design Applicant InformationChoose One: ☐ P.E. ☒ R.A. ☐ Sign Hanger ☐ Other (specify) _____ License Number 20241Last Name CALIENDOFirst Name GERALDMiddle Initial JBusiness Name GERALD J. CALIENDO ARCBusiness Phone 718-268-9098Business Fax 718-268-9097Business Address 138-72 QUEENS BLVD.

Mobile Phone _____

City BRIARWOODState NYZip 11435

E-Mail _____

5 Owner/Lease Holder InformationChoose One: ☒ Owner ☐ Lease HolderLast Name OVADIAFirst Name EYAL

Middle Initial _____

Business Name 212-15 39TH AVENUE CORPBusiness Phone 718-776-5600

Business Fax _____

Business Address 191-15 JAMAICA AVENUE

Mobile Phone _____

City HOLLISState NYZip 11423

E-Mail _____

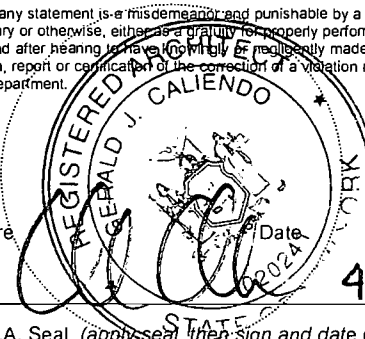
6 Design Applicant's Statements and Signatures

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)

GERALD J. CALIENDO, R.A.

Signature



Date

4-20-10

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.*

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)

EYAL OVADIA

Signature

Date

04-20-10

Notarization

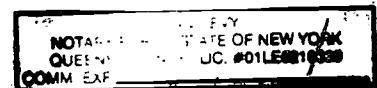
State of New York, County of:

Sworn to or affirmed under penalty of perjury

20 day of APR 20 10

Notary Public Signature

Notary Seal



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)		