



**ANSWER TO ENFORCEMENT PROCEEDINGS**

**Melanie E. La Rocca**  
Chairperson

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DOCKET #: \_\_\_\_\_

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**1. RESPONDENT INFORMATION**

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Mailing Address

Address of IMD

IMD #

Zip Code

Email Address

Daytime Telephone Numbers

**2. Please check one:** Respondent's interest in the above premise:

Owner ☐

Net Lessee ☐

Managing Agent ☐

Other ☐

### **ANSWER**

Your answer must contain facts and arguments relevant to the issues raised in the Statement of Charges. The answer should be typed or written in the space provided below. Extra sheets of paper may be attached, if necessary. **ALL SUPPORTING DOCUMENTS MUST BE ATTACHED TO THIS ANSWER FORM, OR AN EXPLANATION MUST BE PROVIDED FOR NOT ATTACHING THE SUPPORTING DOCUMENTS.**

### **CERTIFICATION**

I certify that all statements made herein and in the attached rider, if applicable, are true and correct except for those statements that I have stated to be based on information and belief, and as to those matters, I believe them to be true and correct.

\_\_\_\_\_  
Print Your Name

\_\_\_\_\_  
Your Signature

\_\_\_\_\_  
Your Relationship to Respondent  
(If same, write "same")

\_\_\_\_\_  
Date