

# Violation/Summonses Scheduled for Hearings at OATH/ECB

- The most common type of violation/summons the Department issues is when there is non-compliance with the NYC Building Code, the Zoning Resolution, the Electrical Code or other applicable rules and laws.
- Each violation/summons contains a Commissioner's Order to correct the condition and to certify correction with the Department.
- Those wishing to dispute a violation/summons **must** attend a hearing at the Office of Administrative Trials and Hearings/Environmental Control Board (OATH/ECB)

# About OATH/ECB

## OATH/ECB (Office of Administrative Trials and Hearings/Environmental Control Board):

- Is an administrative court that provides hearings on violations/summonses issued by City agencies.
- OATH/ECB renders judgment, imposes and collects all penalties assessed at hearings.
- **OATH/ECB does not:**
  - Issue violations/summonses
  - Establish enforcement policies
  - Employ inspectors or agents
  - Direct, control or otherwise influence where, when or to whom violations are issued

# Violation/Summons Components

**NYC Buildings** SUMMONS AND COMMISSIONER'S ORDER • CIVIL PENALTIES APPLY

**SUMMONS NUMBER: 35224600Y**

ENFORCEMENT AGENCY: NYC DEPT OF BUILDINGS  
AGENCY ADDRESS AND WEBSITE: 280 Broadway, New York, NY 10007 [www.nyc.gov/building](http://www.nyc.gov/building)

RESPONDENT: \_\_\_\_\_

MAILING ADDRESS: \_\_\_\_\_ DOB License/Registration #: \_\_\_\_\_

CELL PHONE: N/A

DATE OF OCCURRENCE: \_\_\_\_/\_\_\_\_/\_\_\_\_ TIME OBSERVED: \_\_\_\_am/pm

PLACE OF OCCURRENCE: \_\_\_\_\_ BLOCK: \_\_\_\_\_ LOT: \_\_\_\_\_ BIN: \_\_\_\_\_

BO R D U G H: \_\_\_\_\_

You must appear or respond to the details of violation(s) below. For HOW TO RESPOND, see the back of this summons.

**HEARING DATE:** \_\_\_\_\_ **AT:**  8:30 am  10:30 am  1:30 pm

OFFICE OF ADMINISTRATIVE TRIALS AND HEARINGS: \_\_\_\_\_ [Borough] (See reverse side for address)  
Phone: (646) 628-4692

REFER TO THE SUMMONS NUMBER ABOVE ON ALL CORRESPONDENCE.

**WARNING:** If you do not appear or respond to this Summons, the City will decide the Summons against you and impose penalties. Failure to pay a civil penalty could lead to the denial of a application for, or the suspension, termination or revocation of a City license, permit or registration. In addition, the City may enter a judgment against you in court.

**COMMISSIONER'S ORDER TO CORRECT VIOLATION CONDITION(S)**

CURE DATE (Zero Penalty Option, if available): \_\_\_\_\_ Must Appear:

Details of Violation(s) (Retyping the charge)

Type of Construction: \_\_\_\_\_ No. of Stories: \_\_\_\_\_ Via. Type: \_\_\_\_\_ Dist. \_\_\_\_\_ Code \_\_\_\_\_ No. \_\_\_\_\_

Occurrence Date of Inspection: \_\_\_\_\_ Completion Date: \_\_\_\_\_ Related Job# (if available) \_\_\_\_\_

Based on an inspection of the premises and/or records of the Department, the \_\_\_\_\_ (if available) \_\_\_\_\_  
of the section of law cited below of the NYC Administrative Code, the NYC Zoning Resolution and/or Titles 1 or 2 of the Rules of the City of New York, \_\_\_\_\_  
has determined that you are in violation of \_\_\_\_\_

Violating Conditions Observed	Infraction Code	Class	Provision of Law
<input type="checkbox"/> ILLEGAL CONVERSION - CLASS 1 Per 28-202.1 & 1 NYCRR 102-01, additional Class 1 or Class 2			
<input type="checkbox"/> Per 28-202.1 & 1 NYCRR 102-01, additional Class 1 or Class 2			

