

280 Broadway, 5<sup>th</sup> Floor  
New York, New York 10007  
nyc.gov/loftboard  
TEL: (212) 393-2616  
FAX: (646) 500-6169

## INSTRUCTIONS

- Use this application to file for coverage of a unit under the Loft Law

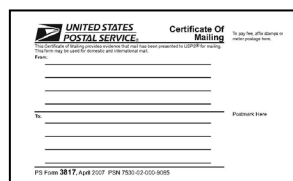
After you **complete** the application you must **serve** a copy on each affected party. Then **file** the original and four copies of the application, the application fee and proof of service with the Loft Board. The failure to complete the application, serve it on each affected party and file it with the Loft Board may result in a delay in processing or rejection of the application. The checklist on the bottom of this sheet will help you make sure you have completed all the required steps. For more information on completing, serving and filing an application, visit our website at [www.nyc.gov/loftboard](http://www.nyc.gov/loftboard) or call the Loft Board at (212) 393-2616.

### Completing the Application:

1. **Clearly print the applicant's contact information.** The applicant must include a mailing address, phone number and email address. Unless otherwise indicated, if 2 or more people are applying, the Loft Board will use the first phone number or mailing address listed on the application to contact the applicants or to return the application if it is defective.
2. **Indicate the type of relationship the applicant has to the building.** You must indicate on page 3 of the application residential tenant, residential subtenant, or manufacturing/commercial tenant.
3. **List the names of the affected parties, their mailing addresses, and their relationships to the building.** Except for the applicant, every party whose rights may be affected by the claim stated in the application is an affected party. For this type of application, affected parties include the owner, each residential, commercial and manufacturing tenant of record in the building, and each occupant and subtenant of the building, if different from the tenant of record.
4. **State the basis for the claim raised in the application.** You are not required to submit evidence supporting your claim when you file the application. However, your application must include the facts and arguments relevant to your coverage claim.
5. **Sign the application.** The applicant(s) or the applicant's attorney must sign the application form.
6. **Make a check or money order payable to the NYC Loft Board for the application filing fee.** An application fee of \$25 for each unit seeking coverage must be paid when the application is filed with the Loft Board. Any application that does not include the application fee will be returned without being processed unless an applicant requests a waiver of the application fee based on financial hardship.

### Serving the Application:

7. All the affected parties listed in the application must be served. For more information on who is an affected party, see number 3, above.
8. Unless otherwise stated in the Loft Board rules (see number 11, below), an applicant must serve the application by regular mail **prior to** filing the application with the Loft Board.
9. In the application package you file with the Loft Board, include a **certificate of mailing stamped by the US Post Office** for each party.



10. If you cannot afford to serve all of the affected parties, you may request a waiver of the service requirement based on financial hardship. See section 1-06(b)(4) of the Loft Board's rules.
11. You **must** include the following in the envelope to each affected party:
  - A copy of the application
  - A blank answer form

#### Filing the Application:

12. You may file the application with the Loft Board by either: (1) regular mail **or** (2) hand delivery. The application is considered filed on the day it is received if received between 9am and 4pm on Mondays through Fridays, except for holidays.
13. Include all of the following when filing the application with the Loft Board:
  - One (1) original application with the applicant's signature;
  - Four additional (4) copies of the application;
  - One copy of a blank answer form including instructions on how to file an answer;
  - A check or money order in the amount of the application fee; and
  - Proof of service made on each affected party.



**Loft Board**

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# Coverage Application

FOR OFFICE USE ONLY

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

**Location Information:**

House No(s) \_\_\_\_\_

Street Name \_\_\_\_\_

Borough \_\_\_\_\_

**Applicant Information** (if there is more than one applicant, attach a separate sheet listing the names of the applicants and their mailing addresses including the unit designations):

NAME: \_\_\_\_\_

MAILING ADDRESS: \_\_\_\_\_

CITY, STATE \_\_\_\_\_

ZIP CODE: \_\_\_\_\_ UNIT: \_\_\_\_\_

DAYTIME PHONE: (     ) \_\_\_\_\_

BUSINESS PHONE: (     ) \_\_\_\_\_

FAX NUMBER: (     ) \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_

APPLICANT IS:

Residential Tenant

Other (*Specify*)

\_\_\_\_\_

\_\_\_\_\_



**Affected Parties:**

List **all** affected parties. If one party has multiple addresses, list each address separately. Also indicate the type of affected party (e.g. owner, residential tenant, etc.). *See, Title 29 of the Rules of the City of New York §1-06 for more information.*

	<b>NAME:</b>	<b>MAILING ADDRESS:</b>	<b>TYPE OF AFFECTED PARTY:</b>
1			
2			
3			
4			
5			
6			
7			
8			
9			
10			

*If there are more than ten (10) affected parties, attach a separate sheet listing each affected parties' name, mailing address and type.*

**Basis for Application:**

Use the space provided below to state the basis for your coverage application. Please specify: (1) which units are seeking coverage including the unit designations; (2) the periods of residential occupancy for each unit seeking coverage; (3) the commercial activities taking place in the building, and (4) any other relevant information for determining coverage. You may attach additional sheets, as necessary.

**I certify that all statements made in this application are true and correct except for those statements which I have stated to be based on information and belief, and as to those statements, I believe them to be true and correct.**

\_\_\_\_\_  
*Name (Print)*

\_\_\_\_\_  
*Relationship to Applicant (If same, write same)*

\_\_\_\_\_  
*Signature*

\_\_\_\_\_  
*Date*

***False statements may subject you to the penalties provided by law, including fines and/or imprisonment***

## **CHECKLIST:**

### **Completing, Serving and Filing a Loft Board Application**

- Am I using or did I download the correct application form from the Loft Board's website?
- Did I list my name, mailing address, contact phone number and email address as the **applicant**?
- Did I list **all** of the affected parties on page 4 of the application or on an attached sheet?
- Did I state a basis for my claim in the application?
- Did I sign the application form?
- Did I include a check or money order made payable to the NYC Loft Board for the application fee?
- Did I include the following documents with the application that I mailed to each affected party?
  - The complete application
  - A blank answer form
- Did I mail a copy of the application package to each affected party listed on the application?
- Did I obtain a Certificate of Mailing from the US Post Office, showing proof that I mailed a copy of the application to each affected party?
- Did I file the application with the Loft Board?
- Did I include the following in my filing to the Loft Board?
  - One original application form with the applicant's signature and four (4) copies of the complete application form
  - One (1) blank answer form including instructions for filing an answer
  - A check or money order in the amount of the application fee
  - A United States Postal Service stamped copy of the certificate of mailing for each affected party.