NYC PLANNING

Department of City Planning
120 Broadway, 31st Floor
New York, NY 10271

893 Eagle Avenue Rezoning
PROJECT NAME

P2018X0270
PROJECT ID NUMBER

1-12-23
SUBMISSION DATE

Signature Form

Section 1. Package & Project Information

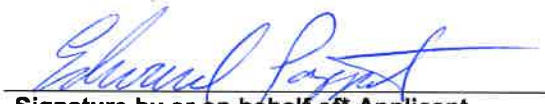
Land Use	Filed V3
Package Type (e.g. PAS, Land Use, EAS, WRP, EIS)	**Package Name** (Indicated on applicant portal or ask Lead Planner)

Action Code	Action Type
ZM	Zoning Map Amendment
ZR	Zoning Text Amendment
ZS	Zoning Special Permit
LD	**Legal Document**

Section 2. Signature

ANY PERSON WHO SHALL KNOWINGLY MAKE A FALSE REPRESENTATION ON OR WHO SHALL KNOWINGLY FALSIFY OR CAUSE TO BE FALSIFIED ANY FORM, MAP, REPORT OR OTHER DOCUMENT SUBMITTED IN CONNECTION WITH THIS APPLICATION SHALL BE GUILTY OF AN OFFENSE PUNISHABLE BY FINE OR IMPRISONMENT OR BOTH, PURSUANT TO SECTION 10-154 OF THE CITY OF NEW YORK ADMINISTRATIVE CODE. A PERSON WHO IS A SIGNATORY FOR A DOCUMENT SHALL BE CONSIDERED TO HAVE SUBMITTED SUCH DOCUMENT.

Housing Options and Geriatric Association Resources, Inc. (H.O.G.A.R. Inc.)
Printed Name of Applicant
(name, company/agency or organization)

Edward Poppiti	CEO
Printed Name of Applicant Attester (person authorized to sign the application, if different from 'Applicant' above)	**Title**
	1-12-23
Signature by or on behalf of* Applicant	**Date**

*Note that signatures on behalf of an applicant may require the submission of materials that demonstrate the authority of the signer to sign on behalf of the company/agency/organization. Please contact the Lead Planner to determine if this is necessary.