



PW3: Cost Affidavit

Must be typewritten.

☒ Orient and affix BIS job number label here ☒

1 Reason For Filing Required for all applications.

Reason for filing cost affidavit: ☐ Initial Filing 2-7 ☐ Prior to Approval Actions 1A, 2-7 ☒ Post Approval Amendment (PAA) 1A, 2-7 ☐ To obtain Sign-off 2-3, 5, 7	Cost information provided must be based on: Estimated cost of construction Estimated cost of construction Estimated cost of construction Actual construction cost of completed work	1A Indicate existing document number affected by filing: 01
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2 Location Information Required for all applications.

House No(s) 97	Street Name Lortel Avenue
Borough Richmond	Block 694 Lot 479 BIN 5017454 C.B. No. 502

3 Cost Details Required for all applications.

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 ☐ ☒ Boiler (BL) ☐ ☒ Fire Alarm (FA) ☐ ☒ Fuel Burning (FB) ☐ ☒ Fuel Storage (FS) ☐ ☒ Fire Suppression (FP) ☐ ☒ Mechanical (MH) ☒ ☐ Plumbing (PL)	Yes No ☐ ☒ Standpipe (SD) ☐ ☒ Sprinkler (SP) ☐ ☒ Signs (SG) ☐ ☒ Other (OT) ☐ Antenna (OT/ANT) ☐ Fire Protection Plan (OT/FPP) ☐ Marquee (OT/MAR) ☐ (Describe) _____	Yes No ☒ ☐ General Construction (OT) ☐ Partial Demolition ☐ Non-Structural Demolition ☒ Structural Work ☒ Interior Renovation ☒ Exterior Renovation ☐ (Describe) _____
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Category of Work*	Description of Work	Area/Units	Unit Cost (\$)	Total Cost (\$)	Work Category Total Cost (\$)
PL	Install of (2) new bathrooms at 2 floor	2	5,000.00	10,000.00	10,000.00
OT	Second floor addition and first floor wood deck plus interior renovation	386	77.72	30,000.00	30,000.00
TOTAL JOB COST: \$				40,000.00	

*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 Kolaro First Name Rejep Middle Initial _____
 Business Name SanArk Consulting Engring. Business Phone 718-819-7589 Business Fax 646-810-0006
 Business Address 70 Van Duzer Street Mobile Phone _____
 City Staten Island State NY Zip 10301 E-Mail rk.sanark.info@gmail.com
 License Number 093402 Choose One: ☒ P.E. ☐ R.A. ☐ Sign Hanger ☐ Other (specify) _____

5 Owner/Lease Holder Information

Last Name Barranca First Name Karlo Middle Initial _____
 Business Name n/a Business Phone 917-991-8690 Business Fax _____
 Business Address 350 77th Street Mobile Phone _____
 City Brooklyn State NY Zip 11209 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)

Rejep Kolaro P.E.

Signature

Date

P.E. / R.A. Seal (apply seal, then sign 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)

Karlo Barranca

Signature

Karlo A. Barranca

Date

10/26/2020

Notarization

State of New York, County of:

Sworn to or affirmed under penalty of perjury

day of

20

Notary Public Signature

Notary Seal

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)		