

4 Design Applicant Information

Last Name Sena First Name Vincent Middle Initial J
 Business Name Vincent J. Sena Business Phone 516 328-8780 Business Fax _____
 Business Address 29 Vassar St Mobile Phone 516 816-8832
 City Garden City State NY Zip 11530 E-Mail vjsarch29@gmail.com
 License Number 013300 Choose One: ☐ P.E. ☒ R.A. ☐ Sign Hanger ☐ Other (specify) _____

5 Owner/Lease Holder Information

Last Name Taitelbaum First Name Solomon Middle Initial _____
 Business Name N/A Business Phone 917 282-2802 Business Fax _____
 Business Address 1328 Virginia St Mobile Phone _____
 City Far Rockaway State NY Zip 11691 E-Mail pkrdam@verizon.net

6 Design Applicant's Statements and Signatures

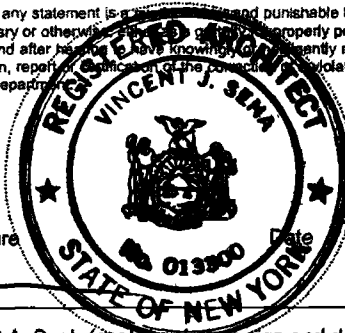
I hereby state the information on this form is correct and complete to the best of my knowledge. I understand falsification of any statement is a misdemeanor and punishable by a fine, imprisonment, or both. I also understand it is unlawful to give to a city employee, or for a city employee to accept, any benefit, monetary or otherwise, 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)

Vincent J. Sena

Signature

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



4-25-18

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)

Solomon Taitelbaum

Notarization

State of New York, County of:

Notary Seal

Signature

Date

4/23/18

Sworn to or affirmed under penalty of perjury

23 day of April 20 18

Notary Public Signature

S. Lazar

STEVEN LAZAR
 NOTARY PUBLIC-STATE OF NEW YORK

No. 02LA6298012

Qualified in Nassau County

My Commission Expires March 10, 2018

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