

Office of Enforcement & Neighborhood Services Housing Litigation Division 100 Gold Street New York, N.Y. 10038

## Version Effective 3/2024

## APPLICATION FOR A CERTIFICATION OF NO HARASSMENT ("CONH")

## **FILING INSTRUCTIONS**

**Requirements**: A certification of no harassment ("CONH") may be required to obtain a permit from the Department of Buildings for certain types of work based on either or both of the following:

- the type of building (an SRO multiple dwelling) pursuant to Administrative Code §28-107.2 and §27-2093;
   and/or
- the location of the property pursuant to New York City Zoning Resolution §96-110, §93-90, §98-70, and/or §23-013.

One application may be filed if the building is both an SRO multiple dwelling and located within one of the areas required to file for a Certification of No Harassment by the Zoning Resolution.

Regardless of why a CONH is required, (i) the application process is governed by rules set forth in Chapter 10 of Title 28 of the Rules of the City of New York, and (ii) you must use this form to apply for the CONH.

**Property**: You should only seek a CONH if the property for which you seek a CONH is:

1. A Single Room Occupancy ("SRO") multiple dwelling)

For the purposes of this application, "SRO multiple dwelling" has the meaning specified in Administrative Code §28-107.2. A single room occupancy multiple dwelling means:

- A "class A multiple dwelling" used in whole or part as a "rooming house" or "furnished room house," or for "single room occupancy" pursuant to section 248 of the New York state multiple dwelling law;
- A "class A multiple dwelling" containing "rooming units"; or
- A "class B multiple dwelling."

And/Or

- 2. A multiple dwelling or interim multiple dwelling located in one of the following geographic areas (as specified in the New York City Zoning Resolution):
  - The Special Clinton District § 96-110; or
  - The Special Hudson Yards District § 93-90; or
  - The Special Garment Center District § 93-90; or
  - The Greenpoint-Williamsburg anti-harassment area − § 23-013; or
  - The Special West Chelsea District § 98-70 and § 93-90.

If the property fits one of the SRO exceptions as outlined in Administrative Code §28-107.2 and is not located in any of the geographic areas specified above, you may file an "Application for an Exemption from the Certification of No Harassment Requirement." This application can be found at nyc.gov/hpd.

If the property does not fall into any of these categories, a CONH is not required.

<u>Work:</u> Regardless of the type or location of the property, a CONH is not required for all types of work. You should refer directly to the Administrative Code and/or the New York City Zoning Resolution to determine whether a CONH is required. You may also consult with the Department of Buildings.

<u>Completing the Application</u>: *All sections must be fully completed*. You must enter the BIN in question 1. The BIN can be found by searching the address through the Department of Building's Building Information system at nyc.gov/buildings. This version of the application must be used effective August 1, 2018.

Who May Apply: The applicant must be an individual natural person and must be either (i) a title holder, a contract vendee in possession, or a net lessee under a lease with at least 10 years remaining in its term ("owner"), or (ii) a principal or officer of an owner who is authorized to sign on behalf of and bind such owner. If the applicant does not have legal authority to authorize the Department of Housing Preservation and Development ("HPD") to enter all common areas of the property (for example, if the applicant is a contract vendee or is an owner who has leased the property to someone else), then the application must also be signed by an individual natural person who has such authority. If the applicant is a contract vendee, then the application must also be signed by an individual natural person who is authorized to sign on behalf of the title holder.

**Opinion of Counsel**: If title to the property is held by an entity rather than by a natural person, submit a letter from an attorney stating that:

- Based on the examination of the Company's organizational documents such as (specify which documents were consulted), you represent that the entity (name of entity) is in good standing with the Department of State, New York State.
- The applicant's relationship (official title) to the Entity.
- The applicant (name of applicant) is authorized to make all representation before DHPD on behalf of the Entity and is authorized to file the Application for Certificate of No Harassment on behalf of the Entity.
- The applicant (name) is authorized to bind the Entity (name) with regard to the filing of the Application for CONH.

**Number of Copies**: Submit one original and one copy of this application and all supporting documents.

**Fee**: Enclose a certified or bank check or a money order payable to "NYC Commissioner of Finance" for the following amount: \$160 **per dwelling unit** in the building. (The total dwelling unit count used to calculate the total fee for the building should match the certificate of occupancy, original certified letter from the Department of Buildings submitted with the application or HPD's record of the building configuration.

