

4 Design Applicant InformationChoose One: ☐ P.E. ☒ R.A. ☐ Sign Hanger ☐ Other (specify) _____ License Number 025259Last Name SAVINOFirst Name STEVENMiddle Initial RBusiness Name STEVEN R SAVINOBusiness Phone 718-983-6575Business Fax 718-983-0220Business Address 4158 VICTORY BOULEVARD

Mobile Phone _____

City STATEN ISLANDState NYZip 10314

E-Mail _____

5 Owner/Lease Holder InformationChoose One: ☒ Owner ☐ Lease HolderLast Name IANNELLIFirst Name JOSEPH

Middle Initial _____

Business Name _____

Business Phone 718-288-3474

Business Fax _____

Business Address 6382 AMBOY ROAD

Mobile Phone _____

City STATEN ISL.State NYZip 10312

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)

STEVEN R. SAVINO

Signature _____

Date 5/21/12

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)

JOSEPH IANNELLI

Signature _____

Date 5/16/2012

Notarization

State of New York, County of: Richmond

Sworn to or affirmed under penalty of perjury

16 day of MAY 2012

Notary Public Signature _____

Notary Seal

STEVEN R. SAVINO
Notary Public, State of New York
No. 01SA6034253
Qualified in Richmond County
Commission Expires 12-6-13

Internal Use Only

Staff	PW3 Cost Details Validation	Comments (May include cost guidance.)	Initials
Pre-File:	☐ Accept Original ☐ Revised Cost Needed		
Plan Examiner/Project Advocate:	☐ Accept Original ☐ Revised Cost Needed		
C of O:	☐ Accept Original ☐ Revised Cost Needed		
Pre-File/C of O:	☐ Accept Revised Submission (Resolved)		