NO RELATIONSHIP AFFIDAVIT

State of New York)	
County of) ss.:	
	, being duly sworn under the penalty of perjury,
deposes and says:	
1) I am (we are) the owner(s) of	the premises known as
also known as Lot# of Block #	(address) of the Tax Map of the City of New York, and
have been since of of	
	he following violations accrued pursuant to Local
Law/:	(list applicable local law violations)
responsibility towards the premises and ha	ed violations accrued, I (we) had no legal ad no relationship with the owner of the premises. ded deed is certified by me to be true and correct.
Title (if Corporate owner)	
Signature	Signature
Sworn to Before me This day of,	
Notary Public	<u> </u>
For Department Use Only	

SEALED OR VACATED BUILDING AFFIDAVIT

State of New York)	
County of	ss.:)	
•		_, being duly sworn under the penalty of perjury, deposes
and says:		
1) I am (we are) the owner(s) of the premises known as
I) I am (we are	, the owner(s	(address)
also known as Lot #	of Block	# on the Tax Map of the City of New York, and
have been since	of	 .
2) The building(s) on the abov	ve mentioned premises was(were) vacant from
		(month)
of until	of	as reflected on
(year) (month	ı) (year)	
2) During the of		
3) During the ar	orementionea	period,
		(# of devices) (boiler(s)of elevator(s)), and
, was (we	re) not access	sible to members of the public. At no time was the
	·	•
safety of the public ever	jeopardized.	
A) No attractor	-4aa1	African Communication of the C
4) No other stati	ites or regula	tions were violated due to said vacancy.
5) The attached	documents ar	e certified by me to be true and correct.
5) The attached	documents ar	e certified by the to be true and correct.
Title (if corporate owne	г)	
Signature		Signature
Sworn to Before me		
This day of, _		
Notary Public		
For Department Use Onl	у	Fine
		lnitials
		Date
		Check No

X۲	7	11A+	Fee
77	aı	A C.T.	1.00

Filing Fee

Total Fee

DEMOLISHED BUIL	LDING AFFIDAVIT	
State of New York)	
County of	ss.:)	
	, being d	uly sworn under the penalty of perjury,
deposes and says:		
1) I am (we ar	e) the owner(s) of the pr	emises known as
	-	(address) on the Tax Map of the City of New York, and
have been since	of	
2) The building	g(s) on the above mention	ned premises was(were) completely demolished
pursuant to permit #		
3) During and a	after the time the aforeme	entioned building(s) was demolished it (they) was
(were) neither accessible	le to members of the pub	lic, nor a threat to the general safety of the public.
4) No other sta	itutes or regulations were	e violated due to said demolishing of the
building(s).		
5) The attached	I documents are certified	by me to be true and correct.
Title (if corporate own	ier)	
Signature Sworn to Before me This day of	······································	Signature
Notary Public		
For Department Use O	nly	Fine Initials Date Check No
Waiver Fee	Filing Fee	Total Fee

LL 10/81 REMOVAL/ DI State of New York)	AFFIDAVIT
County of	ss.:)	
	, be	eing duly sworn under the penalty of perjury, deposes
and says:		
1) I am (we are) t	he owner(s) of	the premises known as, (address)
also known as Lot #	_ of Block #	(address) on the Tax Map of the City of New York, and
have been such since	of	·
2) During the mon	th of	in the year, elevator(s), device
numbers		, was (were) either
removed/ dismantled from	at such premise	es.
3) From the month	of	in the year, the aforementioned elevator(s)
was (were) not accessible	to members of t	the public and at no time was the safety of the
public ever jeopardized.		
4) No other statute	es or regulation	s were violated due to said vacancy.
r	_	rtified by me to be true and correct.
o,• ao		
Title (if corporate owner)		
Signature		Signature
Sworn to Before me This day of		
Notary Public		
For Department Use Only		Fine
		Initials
		Date
		Check No
Waiver Fee B:\PPN2.WAI	Filing Fee	Total Fee

LL 62/91 REMOVAL/ DISMANTLING/ DISCONTINUED USE AFFIDAVIT

State of New York) ss.:		
County of		
	being duly sworn und	er the penalty of perjury, deposes
and says:		
1) I am (we are) the owner((s) of the premises kno	own as,
also known as Lot # of Block	c# on the Tax	Map of the City of New York, and
have been such since of	f	
2) During the month of	in the year	,boiler(s), device
number(s),		
removed from, dismantled at, and/or	not used at the aforer	mentioned premises.
3) From the month of	in the year	_, the aforementioned boiler(s)
was (were) not accessible to member	rs of the public and at	no time was the safety of the
public ever jeopardized.		
4) No other statutes or regul	lations were violated o	due to said removal/ dismantling/
discontinuance of use of this (these)	boiler(s).	
5) The attached documents a	are certified by me to l	be true and correct.
Title (faces areas areas)		
Title (if corporate owner)		
Ciamataura		moth wo
Signature	318	nature
Sworn to Before me This day of		
Notary Public		
For Department Use Only		
Approved by	Date	
B:PPN2.WAI	Date	