## **Inquiry Period**: As used below, "inquiry period" means:

- Three years before the date of the application if the property contains an SRO multiple dwelling, unless it is located in one of the five geographic areas described below (in which case the "inquiry period" as used in this application is the date specified for that geographic area);
- September 5, 1973 if the property is located in the Special Clinton District;
- June 21, 2004 if the property is located in the Special Hudson Yards District;
- June 21, 2004 if the property is located in Preservation Area P-2 of the Special Garment Center District;
- October 4, 2004 if the property is located in the Greenpoint-Williamsburg anti-harassment area; or
- December 20, 2004 if the property is located in the Special West Chelsea District.

You must indicate if a building is <u>BOTH</u> an SRO <u>AND</u> located in one of the Special Zoning Districts by checking each applicable box in question 1 of the application. You must use the earliest inquiry period start date as the date from which to provide applicable information.

<u>Required Documents</u>: Please submit the following documents with your application. Please note that if any of the required documentation is missing, HPD may reject the application.

- In conjunction with questions 8 and 9:
  - Original certified copies of all recorded deeds from the Department of Finance for current and prior owners who owned the property since the inquiry period start date.
- In conjunction with question 8, if the current title to the property is held by an entity, provide documentation in support:
  - Articles of Organization, operating agreement or LLC resolution, as well as the NYS filing receipt for the entity and a Certificate of Good standing.
- Copy of your permit application to the Department of Buildings ("DOB") (if one was submitted).
- Original certified copy of the Certificate of Occupancy, if one exists.
  - If no Certificate of Occupancy exists, attach an original certified letter from the DOB stating that the building does not have one.
- Original documentation of mortgages and any net leases for the subject property during the inquiry period.

- Supporting documentation of any criminal convictions and proceedings (see question 17).
- HPD, at its discretion, may require a copy of the architectural plans.
- Rent registrations filed with HCR within the inquiry period.
- Provide a copy of any document regarding the vacatur of any occupant listed in the response to question No. 13, such as an agreement, affidavit or any other written statement concerning the occupants' departure, if it exists.

<u>Submission Method</u>: Submit the application or submit the fee by mail (regular, certified, or registered), private courier, or hand delivery to the CONH Unit, Attention: Intake Support. **Hand deliveries are only accepted by appointment**; please email us at conhinfo@hpd.nyc.gov to schedule.

<u>Submission Location</u>: CONH Unit, Department of Housing Preservation and Development, 100 Gold Street, Room 6Z New York, NY 10038

<u>Inquiries</u>: Direct all inquiries regarding this application to: (212) 863-8266.

<u>Additional Pages</u>: If the answer to any question in this application requires additional space, please add pages to the application as necessary. For each such page, (i) clearly indicate the number of the question to which it pertains at the top of the page, and (ii) insert the page into the application immediately following that question.

<u>Obligation to Update</u>: If any information stated in the application changes at any time before HPD makes a final determination regarding whether harassment occurred, the applicant must promptly update the application with such new information and submit it to HPD. If the new information includes a change of ownership or any other facts that make the original applicant ineligible to submit the application, HPD may require that the amended application be executed by an eligible individual.

<u>Withdrawal</u>: An application may not be withdrawn after HPD issues either (i) an initial determination that there is reasonable cause to believe that harassment occurred, or (ii) a final determination that harassment occurred.

**Obligation to Update:** If any information stated in the application changes at any time before HPD makes a final determination regarding whether harassment occurred, the applicant must promptly update the application with such new information and submit it to HPD. If the new information includes a change in ownership or other facts that renders the original applicant ineligible to submit the Application, a new Application, including a new signature page executed by an eligible individual, and all supporting documentation must be submitted to HPD-in such an event, no new processing fee will be collected.

