



PW3: Cost Affidavit

Must be typewritten.



1 Reason For Filing Required for all applications.

Reason for filing cost affidavit:

- ☒ Initial Filing 2-7
☐ Prior to Approval Actions 1A, 2-7
☐ Post Approval Amendment (PAA) 1A, 2-7
☐ To obtain Sign-off 2-3, 5, 7

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:

2 Location Information Required for all applications.

House No(s) 22-21 Street Name PARSONS BOULEVARD

Borough QUEENS Block 4635 Lot 8 BIN 4104943 C.B. No. 407

3 Cost Details Required for all applications.

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. When filing an enlargement the estimated cost should be exclusive of any work performed within the additional square footage. "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)
☐ 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 (\$)
OT DEM.	REMOVE EX. ATTIC & ROOF.	853 SF	8.00	6,824.00	
"	REMOVE EXIST'G EXT. WALL @CEL. & 1ST	78.0 LF	6.00	468.00	7,292.00
OT	NEW I BEAM @ CEL.	1 UNIT	500.00	500.00	
"	INSULATION & FINISHED EXT. @ CELLAR.	92 LF	10.00	920.00	
"	NEW DOORS @ CELLAR	1 UNIT	480.00 EA	480.00	
"	NEW WINDOWS	16 UNIT	480.00 EA	7,680.00	
"	METER RELOCATION	1 UNIT	1,500.00	1,500.00	
"	RE-INSULATE & FINISHED EXT. WALL @ 1ST	66.0 LF	10.00	660.00	11,740.00
PL	REMOVE PLUMBING FIXTURES	12 UNIT	300.00 EA	3,600.00	
"	NEW PLUMBING FIXTURES @ CELLAR	5 UNIT	1,500.00	7,500.00	11,100.00
OT	NEW FEE ADJUSTED AS PER PREFILER	1	85,868.0	85,868.0	85,868.0
	ESTIMATED COST				
OT	NEW FEE ADJUSTED TO CHANGE EXIST'G				
	WALL FROM STUCCO TO BRICK VENEER	531 SF	8.25	4,381.0	4,381.0
NOTE:	ADDITIONAL GROSS F.A. IS NOT PART OF				
	PW-3 COST. See PW-1				
				TOTAL JOB COST: \$	120,381.00

*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. For enlargements, only items associated with work performed in the existing area should be listed.

4 Design Applicant Information

Choose One: ☐ P.E. ☒ R.A. ☐ Sign Hanger ☐ Other (specify) _____ License Number 024104

Last Name LONGO First Name GINO Middle Initial O

Business Name GINO O. LONGO R.A. Business Phone 718-445-5663 Business Fax 718-445-7506

Business Address COLLEGE POINT Mobile Phone _____

City BRONX State NY Zip 1064 E-Mail LONGOIA@AOL.COM

5 Owner/Lease Holder Information

Choose One: ☒ Owner ☐ Lease Holder

Last Name PEZZINO First Name NELY Middle Initial _____

Business Name OWNER Business Phone _____ Business Fax 917-293-9121

Business Address 22-21 PARSONS BOULEVARD Mobile Phone _____

City QUEENS State NY Zip 11357 E-Mail _____

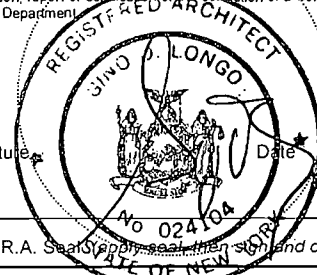
6 Design Applicant's Statements and Signatures

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)

GINO O. LONGO

Signature

Date SEP 27 2011

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)

NELY PEZZINO

Signature

Date

9/2/2011

Notarization

State of New York, County of: Queens

Sworn to or affirmed under penalty of perjury

2 day of Sept, 20 11

Notary Public Signature

Notary Seal

Joseph Longo
Notary Public, State of New York
 No. 01L06141010
 Certified in Queens County
 Commission Expires Feb 15, 2013

Internal Use Only			
Work Area	PW3 Cost Details Validation	Comments (May include cost guidance.)	Initials
Pre-Filing:	☒ Accept Original ☐ Revised Cost Needed	<u>Revised Est Cost</u>	<u>RS/7</u>
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)		