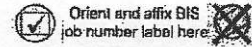




Scan Code



3	Cost Details Required for all applications.
---	--

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) SOLAR |
| | | | ☐ | ☐ | (Describe) | | | |

[illegible]

12/14

4 Design Applicant Information

Last Name **BOJCUN** First Name **IHOR** Middle Initial _____
 Business Name **TRINITY SOLAR** Business Phone **631-319-7233** Business Fax _____
 Business Address **2180 FIFTH AVENUE, UNIT 1** Mobile Phone _____
 City **RONKONKOMA** State **NY** Zip **11779** E-Mail **ihor.bojcun@trinity-solar.c**
 License Number **095675** Choose One: ☒ P.E. ☐ R.A. ☐ Sign Hanger ☐ Other (specify) _____

5 Owner/Lease Holder Information

Last Name **Liang** First Name **Yulong** Middle Initial _____
 Business Name _____ Business Phone _____ Business Fax _____
 Business Address **5011 189th Street** Mobile Phone **(917) 754-6994**
 City **Fresh Meadows** State **NY** Zip **11365** E-Mail **emilyho@jopfamily.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)

IHOR BOJCUN

Signature

Date

8/17/22

P.E. / R.A. Seal (apply seal over signature and date over seal)

7 Owner's/Lease Holder'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 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)

Yulong Liang

Signature

Date

08/11/2022

Notarization

State of New York, County of **Queens**

Sworn to or affirmed under penalty of perjury

11 day of August 20 22

Notary Public Signature

M. Casado

Notary Seal

Marie Casado
 Notary Public, State of New York
 Reg. No. 01CA6427091
 Qualified in Orange County
 Commission Expires December 20, 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)		