

4 Design Applicant Information

Last Name Ananthakrishnan First Name Malathi Middle Initial _____
 Business Name Synergic Design Architects Business Phone 908-429-7707 Business Fax 908-464-6369
 Business Address 31 Dorr Rd. Mobile Phone 908-875-7221
 City Providence State NJ Zip 07974 E-Mail malathi@synergicdesign.com
 License Number _____ Choose One: ☐ P.E. ☒ R.A. ☐ Sign Hanger ☐ Other (specify) _____

5 Owner/Lease Holder Information

Last Name Lin First Name Xiu Juan Middle Initial _____
 Business Name Xiu Juan Lin Business Phone _____ Business Fax _____
 Business Address 43-67 159th Street Mobile Phone _____
 City Queens State NY Zip 11358 E-Mail _____

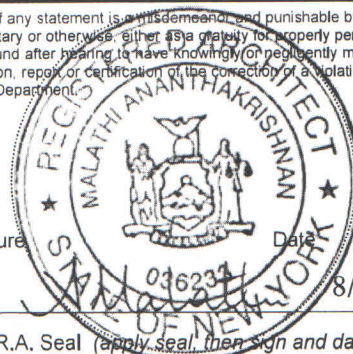
6 Design Applicant's Statements and Signatures

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 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)

Malathi Ananthakrishnan

Signature



8/26/2021

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)

Xiu Juan Lin

Signature

Date 5/17/2023

Notarization

State of New Jersey, County of: Morris

Sworn to or affirmed under penalty of perjury

17 day of May 20 23

Notary Public Signature

Notary Seal

YUTONG WANG
 NOTARY PUBLIC
 STATE OF NEW JERSEY
 MY COMMISSION #50127276
 COMMISSION EXPIRES MAY 11 2025

	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)			