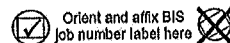
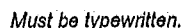




Scan Code



Borough Queens Block Lot 30 BIN 4122757 C.B. No. 407

Cost estimates shall include total value of work proposed per § 28-112.3 of the NYC Administrative Code and shall be direct work costs based upon material, equipment and labor; work shall include all construction elements including, but not limited to, construction equipment, wall and floor finishes, built-in cabinets, and kitchen appliances. Indirect costs, including but not limited to general conditions, insurance, and an allowance for profit and overhead shall be added to direct work costs and shall be reflected in the unit costs shown. If in the opinion of the Department, the valuation is underestimated on the application, the permit shall be denied, unless the applicant can show detailed estimates to meet the approval of the Department. The initial, amended and final building permit valuation shall be set by the department. ***"Yes" or "No" must be specified for each "Category of Work" listed below.***

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)	☐	☐ Fire Protection Plan (OT/FPP)	☐	☐ Exterior Renovation
☐	☒ Plumbing (PL)	☐	☐ Marquee (OT/MAR)	☐	☐ (Describe) _____
		☒	☐ (Describe) Solar (Tax Abate)		

Category of Work*	Description of Work	Area/Units	Unit Cost (\$)	Total Cost (\$)	Work Category Total Cost (\$)
OT	Labor			\$18,654	\$18,654
OT	Material			\$12,140	\$12,140
OT	Equipment			\$28,328	\$28,328
			TOTAL JOB COST: \$		\$59,123

**List ALL Categories of Work specified "Yes" above. Use more than one line for Categories of Work that involve multiple unit costs. See PW3 Form Instructions for a sample of completed Section 3 Cost Details.*

4 Design Applicant Information			
Last Name Sachs		First Name Gregory	
Business Name EmPower CES LLC		Business Phone 516-837-3459	
Business Address 221 Long Beach Road		Business Fax 516-706-1789	
City Island Park		State NY	
Zip 11558		Mobile Phone	
License Number 084531		E-Mail permitting@empower-sola	
Choose One: ☒ P.E. ☐ R.A. ☐ Sign Hanger ☐ Other (specify)			
5 Owner/Lease Holder Information			
Last Name Yong		First Name Vincent	
Business Name N/A		Business Phone (347) 804-4884	
Business Address 43-19 170th St		Business Fax	
City Flushing		State NY	
Zip 11358		Mobile Phone	
E-Mail vince.w.yong@gmail.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 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)

Gregory D. Sachs

Signature

Date

10/20/20

P.E. / R.A. Seal (Apply seal over sign and date over seal)

7 Owner's/Lease Holder's Statements and Signatures <i>Notary only required when submitting to obtain sign-off.</i>

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)

Vincent Yong

Signature

Date

2/21/22

Notarization

State of New York, County of: Nassau

Sworn to or affirmed under penalty of perjury

21 day of February 2022

Notary Public Signature

Notary Seal

Ryan M. Moser

NOTARY PUBLIC, STATE OF NEW YORK

Registration No. 01MO6412506

Qualified in Nassau County

Commission Expires December 28, 2024

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