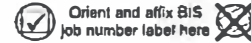




Scan Code



3	Cost Details <i>Required for all applications.</i>
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Categories of Work (Must match all applicable categories indicated on PW1.)

Yes	No		Yes	No		Yes	No	
☐	☒	Boiler (BL)	☐	☒	Standpipe (SD)	☒	☐	General Construction (OT)
☐	☒	Fire Alarm (FA)	☐	☒	Sprinkler (SP)		☒	Partial Demolition
☐	☒	Fuel Burning (FB)	☐	☒	Signs (SG)		☐	Non-Structural Demolition
☐	☒	Fuel Storage (FS)	☐	☒	Other (OT)		☒	Structural Work
☐	☒	Fire Suppression (FP)		☐	Antenna (OT/ANT)		☒	Interior Renovation
☒	☐	Mechanical (MH)		☐	Marquee (OT/MAR)		☒	Exterior Renovation
☒	☐	Plumbing (PL)		☐	(Describe) _____		☐	(Describe) _____

Category of Work*	Description of Work	Area/Units	Unit Cost (\$)	Total Cost (\$)	Work Category Total Cost (\$)
OT	elevation of one story house and renovation				512,920.56
PL	extension of sanitary and gas piping				6,000
MH	renovation of mechanical equipment				6,000
			TOTAL JOB COST: \$ 524,920.56		

1/10

4 Design Applicant InformationChoose One: ☒ P.E. ☐ R.A. ☐ Sign Hanger ☐ Other (specify) _____ License Number 071020Last Name Mawhirter First Name Bruce Middle Initial _____Business Name Hirani Engineering and Land Business Phone 516-248-1010 Business Fax _____Business Address 30 Jericho Executive Plaza, 200C Mobile Phone _____City Jericho State NY Zip 11753 E-Mail _____**5 Owner/Lease Holder Information**Choose One: ☒ Owner ☐ Lease HolderLast Name FREEMAN First Name JESSIE Middle Initial _____Business Name N/A Business Phone _____ Business Fax _____Business Address 631 BEACH 66 STREET Mobile Phone (718) 208-3104City ARVERNE State NY Zip 11692 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 is 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)

Bruce Mawhirter

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)

JESSIE FREEMAN

Signature

Date

Notarization

State of New York, County of:

Sworn to or affirmed under penalty of perjury

day of 20

Notary Public Signature

Notary Seal

Internal Use Only

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