

4 Design Applicant Information

Last Name **KIM** First Name **ILJOONG** Middle Initial
 Business Name **CHOI DESIGN** Business Phone **(718)460-6800** Business Fax **(718)460-6803**
 Business Address **141-47 NORTHERN BLVD** Mobile Phone
 City **FLUSHING** State **NY** Zip **11354** E-Mail **info@choidesigncon.com**
 License Number **032567** Choose One: ☐ P.E. ☒ R.A. ☐ Sign Hanger ☐ Other (specify)

5 Owner/Lease Holder Information

Last Name **PARK** First Name **KYONG** Middle Initial
 Business Name **N/A** Business Phone **(646)512-4331** Business Fax
 Business Address **68-39 INGRAM ST.** Mobile Phone
 City **FOREST HILLS** State **NY** Zip **11375** E-Mail **N/A**

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)

ILJOONG KIM

Signature



Date

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

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

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Name (print)

KYONG I. PARK

Signature

Date

Notarization

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

Sworn to or affirmed under penalty of perjury

19th day of **March** 20 **18**

Notary Public Signature

Notary Seal

DANIEL CHON

NOTARY PUBLIC-STATE OF NEW YORK

NO. 01CH6110170

QUALIFIED IN NASSAU COUNTY

MY COMMISSION EXPIRES 05-24-2020

Internal Use Only			
Work Area	PW3 Cost Details Validation		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)		
Comments (May include cost guidance.)			