

Last Name Makar		First Name Mina		Middle Initial
Business Name N/A		Business Phone 732-902-6224		Business Fax
Business Address 2 Starview Dr		Mobile Phone		
City Hillsborough		State NJ	Zip 08844	E-Mail mmakar@momentumsolar.com
License Number 104468	Choose One: ☒ P.E. ☐ R.A. ☐ Sign Hanger ☐ Other (specify) _____			

Last Name KAUR		First Name JAGDISH		Middle Initial
Business Name		Business Phone		Business Fax
Business Address 8237 249TH ST		Mobile Phone		
City JAMAICA		State NY	Zip 11426	E-Mail

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)

Mina Makar

Signature



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

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)
JAGDISH KAURNotarization
State of Texas, County of: Dallas

Notary Seal

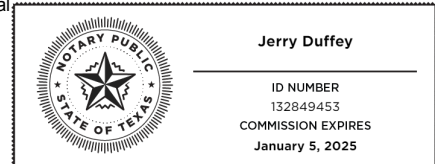
Signature

Jagdish Kaur

Sworn to or affirmed under penalty of perjury
Personally appeared before me Jagdish Kaur
23rd day of February 2023Date
2/23/23

Notary Public Signature

Jerry Duffey



Notarized online using audio-video communication

Plan Examination:	☐ Accept Original ☐ Revised Cost Needed	(May include cost guidance.)	
C of O:	☐ Accept Original ☐ Revised Cost Needed		
Plan Examination/C of O:	☐ Accept Revised Submission (Resolved)		