



Loft Board

Robert D. LiMandri
Chairperson

Lanny R. Alexander
Executive Director

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RECONSIDERATION APPLICATION

FOR OFFICE USE ONLY

DOCKET #: _____

1. To be considered timely, a reconsideration application must be submitted to the Loft Board within 30 days of the mailing of a final order. The original application must be filed together with the application fee and five copies of the application.
2. The application fee for a reconsideration application is \$100.00. Make check or money order payable to "City Collector/Loft Board."
3. Applicant must attach proof of service of the reconsideration application to all affected parties in the underlying proceeding.

1. BUILDING INFORMATION

Address of IMD: _____

IMD #: _____

Zip Code: _____

APPLICANT INFORMATION

NAME: _____

MAILING ADDRESS: _____

UNIT: _____

CITY, STATE: _____

ZIP CODE: _____

DAYTIME PHONE: () _____

BUSINESS PHONE: () _____

FAX NUMBER: () _____

EMAIL ADDRESS: () _____

APPLICANT IS:

OWNER

RESIDENTIAL TENANT

COMMERCIAL/MANUFACTURING
TENANT

OTHER: (Specify)

UNDERLYING ORDER INFORMATION

This application seeks reconsideration of Loft Board Order No. _____ in Loft Board Docket No. _____. Please attach a copy of the underlying Order and the Report and Recommendation to this application.

AFFECTED PARTIES

Affected parties include the owner and such occupants as are necessary for a final resolution of the claims asserted in the application. In a reconsideration application, affected parties include all of the parties listed on the underlying application, which may include owners; tenants of record, including residential, commercial and manufacturing tenants and all occupants. Indicate type of affected party in the third column (e.g., owner, residential tenant, etc). See, 29 RCNY §1-06 for more information.

<u>NAME</u>	<u>MAILING ADDRESS</u>	<u>TYPE OF AFFECTED PARTY</u>
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____
4. _____	_____	_____
5. _____	_____	_____
6. _____	_____	_____
7. _____	_____	_____
8. _____	_____	_____

If there are more than eight affected parties, attach a separate sheet listing the affected parties' name, mailing address and type of affected party.

BASIS OF RECONSIDERATION APPLICATION

At least one option below MUST be checked off and discuss fully in the FACTS section.

Due Process Denial

Material Fraud in the Prior Proceeding

Error of Law

Erroneous Determination based on a ground that was not argued by the parties at the time of the prior proceeding and that the parties could have not reasonably anticipated would be the basis for a determination and discovery of probative, relevant evidence which could not have been discovered at the time of the hearings despite exercise of due diligence.

FACTS: (If additional space is needed, please attach a separate sheet.)

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

Print Name

Relationship to Applicant
(If same, write same)

Signature

Date

FIVE COPIES OF THIS APPLICATION AND ATTACHMENTS MUST BE FILED WITH THIS APPLICATION. FALSE STATEMENTS MAY SUBJECT YOU TO THE PENALTIES PROVIDED BY LAW, INCLUDING FINES AND/OR IMPRISONMENT.

AFFECTED PARTIES: You may file an answer to this application within 20 days from the date that service is completed. Service by mail shall be deemed completed after five days following the mailing by the applicant. Service by any other means shall be deemed completed on the date the application is served. A copy of the answer must be served on the applicant prior to submitting the answer to the Loft Board. Proof of service to the applicant is required at the time the answer is submitted to the Loft Board.