

4 Design Applicant Information

Last Name Maron First Name David Middle Initial L
 Business Name David L Lloyd Maron, Architect Business Phone 212-889-1480 Business Fax 212-889-2518
 Business Address 130 Madison Ave Mobile Phone _____
 City New York State New York Zip 10016 E-Mail dmaron@verizon.net
 License Number 010701 Choose One: ☐ P.E. ☒ R.A. ☐ Sign Hanger ☐ Other (specify) _____

5 Owner/Lease Holder Information

Last Name Thompson First Name Jeffery Middle Initial S
 Business Name Amity Baptist Church Business Phone 718-739-8278 Business Fax _____
 Business Address 184-18 108th Avenue Mobile Phone _____
 City Jamaica State New York Zip 11433 E-Mail pastorjst@me.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 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)

David L. Maron

Signature

[Signature] Date 8-10-15
 P.E. / R.A. Seal (apply seal when 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)

Jeffery S. Thompson

Signature

[Signature]

Date

8/22/15

Notarization

State of New York, County of Nassau

Sworn to or affirmed under penalty of perjury

22nd day of August 20 15

Notary Public Signature

[Signature]

Notary Seal

BARBARA PRIMM
 Notary Public, State of New York
 No. 4964390
 Qualified in Nassau County
 Commission Expires 4/2/18

Internal Use Only

Work Area	PW3 Cost Details Validation	Comments (May include cost guidance.)	Initials
Plan Examination:	☐ Accept Original ☐ Revised Cost Needed		
C of O:	☐ Accept Original ☐ Revised Cost Needed		
Plan Examination/C of O:	☐ Accept Revised Submission (Resolved)		