Borough: □ Manhattan	□ Brooklyn	□ Bronx	□ Queens	□ Staten Island
Block: Lot:	HPD Regi	stration ID:	BIN:	
Street Address:				
Check every box that applies (	•	•	•	plicable):
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□ The property is located in t	•			
□ The property is located in t	-			D: ( : (
☐ The property is located in I		•		
<ul><li>The property is located in </li><li>The property is located in t</li></ul>	-	•	narassment area.	•
The property is located in t	ine Special West C	neisea District.		
Type of Unit	Number of U	nits Nu	mber of Units	
<b>Apartment Dwelling Units</b>				
SRO Dwelling Units				
Total Dwelling Units				
Total Dwelling Units  Commercial Units				
Commercial Units	configuration descr	ribed above?		
Commercial Units  What is the basis of the legal of			of the legal config	uration)
Commercial Units  What is the basis of the legal of	cy (must attach if t	his is the basis	of the legal config	uration)
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Commercial Units  What is the basis of the legal of Certificate of Occupant Original certified letter	cy (must attach if t from the Departmo building currently v building been vac	his is the basis ent of Buildings vacant? cant?)		uration)

Type of Unit	Occupied	Vacant	Total
Apartment Dwelling Units			
SRO Dwelling Units			
Total Dwelling Units			
Commercial Units			

4.

notarized letter signed by each additional deed owner has to be submitted authorizing the applicant to file the application for certificate of no harassment on behalf of that owner. If the application is filed by a Net Lessee, the deed owner has to provide a notarized letter signed by the deed owner authorizing the Net Lessee to file the application for certificate of no harassment on behalf of that owner. In case of a multiple dwelling owned by an entity, the letter has to describe the corporate relationship of the person signing the letter on behalf of the entity. Name (1) \_\_\_\_ Name (2) Social Security Number: / / Social Security Number: / / Date of Birth: \_\_\_\_/\_\_/ Date of Birth: \_\_\_\_/\_\_\_/ Mailing Address: Business Telephone Number: \_\_\_\_\_ Mobile Telephone Number: Email Address: Fax Number: Relationship to the property (attach documentation): Deed Owner: \_\_\_\_\_ Deed Owner Address: Access Authorizer: Does the applicant identified in response to Question 4 have legal authority to 5. authorize the Department of Housing Preservation and Development ("HPD") to enter all common areas of the property? Yes. No (Identify the person who will sign this application to authorize such access below). The Access Authorizer listed shall be an individual natural person who either has legal possession of all common areas of the building, or is authorized to sign on behalf of and bind the persons or entities who have legal possession of all common areas of the building. Name: Social Security Number: \_\_\_\_/ \_\_\_ Date of Birth: \_\_\_/ \_\_\_ Mailing Address: Business Telephone Number: Mobile Telephone Number: Fax Number: \_\_\_\_ Email Address:

<u>Applicant(s)</u>: Identify the applicant(s). An applicant must be a natural person, not an entity. If the building is owned by more than one deed owner, all the owners need to be named as applicants or a

Relationship to the property:

A. Have any	applications for permits been filed with the Department of Buildings for work at the
property v	which would require a certification of no harassment?
□ No	(Even if no such applications for permits have been filed with the Department of
_ \/	Buildings, HPD may request copies of architectural plans).
□ Yes	(Attach a copy of each such application, stamped by the Department of Buildings, attachments thereto).
<b>B.</b> Is any cor	nstruction work currently in progress?

Prior Applica	tions For The Property	<b>⊻:</b> Has anyone ever submitted	d an application for a certification
no harassmer	nt (or an exemption or ware to the property?	aiver from the requirement for	a certification of no harassmen
⊓r D with resp ⊐ No.	ect to the property:		
	ndicate the date of the ap ement, and any other rele		ed or denied the certification of
	and any other rem	·	
Date of the Application	Applicant	Granted, Denied, Withdrawn	Other Relevant Detail
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Name	Date of Birth	SSN or EIN	Address	Ownership Start Date

**B. Current Principals and Officers:** If title to the property is held by an entity rather than by a person, list (i) every director, general partner, managing partner, or managing member of such entity, (ii) every officer of such entity, (iii) every other person authorized to sign for and bind such entity, and (iv) every person or entity holding a 10% or more economic interest in such entity. Provide an opinion of counsel letter which authorizes the individual to file the application. An opinion of counsel letter is a letter by an attorney stating that the person signing the application for the corporation, partnership or limited liability corporation, is entitled to file and act on behalf of the entity and to make all of the representations and commitments therein. **You must also provide the supporting documentation as listed in the Instructions to support the below.** 

Name	Date of	SSN	Relationship to Owner	Address and Telephone Number

**C. Current Management:** List each person who served as a managing agent, a superintendent, collected rents, supervised or ordered repairs, or exercised any other discretion in the management of the property under the current ownership.

Name and Address	Employer and Role	Period of Service

9.	Prior	Owner	ship
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Α.	Prior Owners:	: Have v	ou been the	owner for the	entire inc	uiry period?
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- □ Yes
- □ No (Complete the appropriate sections below).

