

4 Design Applicant Information

Last Name **QUATELA** First Name **FRANK** Middle Initial _____
 Business Name **Frank J Quatela Architects PC** Business Phone **718-886-1600** Business Fax _____
 Business Address **36-07 169 STREET** Mobile Phone _____
 City **FLUSHING** State **NY** Zip **11358** E-Mail **frank@quatela-architects.**
 License Number **032981** Choose One: ☐ P.E. ☒ R.A. ☐ Sign Hanger ☐ Other (specify) _____

5 Owner/Lease Holder Information

Last Name **HENI** First Name **ANNE** Middle Initial _____
 Business Name **41-16 49th STREET LLC** Business Phone **(917)-517-9406** Business Fax _____
 Business Address **53-42 METROPOLITAN AVENUE** Mobile Phone _____
 City **RIDGEWOOD** State **NY** Zip **11385** E-Mail **4116LLC@GMAIL.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)

FRANK J QUATELA

Signature

P.E. / R.A. Seal  (Sign 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)

Anne Heni

Signature

Date

7-19-19

Notarization

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

Sworn to or affirmed under penalty of perjury

19 day of **JULY** 20 **19**

Notary Public Signature

Notary Seal

JACK G. CALIENDO
 Notary Public, State of New York
 No. 01CA5077263
 Qualified in Queens County
 Commission Expires May 19, 20 **23**

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)		