



careers
businesses
neighborhoods

Regulatory Enforcement Assistance for Commercial Tenants (REACT)

Violation Report Form

Primary Contact Information

Name: _____

Phone: _____ E-mail: _____

Corporation Name: _____

Business Name (DBA): _____

Business Street Address: _____

Business Borough: _____ Business Zip: _____

Violation Category: Building Code Violation Fire Code Violation

Violation Type: Violation Notice Order Summons Citation Ticket

Violation Number: _____

Was the business closed as a result of this issue? Yes No

Business Stage: Pre-Startup (no sales) Startup (sales of goods/services for less than 1 year)

Operating Business (sales of goods/services for 1 year or more)

Business Sector: Accommodation/Food Education Services Finance/Insurance

Healthcare/Social Assistance Information (Wireless Telecommunications) Manufacturing

Professional/Scientific Services Retail Services (Personal Care, Dry Cleaning, Laundry) Other

Number of Employees: _____

Preferred Language for Assistance: English Arabic Bengali Chinese Haitian Creole

Korean Russian Spanish Other

Please e-mail this form, with a scanned copy of the violation document, to businesshelp@sbs.nyc.gov.

One of our Client Managers will be in touch shortly to assist you.

Have additional questions? Call (212) 618-8810.