



Scan Code

440560037

4 Design Applicant Information

Last Name **ABDULLA** First Name **WALID** Middle Initial **F**
 Business Name **PARKER AND WEST ENG** Business Phone **917-251-0319** Business Fax
 Business Address **1425 PARKER ST** Mobile Phone
 City **BRONX** State **NY** Zip **10462** E-Mail **PARKERWESTENG@GMAIL.COM**
 License Number **094110** Choose One: ☒ P.E. ☐ R.A. ☐ Sign Hanger ☐ Other (specify) _____

5 Owner/Lease Holder Information

Last Name **Zhang** First Name **Helen** Middle Initial
 Business Name **N/A** Business Phone Business Fax
 Business Address **48-16 Overbrook St** Mobile Phone **(718) 687-3618**
 City **QUEENS** State **NY** Zip **11362** E-Mail **jing.hui6140@yahoo+**

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)

WALID ABDULLA P.E.

Signature

Date

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)

Helen Zhang

Signature

Date

Notarization

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

Sworn to or affirmed under penalty of perjury

27 day of **September** 20 **19**

Notary Public Signature

Notary Seal **JENNIFER ANN MAHER**
 Notary Public - State of New York
 NO. 01MA6376470
 Qualified in Nassau County
 My Commission Expires Jun 11, 2022

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)		