Requiring Condition Aggravated 1 per LMCRR 102-01(f)

Stop Work/Seize Order Issued  Full  Partial

Aggravated Condition per LMCRR 102-01(f)

Violation Detail(s): \_\_\_\_\_

Remedy: \_\_\_\_\_

THE COMMISSIONER ORDERS THAT YOU TIMELY CORRECT THESE CONDITIONS AND FILE A CERTIFICATE OF SUCH CORRECTION. See 1 NYCRR 102-01 and the enforcement procedures as set forth in this notice. If remedial orders are issued, additional fees and penalties may be assessed. For certain charges, additional fees will be assessed. See sections 28-215.1, 28-219.1 and 28-207.2.B of the Administrative Code. A penalty award may be liable for payment of these additional fees unless you have made a payment on this summons.

NYC Charter Sections 1043 and 1045-a and the Rules of the City of New York, including the NYC Office of Administrative Trials and Hearings (OATH) rules, set forth hearing options. See other side of this notice.

I, an employee of the Department of Buildings, affirm under penalty of perjury that I personally observed the commission of the violation(s) I charged above and/or verified the infraction through a review of the pertinent records. False statements made herein are punishable as a Class A Misdemeanor pursuant to section 240.45 of the Penal Law.

Issuing Officer: \_\_\_\_\_ Signature: \_\_\_\_\_ Badge# \_\_\_\_\_ Unit Code: \_\_\_\_\_

Respondent Information

Occurrence Information

Hearing Date and Time

Commissioner's Order to Correct

CURE Date (if applicable)

# Commissioner's Order: Correct and Certify Correction

- Unless your violation/summons has been dismissed as a result of a hearing held at OATH/ECB, you are **required to certify correction** with the Department.
- A violation/summons will continue to appear *Open* in DOB records, even if you paid the penalty imposed by OATH/ECB, until an acceptable Certificate of Correction has been submitted to the Department.

# Certifying Correction

## When to Certify Correction

- DOB accepts a Certificate of Correction anytime after the violation/summons is issued, **except** violations/summonses issued for filing a Certificate of Correction containing material false statement(s). In such a case, you **must** attend your hearing before you can certify correction with the Department.

***NOTE: All DOB civil penalties issued as a result of the violation must be paid in order to obtain a Certificate of Correction Approval Letter.***

# Resolution OPTION 1 *(No Hearing Held)*

## CURE – Zero Penalty

- Available for certain violations/summonses (All Class 3 and most Class 2 infractions)
- Respondent **must** correct the violating condition(s) and certify correction to the Department within 40 days of service of the violation/summons.
- If an acceptable certificate of correction is submitted to AEU before the CURE Date found on the face of the violation/summons:
  - Respondent **admits** violation/summons
  - No appearance at an OATH/ECB hearing is necessary
  - No hearing penalty imposed penalty **must** be paid

*If an acceptable certificate of correction is **not submitted** by the CURE Date found on the face of the violation/summons the respondent **must appear for a hearing as scheduled or admit and pay the violation/summons.***

# Resolution **OPTION 2** *(No Hearing Held)*

## Stipulations

- Available for certain violations/summonses (Class 3 and selected Class 2 infractions)
- **An admission of guilt** – extends compliance time by an additional 75 days from the first scheduled hearing date
- Accepted by mail or at the hearing
  - **By Mail:** Half the penalty **must** be paid if accepted before the first hearing date
  - **At the Hearing:** The OATH/ECB approved hearing penalty **must** be paid

# Resolution **OPTION 3** *(No Hearing Held)*

## Admit and pay by Mail or Online

- All violations/summonses qualify for this option, regardless of severity
- The standard penalty **must** be paid to OATH/ECB before the scheduled hearing date
- No hearing is held after payment is received
- No reduction in penalty
- Eliminates representation costs for **no defense** presented during hearings
- Eliminates time spent at OATH/ECB
- Still requires certification of correction to the Department

# Why Certify Correction?

- To avoid receiving additional violations/summonses for failing to comply with a Commissioner's Order and/or failing to certify correction.
- The Law requires Immediately Hazardous (Class 1) violations/summonses to be corrected forthwith.
- Immediately Hazardous (Class 1) violations/summonses that are not corrected and certified as corrected in a timely manner face additional DOB Civil Penalties of \$1,500 minimum.
- Respondents may still challenge the violation/summons at OATH/ECB, even if certification has been submitted to the Department.

