

4 Design Applicant Information

Last Name **GORDON** First Name **WARREN** Middle Initial _____
 Business Name **PROF. ENGINEER SVS** Business Phone _____ Business Fax _____
 Business Address **1066 EAST 233 STREET** Mobile Phone **347759-8366**
 City **BRONX** State **NY** Zip **10466** E-Mail **ABGAJ2002@YAHOO.C**
 License Number **070452** Choose One: ☒ P.E. ☐ R.A. ☐ Sign Hanger ☐ Other (specify) _____

5 Owner/Lease Holder Information

Last Name **UNDERDUE** First Name **EUGENE** Middle Initial _____
 Business Name **N/A** Business Phone _____ Business Fax _____
 Business Address **169-21 118 AVENUE** Mobile Phone _____
 City **JAMAICA** State **NY** Zip **11434** 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)

WARREN GORDON

Signature

Date

P.E. / R.A. Seal (affix original seal and date over seal)

7 Owner's/Lease Holder's Statements and Signatures Notary only required when submitting to obtain sign-off.

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Name (print)

EUGENE UNDERDUE

Signature

Date

Eugene Underdue
 5/30/2017

Notarization

State of New York, County of _____

Sworn to or affirmed under penalty of perjury

day of _____

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Notary Public Signature

Notary Seal

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)		