



4 Design Applicant Information

Last Name	KAMEN	First Name	JEFFREY	Middle Initial	
Business Name	JEFFREY KAMEN ARCH.	Business Phone	(212) 982-5112	Business Fax	(212) 358-0673
Business Address	33 BOND STREET			Mobile Phone	
City	NEW YORK	State	NY	Zip	10012
E-Mail	KAMENRA@ATT.NET				
License Number	023279	Choose One:	☐ P.E. ☒ R.A. ☐ Sign Hanger ☐ Other (specify) _____		

5 Owner/Lease Holder Information

Last Name	FINA	First Name	MICHAEL	Middle Initial	
Business Name	N/A	Business Phone	(718) 967-9179	Business Fax	
Business Address	791 STAFFORD AVENUE			Mobile Phone	
City	STATEN ISLAND	State	NY	Zip	10309
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)

JEFFREY KAMEN, R.A.

Signature



09/14/2016

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.*

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Name (print)

MICHAEL FINA

Signature

Date

10-17-2016

Notarization

State of New York, County of: *Richmond*

Sworn to or affirmed under penalty of perjury

17th day of *October* 20 *16*

Notary Public Signature

Maria S. Magaddino

Notary Seal

MARIA S. MAGADDINO
Notary Public, State of New York
No. 01MA6315893
Qualified in Richmond County
Commission Expires December 1, 2018

Internal Use Only		
Work Area	PW3 Cost Details Validation	Comments (May include cost guidance.)
Plan Examination:	☐ Accept Original ☐ Revised Cost Needed	
C of O:	☐ Accept Original ☐ Revised Cost Needed	
Plan Examination/C of O:	☐ Accept Revised Submission (Resolved)	