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4 Design Applicant Information

Last Name **MARTARELLA III** First Name **FRANK** Middle Initial
 Business Name **Think Design Architecture** Business Phone **(718) 987-3729** Business Fax **(718) 987-4397**
 Business Address **101 VICTORY BLVD.** Mobile Phone
 City **STATEN ISLAND** State **NY** Zip **10301** E-Mail **frank@thinkdesignarch.co**
 License Number **033343** Choose One: ☐ P.E. ☒ R.A. ☐ Sign Hanger ☐ Other (specify)

5 Owner/Lease Holder Information

Last Name **METTLE** First Name **JOSH** Middle Initial
 Business Name **Micro Center Corporation** Business Phone Business Fax
 Business Address **71-43 KISSENA BLVD.** Mobile Phone
 City **QUEENS** State **NY** Zip **11367** E-Mail **retail-billing-145@microce**

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 MARTARELLA III

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)

JOSH METTLE

Signature

Date

Notarization **Ohio**State of **New York**, County of: **Franklin**

Sworn to or affirmed under penalty of perjury

23rd day of **April** 20**19**

Notary Public Signature

Terrie A. Lewis

Notary Seal

TERRIE A. LEWIS
 NOTARY PUBLIC • STATE OF OHIO
 Recorded in Madison County
 My commission expires Feb. 4, 2022

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