



PW3: Cost Affidavit
Must be typewritten



1 Reason For Filing Required for all applications

- Reason for filing cost affidavit. Cost information provided must be based on 1A Indicate existing document number affected by filing
- ☐ Initial Filing 2-7 Estimated cost of construction
- ☐ Prior to Approval Actions 1A 2-7 Estimated cost of construction
- ☐ Post Approval Amendment (PAA) 1A 2-7 Estimated cost of construction
- ☒ To obtain Sign-off 2-3, 5-7 Actual construction cost of completed work

2 Location Information Required for all applications

House No. 3-39 Street Name ELDERT LANE

Borough QUEENS Block 8995 Lot 138 BIN 4186712 C B No 409

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)

- | | | |
|---|--|--|
| <p>Yes No</p> <p>☐ ☒ Boiler (BL)</p> <p>☐ ☒ Fire Alarm (FA)</p> <p>☐ ☒ Fuel Burning (FB)</p> <p>☐ ☒ Fuel Storage (FS)</p> <p>☐ ☒ Fire Suppression (FP)</p> <p>☐ ☒ Mechanical (MH)</p> <p>☒ ☐ Plumbing (PL)</p> | <p>Yes No</p> <p>☐ ☒ Standpipe (SD)</p> <p>☐ ☒ Sprinkler (SP)</p> <p>☐ ☒ Signs (SG)</p> <p>☒ ☐ Other (OT)</p> <p>☐ Antenna (OT/ANT)</p> <p>☐ Marquee (OT/MAR)</p> <p>☐ (Describe) _____</p> | <p>Yes No</p> <p>☒ ☐ General Construction (OT)</p> <p>☒ Partial Demolition</p> <p>☒ Non-Structural Demolition</p> <p>☒ Structural Work</p> <p>☒ Interior Renovation</p> <p>☒ Exterior Renovation</p> <p>☐ (Describe) _____</p> |
|---|--|--|

Category of Work*	Description of Work	Area/Units	Unit Cost (\$)	Total Cost (\$)	Work Category Total Cost (\$)
PLUMBING	KITCHEN SINK, STOVE, KITCHEN CABINETS	2 1	3500 13,000	3500 13,000	7,000 13,000
OT	GENERAL INTERIOR RENOVATION REPLACE WOOD FLOORS, NEW INTERIOR DOORS, COMPLETE HOUSE PAINT, COMPLETE FINISHES				70,000
OT	REAR HORIZONTAL ENLARGMENT 175 SF APPROX	175 SF	\$83	PER SF	14,600
OT	PARTIAL DEMO	120 SF	\$45	5,400	5,400
TOTAL JOB COST: \$					110,000

*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 InformationChoose One: ☒ P E ☐ R A ☐ Sign Hanger ☐ Other (specify) _____ License Number **050090**Last Name **JUNG**First Name **SHIN**Middle Initial **Y**Business Name **EXPERT DESIGNER DESIG** Business Phone **718-380-2695**

Business Fax _____

Business Address **77-16 164 STREET**Mobile Phone **917-463-7241**City **FRESH MEADOWS** State **NY**Zip **11366**E-Mail **TATO77@JUNO.COM****5 Owner/Lease Holder Information**Choose One: ☒ Owner ☐ Lease HolderLast Name **CHRISTIAN**First Name **OREJUELA**

Middle Initial _____

Business Name **NONE**

Business Phone _____

Business Fax _____

Business Address **42-30 77 STREET**Mobile Phone **917-463-7241**City **QUEENS**State **NY**Zip **11373**

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 or 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)

SHIN JUNG

Signature

Date

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)

CHRISTIAN OREJUELA

Signature

Date

Notarization

State of New York, County of **Queens**

Sworn to or affirmed under penalty of perjury

31st day of **December**, 20 **13**

Notary Public Signature

Notary Seal

JOSEPH LUNA
 NOTARY PUBLIC-STATE OF NEW YORK
 No. 01106191660
 Qualified in Queens County
 My Commission Expires August 18, 2016

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)		