



BSA No. 299-82-BZ
2-26 Stanton Street, a/k/a 207-21 Chrystie Street
Borough of Manhattan Block 427, Lots 2 and 200

VIOLATION HISTORY

There are currently two open Department of Buildings (“DOB”) violations issued against the Building:

<u>Number</u>	<u>Issue Date</u>	<u>Violation Type</u>	<u>Cure Status</u>
113007LL1198NRF4425	11/30/2007	Local Law 11	Cured
010112BENCH00094	1/1/2012	Energy Report	Under appeal

Printouts of the violations from the DOB Building Information System are attached hereto as Exhibit A.

As shown by the documents attached hereto as Exhibit B, the 2007 violation was for a late filing of the cycle 6 Local Law 11 façade condition report, which was filed on March 24, 2009 and for which a late filing a late filing fee was assessed. As indicated, the fee was paid on April 26, 2012.

The 2012 violation was issued by DOB for failure to timely file the energy benchmarking report required under Local Law 84 of 2009. The report was, in fact, timely filed. DOB issued the notice to benchmark under Tax Lot 1 even though Lot 1 had been subdivided into Tax Lots 2 and 200. Accordingly, when received, DOB filed the report under the old lot number and issued the violation against the new lot number. An appeal is in progress.

Dated: April 27, 2012
 New York, New York

By: 

Robert S. Davis, Esq.

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Exhibit A

DOB Violation Printouts



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NYC Department of Buildings

DOB Violation Display for 010112BENCH00094

Premises: 2 STANTON STREET MANHATTAN

BIN: 1078062 Block: 427 Lot: 2

Issue Date: 01/01/2012

Violation Category: V - DOB VIOLATION - ACTIVE

Violation Type: BENCH - FAILURE TO BENCHMARK

Violation Number: 00094

Device No.:

ECB No.:

Infraction Codes:

Description: FAILURE TO FILE BENCHMARKING REPORT OF ENERGY USE AS PER AD. CODE SEC. 28-309.4

Disposition:

Code: Date:

Inspector:

Comments:

If you have any questions please review these [Frequently Asked Questions](#), the [Glossary](#), or call the 311 Citizen Service Center by dialing 311 or (212) NEW YORK outside of New York City.



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NYC Department of Buildings

DOB Violation Display for 113007LL1198NRF42228

Premises: 2 STANTON STREET MANHATTAN

BIN: 1078062 Block: 427 Lot: 2

Issue Date: 11/30/2007

Violation Category: V - DOB VIOLATION - ACTIVE

Violation Type: LL1198 - UNKNOWN

Violation Number: NRF42228

Device No.: 600778

ECB No.:

Infraction Codes:

Description:

Disposition:

Code: Date:

Inspector:

Comments:

If you have any questions please review these [Frequently Asked Questions](#), the [Glossary](#), or call the 311 Citizen Service Center by dialing 311 or (212) NEW YORK outside of New York City.

Exhibit B

2007 Violation Cure Documents



Robert D. LiMandri
Commissioner

Local Law Enforcement Unit
280 Broadway
4th Floor
New York, NY 10007
www.nyc.gov/buildings

+1 212 566 5120 tel
+1 212 566 5707 fax

LOCAL LAW 11/98 LATE FILING INFORMATION NOTICE

To: Rubin Schroan
C/o 10 Stanton Owners LLC
754 Eastern Parkway
Brooklyn, N.Y.

From: Carol Waldron, Local Law 11 of 1998 Coordinator

Date: August 12, 2010

Re: Address: 10 Stanton Street (Manhattan)
Block: 427 Lot: 1
DOB Violation # 113007LL1198NRF42228
File Date: 03/24/2009
BIN: 1078062 Control #: 600778

A Department of Buildings (DOB) violation(s) for "No Report Filed" was issued against the above referenced property for failing to timely file the required Local Law 11/98 Façade Report for cycle (s) 6 on time. The Department of Buildings records reflect that a Local Law 11/98 report for the above building was filed on 03/24/2009. A late filing fee totaling \$4,000.00 has been imposed.

In order to remove the DOB violation (s), you must submit a **certified check** or **postal money order** payable to NYC Department of Buildings for the amount stated in this notice to the cashier's counter on the 4th floor. After payment, please present the cashier's receipt and this letter to the Local Law Enforcement Unit located at 280 Broadway, 4th Floor.

Carol Waldron JF
Carol Waldron

Local Law 11/98 Coordinator

TO BE COMPLETED BY LOCAL LAW ENFORCENT UNIT

Payment Made On _____/_____/_____
Cashier's Receipt Number _____
LLEU Staff Signature _____

DOB DATE STAMP

C: File Late payment - MyDoc

***** NEW YORK CITY *****
*** DEPARTMENT OF BUILDINGS ***

R E C E I P T

INVOICE NUMBER: 61112681 DATE: April 26, 2012 TIME: 02:04 PM
PAYMENT: \$****4,000.00

TYPE OF TRANSACTION	AMOUNT	PAY TYPE
FACADE LATE FILING PENALTY	4,000.00	CHK 7001244236
CTL NBR: 600778 CYCLE: 06 BBL: 1 00427 0002	05111 000804	00600 80

RECEIVED FROM: CENTRAL ACCOUNTING

STATION: 07



Buildings

Facades Cashier Civil Penalty Form (FCP)

1 Instructions

Please complete and submit this form to the Facades customer service representative to calculate the penalties owed. Once all penalties are assessed, present the form and remit payment at the Cashier's window. To update the Facades Inspection record and complete the transaction, return the FCP form and receipt to the Facades customer service representative.

2 Applicant/Owner Contact Information

Name Lauren Shigesaka Address 225 Broadway #712

City, State New York NY Zip 10007

Phone Number 212)393-9101 E-mail lauren@jamesmacdonald1td.com

3 Civil Penalty Information (Check only one box for each penalty)

3A Property Information	3B Penalty Type	Internal Use Only
Control #1: <u>600778</u> Address: <u>10 Stanton St.</u>	<input checked="" type="checkbox"/> Late Filing <input type="checkbox"/> Failure to File <input type="checkbox"/> Failure to Correct Unsafe Condition Enter Cycle: <u>6</u>	Fee Due: \$ <u>4,000.00</u>
Control #2: _____ Address: _____	<input type="checkbox"/> Late Filing <input type="checkbox"/> Failure to File <input type="checkbox"/> Failure to Correct Unsafe Condition Enter Cycle: _____	Fee Due: \$ _____
Control #3: _____ Address: _____	<input type="checkbox"/> Late Filing <input type="checkbox"/> Failure to File <input type="checkbox"/> Failure to Correct Unsafe Condition Enter Cycle: _____	Fee Due: \$ _____
Control #4: _____ Address: _____	<input type="checkbox"/> Late Filing <input type="checkbox"/> Failure to File <input type="checkbox"/> Failure to Correct Unsafe Condition Enter Cycle: _____	Fee Due: \$ _____
Control #5: _____ Address: _____	<input type="checkbox"/> Late Filing <input type="checkbox"/> Failure to File <input type="checkbox"/> Failure to Correct Unsafe Condition Enter Cycle: _____	Fee Due: \$ _____
Control #6: _____ Address: _____	<input type="checkbox"/> Late Filing <input type="checkbox"/> Failure to File <input type="checkbox"/> Failure to Correct Unsafe Condition Enter Cycle: _____	Fee Due: \$ _____
Internal Use Only		

Print Name C. ROBINSON

Initials: CR

Date: APR 2 2012

DOB 113007LL1198 NRE42228