List each prior holder of title to the property including individual owners, joint owners and corporate owners:

Name	Period of Ownership	Tax ID (if corporate entity)

**B. Principals and Officers Of Prior Owners:** If title to the property was previously held by an entity rather than a person at any time since the referral date, list (i) every director, general partner, managing partner, or managing member of such entity, (ii) every officer of such entity, (iii) every other person authorized to sign for and bind such entity, and (iv) every person or entity holding a 10% or more economic interest in such entity.

Name	Period of Ownership	Relationship to Owner	Address	Telephone Number

**C. Management – Prior Ownership:** List each person who served as a managing agent, a superintendent, collected rents, supervised or ordered repairs, or exercised any other discretion in the management of the property from the referral date under a prior owner.

Name and Address	Employer and Role	Period of Service
Name and Address	Employor and Rolo	1 01104 01 001 1100

10. <u>Criminal Convictions</u>: Have any of the persons or entities named on this Application (Applicants, Access Authorizer, Current Owners, Prior Owners, Current Principals & Officers, Prior Principals & Officers, Management and Prior Management) ever been convicted of a crime within the inquiry period or is any such person or entity currently or at any time during the inquiry period, a defendant in a criminal proceeding, or in a pending criminal proceeding.

Name	Court	Docket Number	Case Name	Disposition

- 11. <u>Prior Applications By Or On Behalf Of The Owner Or Applicant</u>: Has the owner, the applicant, or any other representative acting on behalf of the owner ever previously applied for a certification of no harassment for any property other than the subject property?
  - □ **No**.
  - Yes (Indicate each property for which the applicant sought a certification of no harassment and the disposition of each such application).

Borough	Block	Lot	Address	Registration ID

**12. Occupants**: List all current residential and commercial occupants of the property.

Name	Unit/ Floor	Initial Occupancy	Phone Number	Monthly Rent	Rent Stabilized	Current Lease
	No.	Date			(Y/N)	(Y/N)

12. Occ	upants	Continu	ıed
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Name	Unit/ Floor No.	Initial Occupancy Date	Phone Number	Monthly Rent	Rent Stabilized (Y/N)	Current Lease (Y/N)

If needed, please add additional page	es.	
Additional pages added?	YES	NO

13.	Former Occupants: List each former occupant who temporarily and/or permanently vacated a
	dwelling or rooming unit for any reason from the commencement of the inquiry period to the present.
	Please indicate the reason for vacatur such as relocation, buyout, eviction, surrender of occupancy
	rights or any other reason. Provide a copy of any corresponding documentation, such as an agreement,
	affidavit or any other written statement concerning the occupants' departure. If no documentation
	exists, please note "no documentation exists."

Occupant First Name	Occupant Last Name	Unit	Initial Occupancy Date	Last Monthly Rent
Move Out Date	Reason For Moving	Out	Current Address And Phone Number	Does Documentation Exist?
Occupant	Occupant Last	Unit	Initial Occupancy Date	Last Monthly

Occupant First Name	Occupant Last Name	Unit	Initial Occupancy Date	Last Monthly Rent
M O4	Danasa Fan Maria a C	4	Current Address And	Dana Danumantatian
Move Out Date	Reason For Moving C	ut	Current Address And Phone Number	Does Documentation Exist?
	Reason For Moving C	out		

Occupant First Name	Occupant Last Name	Unit	Initial Occupancy Date	Last Monthly Rent
Move Out Date	Reason For Moving C	ut	Current Address And Phone Number	Does Documentation Exist?

Occupant First Name	Occupant Last Name	Unit	Initial Occupancy Date	Last Monthly Rent
Move Out Date	Reason For Moving C	ut	Current Address And Phone Number	Does Documentation Exist?

