



4 Design Applicant Information

Last Name Abdulla First Name Walid Middle Initial
 Business Name Parker and West Engineering, LLC Business Phone 917-251-0319 Business Fax
 Business Address 1425 Parker Mobile Phone
 Street City Bronx State NY Zip 10462 E-Mail info@parkerwesteng.com
 License Number 94110 Choose One: ☒ P.E. ☐ R.A. ☐ Sign Hanger ☐ Other (specify) _____

5 Owner/Lease Holder Information

Last Name Cruz First Name Ismael Middle Initial
 Business Name N/A Business Phone (917) 202-4126 Business Fax
 Business Address 114-18 146 STREET Mobile Phone
 City Queens State NY Zip 11436 E-Mail DOB@sunpowerbyventure.com

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)

WALID ABDULLA

Signature

Date

2/13/2020

P.E. / R.A. Seal (only Seal, 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)

Ismael Cruz

Signature

I 48

Date

2/13/2020

Notarization

State of New York, County of: New York

Sworn to or affirmed under penalty of perjury

13 day of Feb 20 20

Notary Public Signature

[Signature]

Notary Seal

ILLONA AGAPOVA
 NOTARY PUBLIC, STATE OF NEW YORK
 NO 01AG6277583
 QUALIFIED IN NEW YORK COUNTY
 COMMISSION EXPIRES 03/11/2021

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)		