12/14

4 Design Applicant Information

Last Name **Caliendo** First Name **Gerald** Middle Initial **J**
 Business Name **Gerald J Caliendo RA PC** Business Phone **7182689098** Business Fax
 Business Address **138-72 Queens Blvd** Mobile Phone
 City **Briarwood** State **NY** Zip **11435** E-Mail **info@caliendoarchitects.c**
 License Number **020241** Choose One: ☐ P.E. ☒ R.A. ☐ Sign Hanger ☐ Other (specify)

5 Owner/Lease Holder Information

Last Name **NACLERIO** First Name **MICHAEL** Middle Initial
 Business Name **COUNTRY LINCOLN MERC** Business Phone **(718)657-8888** Business Fax
 Business Address **139-48 QUEENS BLVD** Mobile Phone
 City **QUEENS** State **NY** Zip **11435** E-Mail **MIKE@FORDOFQUEEN**

6 Design Applicant's Statements and Signatures

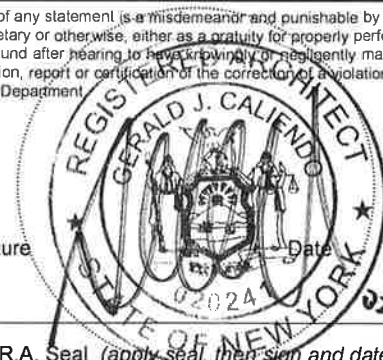
I hereby state the information on this form is correct and complete to the best of my knowledge. I understand falsification of any statement is a misdemeanor and punishable by a fine, imprisonment, or both. I also understand it is unlawful to give to a city employee, or for a city employee to accept,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

Gerald J. Caliendo, RA

Signature

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

**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)

MICHAEL NACLERIO

Signature

Date

Notarization

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

Sworn to or affirmed under penalty of perjury

02 day of **February** 20**21**

Notary Public Signature

Notary Seal

DHANRAJ BACHAN
 Notary Public, State of New York
 No. 01-BA6318307
 Qualified in Westchester County
 Commission Expires Jan. 26, 2023

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)		