# Why Certify Correction?

- Violations remain **open** until an acceptable certification is received.
- Banks, mortgage and title companies review BIS Web for compliance information.
- Failure to certify can affect the ability to obtain a Certificate of Occupancy or Letter of Completion.
- Failure to certify may delay the rescission of a Stop Work Order.
- Certification is required in order to be granted a stipulation, which carries a lesser penalty.
- Certification is required in order to be granted a CURE with zero penalties.

# Completing the Certificate of Correction

## SECTION 1: Violation Information

- Insert the violation/summons number, the address where the violation occurred and your name and mailing address.
- You **must** check one of the boxes that indicates your relationship to the Respondent.
- If you are the managing agent of the premises that is the subject of the violation/summons, you **must** attach a letter from the owner authorizing you to certify correction
- If you are a new Owner, you **must** attach a copy of a deed.

**NYC Buildings**

**AEU-2: Certificate of Correction Required For Certification of Department of Buildings Violations Only**

**AFFIDAVIT**

**1 Violation Information**

SUMMONS NUMBER: [Red Box]

PLACE OF OCCURRENCE: \_\_\_\_\_ (Number and street) \_\_\_\_\_ (Borough and Zip)

STATE OF \_\_\_\_\_ COUNTY OF \_\_\_\_\_

I, \_\_\_\_\_, duly swear and affirm under penalty of perjury, that I am the (check one):

- Respondent named on the violation
- Officer or Director of the named respondent corporation (circle one)
- Managing Agent of the named respondent (attach letter of designation by respondent)
- Owner of Property but not named respondent (if you are a new owner, attach copy of deed)
- Authorized Agent of place of occurrence (attach letter of designation by owner)
- Partner of named respondent partnership
- Contractor or other agent of named respondent (attach written authorization from respondent)

Mailing address is: \_\_\_\_\_ (street address, city, state, zip code)

**2 Person Who Performed Work**

I have complied with the order of the Commission to correct each condition cited on this violation. The work described in the attached sworn statement was completed on \_\_\_\_\_ (date) and was performed by (check one):

- Myself Name of person who performed work: \_\_\_\_\_
- My employee Company: \_\_\_\_\_
- Contractor Address: \_\_\_\_\_
- Architect/Engineer License/Registration No. of professional license/contractor: \_\_\_\_\_

**REQUIRED:** I have attached a sworn/affirmed statement describing the work done to correct the violation condition(s). In addition, I have attached copies of all permits, bills, receipts, photographs, and/or other documentary proof that the violating condition(s) have been corrected, or have explained in my statement why such are not available. I am aware that I may be required to attend any pending hearing on the violation or risk the imposition of default penalties.

**3 Cure Submission** (Check box below only if eligible and you are requesting a cure - see reverse)

CURE REQUEST. I admit the existence of the violation(s) charged. I am aware that a hearing is required if my request is not accepted.

**4 Statement of Signature**

I have personal knowledge that the violating condition(s) have been corrected as per this affidavit and statement(s) attached.

Sworn to, or affirmed under penalty of perjury, before me

this \_\_\_\_\_ day of \_\_\_\_\_ Signature \_\_\_\_\_

Notary Public (Affix Stamp)

Mail or return this form in person, with supporting documents, to:  
NYC Department of Buildings, Administrative Enforcement Unit  
280 Broadway, 5th Floor  
New York, NY 10007  
Phone: (212) 393-2405

False certification is a criminal misdemeanor under sections 28-203.1.1 and 28-211.1 of the NYC Administrative Code, punishable by up to 1 year imprisonment and/or a fine of up to \$25,000. It is also punishable with a civil penalty of up to \$25,000.

