

4 Design Applicant Information

Last Name	SHIN	First Name	SUNG HO	Middle Initial	
Business Name	SUNG HO SHIN ARCHITECT	Business Phone	718.428.2882	Business Fax	718.428.2872
Business Address	194-02 NORTHERN BLVE. #218			Mobile Phone	646.772.3024
City	FLUSHING	State	NY	Zip	11358
E-Mail	Archispace1@aol.com				
License Number	26846	Choose One:	☐ P.E. ☒ R.A. ☐ Sign Hanger ☐ Other (specify) _____		

5 Owner/Lease Holder Information

Last Name	FNU	First Name	RAMJI	Middle Initial	
Business Name	N/A	Business Phone	917.440.3340	Business Fax	
Business Address	247-27 89 AVE.			Mobile Phone	
City	QUEENS	State	NY	Zip	11426
E-Mail					

6 Design Applicant 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)

SUNG-HO SHIN

08/11/09

Signature

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

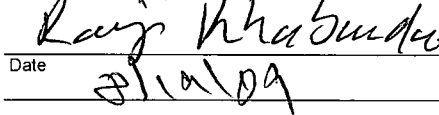
7 Owner/Lease Holder Statements and Signatures

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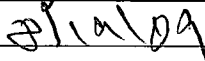
Name (print)

RAMJI KHARBANDA

Signature



Date



Notarization

State of New York, County of:

Sworn to or affirmed under penalty of perjury

19 day of AUGUST 20 09

Notary Public Signature

Notary Seal

