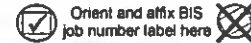




Scan Code

12/14

4	Design Applicant Information			
Last Name HUANG		First Name ELAINE	Middle Initial A	
Business Name EAH Structural Consulting		Business Phone 978-406-8921	Business Fax	
Business Address 35 Kendall Court		Mobile Phone		
City Bedford	State MA	Zip 01730	E-Mail elaine@eahstructural.com	
License Number 090605	Choose One: ☒ P.E. ☐ R.A. ☐ Sign Hanger ☐ Other (specify) _____			

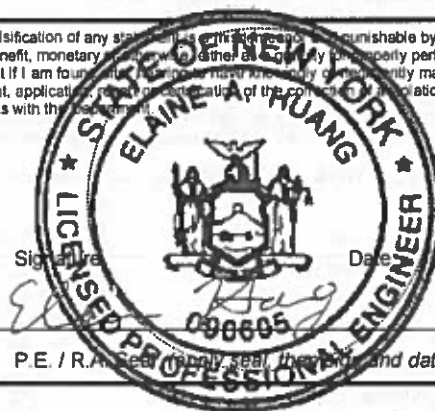
5	Owner/Lease Holder Information			
Last Name WITHERSPOON		First Name DANIEL	Middle Initial	
Business Name		Business Phone	Business Fax	
Business Address 442 BEACH 44TH STREET		Mobile Phone		
City QUEENS	State NY	Zip 11691	E-Mail	

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)

Elaine A. Huang



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

7	Owner's/Lease Holder'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 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)

DANIEL WITHERSPOON

Signature

Date

4-19-16

Notarization

State of New York, County of:

Sworn to or affirmed under penalty of perjury

16th day of April 2016

Notary Public Signature

Notary Seal **KENNETH VENETIAN****NOTARY PUBLIC-STATE OF NEW YORK****No. 01VE6162998****Qualified in Richmond County****My Commission Expires March 19, 2019**

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)		