

Must be typewritten.



Reason for filing cost affidavit:

- Cost information provided must be based on:**

Estimated cost of construction	Estimated cost of construction	Estimated cost of construction	Actual construction cost of completed work

1A Indicate existing document number
affected by filing: 01

House No(s) 5-17

Street Name 47TH AVENUE

Borough Queens

Block 28

Lot 18

BIN 4000051

C.B. No. 402

Cost estimates shall include total value of work per §28-112.3 of the NYC Administrative Code and shall be direct work costs based upon material and labor; work shall include all construction elements including, but not limited to, construction equipment, wall and floor finishes, built-in cabinets, and kitchen appliances. Indirect costs, including but not limited to general conditions and insurance, shall be added to direct work costs and shall be reflected in the unit costs shown. ***“Yes” or “No” must be specified for each “Category of Work” listed below.***

Categories of Work (Must match all applicable categories indicated on PW1.)

- Yes No

- ☐ ☒ Boiler (BL)
☒ ☐ Fire Alarm (FA)
☐ ☒ Fuel Burning (FB)
☐ ☒ Fuel Storage (FS)
☐ ☒ Fire Suppression (FP)
☐ ☒ Mechanical (MH)
☐ ☒ Plumbing (PL)

- Yes No

- ☐ ☒ Standpipe (SD)
☐ ☒ Sprinkler (SP)
☐ ☒ Signs (SG)
☐ ☒ Other (OT)
 ☐ Antenna (OT/ANT)
 ☐ Fire Protection Plan (OT/FPP)
 ☐ Marquee (OT/MAR)
 ☐ (Describe)

- Yes No

- ☐ ☒ General Construction (OT)
- ☐ Partial Demolition
- ☐ Non-Structural Demolition
- ☐ Structural Work
- ☐ Interior Renovation
- ☐ Exterior Renovation
- ☐ (Describe)

Category of Work*	Description of Work	Area/Units	Unit Cost (\$)	Total Cost (\$)	Work Category Total Cost (\$)
Alteration II	Fire Alarm application				1000.00
			TOTAL JOB COST: \$		1080.00

**List ALL Categories of Work specified "Yes" above. Use more than one line for Categories of Work that involve multiple unit costs. See PW3 Form Instructions for a sample of completed Section 3 Cost Details.*

4 Design Applicant Information

Last Name **PEARSON** First Name **RICHARD** Middle Initial
 Business Name **DAGHER ENGINEERING, PLLC** Business Phone **(212) 480-2591** Business Fax **(212) 480-2654**
 Business Address **29 BROADWAY** Mobile Phone () -
 City **NEW YORK** State **NY** Zip **10006** E-Mail
 License Number Choose One: ☐ P.E. ☐ R.A. ☐ Sign Hanger ☐ Other (specify) _____

5 Owner/Lease Holder Information

Last Name **O'CONNOR** First Name **WILLIAM** Middle Initial
 Business Name **OCA LIC** Business Phone **(212) 308-7700** Business Fax **(212) 546-0831**
 Business Address **535 MADISON AVENUE** Mobile Phone **(917) 535-7376**
 City **NEW YORK** State **NY** Zip **10022** E-Mail **BCARRIER@OCONNORCP.COM**

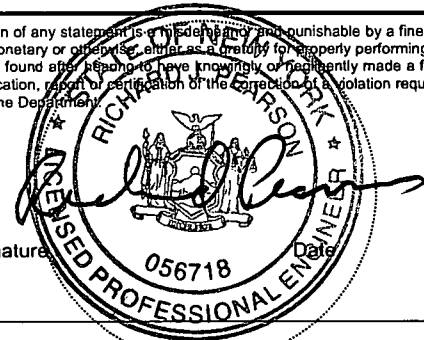
6 Design Applicant's Statements and Signatures

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)

RICHARD PEARSON

Signature



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

WILLIAM O'CONNOR

Signature

Date

3-20-2009

Notarization

State of New York, County of *New York*

Sworn to or affirmed under penalty of perjury

20th day of *March* 20 *09*

Notary Public Signature

Angela Cotrone

Notary Seal

ANGELA COTRONE
 Notary Public, State of New York
 No. 01CO6070998
 Qualified in Nassau County
 Certificate Filed in New York County
 Commission Expires March 11, 2010