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# Completing the Certificate of Correction

## SECTION 2: Person Who Performed the Work

- Complete this section by inserting the date that all violating conditions were corrected.
- Check the box indicating who did the work to correct the violation(s) and provide the name of the individual, company name and license/registration information (if done by a licensee, professional or registered contractor).

**NYC Buildings**

**AEU-2: Certificate of Correction Required For Certification of Department of Buildings Violations Only**

**AFFIDAVIT**

**1 Violation Information**

SUMMONS NUMBER: \_\_\_\_\_

PLACE OF OCCURRENCE: \_\_\_\_\_ (Number and street) \_\_\_\_\_ (Borough and Zip)

STATE OF \_\_\_\_\_ COUNTY OF \_\_\_\_\_

I, \_\_\_\_\_, duly swear and affirm under penalty of perjury, that I am the (check one):

- Respondent named on the violation
- Officer - Director of the named respondent corporation (circle one)
- Managing Agent of the named respondent (attach letter of designation by respondent)
- Owner of Property but not named respondent (if you are a new owner, attach copy of deed)
- Authorized Agent of place of occurrence (attach letter of designation by owner)
- Partner of named respondent partnership
- Contractor or other agent of named respondent (attach written authorization from respondent)

My mailing address is: \_\_\_\_\_  
(state address, city, state, zip code)

**2 Person Who Performed Work**

I have complied with the order of the Commission to correct each condition cited on this violation. The work described in the attached sworn statement was completed on \_\_\_\_\_ (date) \_\_\_\_\_ and was performed by (check one):

- Myself
- My employee
- Contractor
- Architect/Engineer

Name of person who performed work: \_\_\_\_\_  
Company: \_\_\_\_\_  
Address: \_\_\_\_\_  
License/Registration No. of professional/licensee/contractor: \_\_\_\_\_

**REQUIRED:** I have attached a sworn/affirmed statement describing the work done to correct the violation condition(s). In addition, I have attached copies of all permits, bills, receipts, photographs, and/or other documentary proof that the violating condition(s) has/have been corrected, or have explained in my statement why such are not available. I am aware that I may be required to attend an upcoming hearing on the violation or risk the imposition of default penalties.

**3 Cure Submission** (Check box below only if eligible and you are requesting a cure - see reverse)

CURE REQUEST. I admit the existence of the violation(s) charged. I am aware that a hearing is required if my request is not accepted.

**4 Statement of Signature**

I have personal knowledge that the violating condition(s) have been corrected as per this affidavit and statement(s) attached.

Sworn to, or affirmed under penalty of perjury, before me  
this \_\_\_\_\_ day of \_\_\_\_\_ Signature \_\_\_\_\_

Notary Public \_\_\_\_\_ (Affix Stamp)

Mail or return this form in person, with supporting documents, to:  
NYC Department of Buildings, Administrative Enforcement Unit  
280 Broadway, 5th Floor  
New York, NY 10007  
Phone: (212) 393-2405

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# Completing the Certificate of Correction

## CURE Eligibility

- Class 3 (lesser) violations are always curable.
- Violations that are eligible for a CURE contain a **CURE Date**.
- Correct **all** violating conditions.
- Submit an acceptable Certificate of Correction to AEU **before** the CURE Date listed on your NOV.

**COMMISSIONER'S ORDER TO CORRECT VIOLATION CONDITION(S)**

CURE DATE (Zero Penalty Option, if available): \_\_\_\_\_ Must Appear:   
Details of Violation(s) \_\_\_\_\_ (If disputing the charge)

Type of Construction: \_\_\_\_\_ No. of Stories: \_\_\_\_\_ Via. Type:  Boiler # \_\_\_\_\_  
Occupancy at Time of Inspection: \_\_\_\_\_ Basis of Violation #: \_\_\_\_\_ Related Job #: \_\_\_\_\_

\_\_\_\_\_ of the Department, the undersigned has determined that you are in violation of the section of law cited below of the NYC Administrative Code, the NYC Zoning Resolution and/or Titles 1 or 2 of the Rules of the City of New York.

# Completing the Certificate of Correction

## SECTION 3: CURE Submission

- You must check **CURE REQUEST** in Section 3 of the Certificate of Correction form.

