

4 Design Applicant Information

Last Name **EKWANEEN** First Name **ZIAD** Middle Initial _____
 Business Name **AA BUILDING AND INSPECT** Business Phone **9172808317** Business Fax _____
 Business Address **86-25 SHORE PARKWAY** Mobile Phone _____
 City **HOWARD BEACH** State **NY** Zip **11414** E-Mail **DOB.HUB@GMAIL.COM**
 License Number **090429** Choose One: ☒ P.E. ☐ R.A. ☐ Sign Hanger ☐ Other (specify) _____

5 Owner/Lease Holder Information

Last Name **SINGH** First Name **SURINDER** Middle Initial _____
 Business Name **N/A** Business Phone _____ Business Fax _____
 Business Address **8215 232 STREET** Mobile Phone **347-656-3583**
 City **QUEENS VILLAGE** State **NY** Zip **11427** 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 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)

ZIAD EKWANEEN, P.E

Signature

P.E. / R.A. Seal (print, sign and date over seal)

7 Owner's/Lease Holder's Statements and Signatures

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Name (print)

SURINDER SINGH

Signature

Surinder Singh
 Date

Notarization

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

Sworn to or affirmed under penalty of perjury

5thday of **FEBRUARY** 2016

Notary Public Signature

Notary Seal



VENESSA SAMMY
 Notary Public, State of New York
 No. 01SA6195535
 Qualified in Queens County
 Commission Expires February 20, 2017

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)		