If needed, please add additional page	es.	
Additional pages added?	YES	NO

14.	<b>Relocation</b> : Will any occupants be relocated or displaced as a result of the alteration or demolition work to be performed at the property?									
	□ No.									
	□ Yes (Provi	de details	s below).							
Nam	ie	Unit	Monthly Rent		on For Relocati splacement	on	Phone Number	Relocated to What Location		
	ded, please add add onal pages added?	ditional pa	nges.	YE	:S		NO			
15.	during the inquiry  No.	period?			New York State ch unit filed with			nunity Renewal (HCF		
4.0	•		J					,		
16.	<ul> <li>HCR Proceedings: During the inquiry period, have there been any harassment proceedings, decreasin service proceedings, or other proceedings with regard to the property before the New York State Homes and Community Renewal (HCR)?</li> <li>□ No.</li> </ul>									
	<ul> <li>Yes (Provide details below and attach a copy of each complaint and final disposition, if any).</li> <li>Docket Nature of Attorneys for Disposition or</li> </ul>									
	Party Names	Dates	Numl		Proceeding	Part		Disposition or Current Status		

- 17. Other Administrative Proceedings: During the inquiry period, have there been any administrative proceedings with regard to the property before any governmental or quasi-governmental authority other than the New York State Homes and Community Renewal?
  - □ No.
  - Yes (Provide details below and attach a copy of each complaint and final disposition, if any).

Party Names	Dates	Docket Number	Nature of Proceeding	Attorneys for Parties	Disposition or Current Status

- 18. <u>Litigation</u>: During the inquiry period, has there been any litigation with respect to the property?
  - □ No.
  - □ Yes (Provide details below and attach a copy of each petition and final disposition documents, if any).

Title and Type of Action	Index No. and Court	Plaintiff/ Petitioner's Attorney	Defendant/ Respondent's Attorney	Disposition or Current Status

	No.
_	Yes (Provide details).
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<b>Serv</b> i	<b>ces</b> : During the inquiry period, has any title holder or lessee, its agents, employees or others acting on its behalf interrupted or discontinued any services at the property including the
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perso imite	<u>ces</u> : During the inquiry period, has any title holder or lessee, its agents, employees or oth ns acting on its behalf interrupted or discontinued any services at the property, including, ld to, heat, hot water, cold water, electricity, gas, and elevator service? No.
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	or part of the property during the inquiry period or active if issued prior to the inquiry period' No. Yes (Provide details below and attach certified copies of each vacate order).						
/acat	ite Order Number:						
ssuin	ng Agency:						
	HPD						
	Department of Buildings						
	Fire Department						
	Department of Health and Mental Hygiene						
	Other (Identify):						
Date I	ssued:						
Date I	.ιπed:						
3asis	of Order:er of Occupants Displaced:						
Numb	er of Occupants Displaced:						
	er of Occupants Returned (who were displaced):						
Jescr	be any other relevant information:						
/acat	e Order Number:						
	g Agency:						
JJuli	HPD						
_							
	Department of Buildings						
<b>-</b>	Department of Buildings Fire Department						
	Department of Buildings Fire Department Department of Health and Mental Hygiene						
Date I	Department of Buildings Fire Department Department of Health and Mental Hygiene Other (Identify):						
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□ □ Date I Date I Basis Numb	Department of Buildings Fire Department Department of Health and Mental Hygiene Other (Identify):						

**22**.

	entrance door inoperable, or changed the lock on an entrance door without supplying the occupa a key?				
_	No.				
	Yes (Provide details).				
Othe	r: Provide any other information relevant to this application.				
<u> </u>					

Locks: During the inquiry period, has any title holder or lessee, its agents, employees or other persons

<u>Applicant Consent</u>: The owner of the property hereby consents to permit HPD unfettered access to the property that is the subject of this application at all times and without prior notice. The purpose of such access is for the investigation of all facts relevant to this application from the date hereof until the date upon which HPD makes a final determination with respect to the grant or denial of the certification pursuant to the application of a Certification of No Harassment.

It is understood that the failure to provide such access when requested will prevent the processing of this application and, in the discretion of HPD, may result in the denial of the issuance of a Certification.

Further, it is understood that the application may be rejected if it contains any false or misleading statements, or material omissions and the submission of a new application may be barred for 36 months.

Further, it is understood that the applicant and/or undersigned must first obtain a Certification of No Harassment from HPD and all necessary permits from the DOB prior to commencing the work, which falls under the statutory covered categories of work, at the subject premises, which is the subject of this application.

I, the applicant, have read the within application and attest that its entire contents are true and complete.

Applicant's Signature (1)	Applicant's Signature (2)				
Print Name Above	Print Name Above				
Relationship to the Property	Relationship to the Property				
Corporate Entity Designee Signature	Access Authorizer Signature				
Print Name Above	Print Name Above				
Relationship to the Owner (title)	Relationship to the Owner (title)				
Sworn to this day of					
Notary					