3	<b>Cure Submission</b> (Check box below <u>only</u> if eligible and you are requesting a cure - see reverse)
<input type="checkbox"/>	<b>CURE REQUEST.</b> I admit the existence of the violation(s) charged. I am aware that a hearing is required if my request is not accepted.

- **CURE** Requests require the same documentation as all other Certificates of Correction.
- In addition to Section 3, all other sections of the Certificate of Correction form **must** be completed.

# Completing the Certificate of Correction

## SECTION 4: Statement of Signature

- Must be signed and notarized.
- Must be original.
- No photocopies, scanned copies, stamped or traced signatures will be accepted.
- The person certifying correction should sign on the rightmost line and the notary should sign on the left.

**NYC Buildings** AEU-2: Certificate of Correction Required For Certification of Department of Buildings Violations Only

**AFFIDAVIT**

**1 Violation Information**

Summons Number: \_\_\_\_\_

Place of Occurrence: \_\_\_\_\_ (Number and street) \_\_\_\_\_ (Borough and Zip)

State of \_\_\_\_\_ County of \_\_\_\_\_

I, \_\_\_\_\_, duly swear and affirm under penalty of perjury, that I am the (check one):

- Respondent named on the violation
- Officer or Director of the named respondent corporation (circle one)
- Manager or Agent of the named respondent (attach letter of designation by respondent)
- Owner of the property but not named respondent (if you are a new owner, attach copy of deed)
- Authorized Agent of place of occurrence (attach letter of designation by owner)
- Partner in named respondent partnership
- Contractor or other agent of named respondent (attach written authorization from respondent)

My mailing address is: \_\_\_\_\_ (street address, city, state, zip code)

**2 Person Who Performed Work**

I have complied with the order of the Commissioner to correct each condition cited on this violation. The work described in the attached sworn statement was completed in \_\_\_\_\_ and was performed by (check one):

- Myself
- My employee
- Contractor
- Architect/Engineer

Name of person who performed work: \_\_\_\_\_  
Company: \_\_\_\_\_  
Address: \_\_\_\_\_  
License/Registration No. of professional/licensee/contractor: \_\_\_\_\_

**REQUIRED:** I have attached a sworn/affirmed statement describing the work done to correct the violating condition(s). In addition, I have attached copies of all permits, bills, receipts, photographs, and/or other documentary proof that the violating condition(s) has/have been corrected, or have explained in my statement why such are not available. I am aware that I may be required to attend any pending hearing on the violation or risk the imposition of default penalties.

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Sworn to, or affirmed under penalty of perjury, before me

this \_\_\_\_\_ day of \_\_\_\_\_ Signature \_\_\_\_\_

Notary Public \_\_\_\_\_ (Affix Stamp)

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280 Broadway, 5th Floor  
New York, NY 10007  
Phone: (212) 393-2495

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# Completing the Certificate of Correction

## Statement in Support

- You **must** attach a notarized statement providing a detailed description of the work done to correct the violating condition(s).
- You **must** also attach copies of all permits, bills, receipts, photographs, and/or documentary proof that the violating condition(s) have been corrected.

# Tips for Avoiding Violations/Summonses

- Comply with the NYC Building Code, Administrative Code, Rules, Regulations and other applicable laws
- Always obtain permits when necessary
- Work within the scope of permit
- Hire registered/licensed professionals
- Hire licensed plumbers/electricians etc.
- Hire registered contractors
- Correct outstanding violations

# Tips for Avoiding Violations/Summonses

- Do regular or scheduled maintenance on buildings and appurtenances
- Comply with Local Laws – Façade, Boiler, Elevator
- Maintain structures
- Stay current with new requirements
- Sign-up for the Department's newsletter, *Buildings News* ([www.nyc.gov/buildings](http://www.nyc.gov/buildings))
- Stay up-to-date with NYC Rules and Laws

For questions regarding resolving an OATH/ECB violation or summons please contact the Department's:

**Administrative Enforcement Unit (AEU)**  
**(212) 393-2405**