

CERTIFICATION OF NO HARASSMENT (“CONH”)-PILOT PROGRAM EXEMPTION INSTRUCTIONS

Requirements:

You may seek an exemption from the CONH requirement for Pilot Program buildings if the subject building is one of the following exceptions, as defined in the New York City Administrative Code section 27-2093.1, 28-505.3 and Chapter 53 of Title 28 of the Rules of the City of New York:

(Please consult the full language of the statutes listed above as the list of exemptions below is abbreviated.)

The exemptions listed below concern any multiple dwelling that:

- 1) is subject to any other provision of law or rules, including the zoning resolution, that requires a certification of no harassment;
- 2) is the subject of an HPD-approved program related to the rehabilitation or preservation of a single room occupancy or the provisions of housing for persons of low or moderate income, other than specific programs pursuant to the real property tax law;
- 3) contains dwelling units that are required to be and actually are restricted based on income pursuant to an agreement under the mandatory or voluntary inclusionary housing program and such units are occupied at the time of application;
- 4) is an exempt luxury hotel as defined by the department rules, RCNY Chapter 28, §10-01;
- 5) is a Rent Regulated Institutional Residence, the occupancy of which is restricted to non-profit institutional use;
- 6) is owned by the City or other governmental entity;
- 7) is a clubhouse; or
- 8) is a college or school dormitory.

If the building is subject to any other provision of law or rules, including the zoning resolution, that requires a Certification of NO Harassment, you must file an application under Zoning or SRO and provide the appropriate documentation to establish that the building is not eligible as a pilot program building.

You must submit one (1) application per BIN number. The BIN number is a unique identifying number used by DOB for each building in NYC. All questions must be fully completed.

Work: A CONH is not required for all types of work. You should refer directly to the Administrative Code to determine whether a CONH is required. You may also consult with the Department of Buildings (DOB). Department of Housing Preservation and Development ("HPD"), at its discretion, may require a copy of the architectural plans.

Who May Apply: The applicant must be an individual natural person and must be either a title holder, a contract vendee in possession, or a net lessee under a lease with at least 10 years remaining in its term, 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 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 in possession or net lessee, then you must submit an authorization letter executed and notarized from the deed owner(s).

Fee: There are no fees to process this application.

Required Documents: The following documents are required with your application. Please note that if any of the required documentation is missing or inadequate, HPD may reject the application. The originals of some documents must be submitted by mail or in person as indicated as well as uploaded. **Hand deliveries are only accepted Monday through Friday from 9 A.M. to 11 A.M.**

- Original certified copies of all deeds for all current and prior owners who owned the property since the inquiry period start date.
- If the current title to the property is held by an entity, provide the following documentation in support:
 - a. Articles of Organization
 - b. Operating agreement or LLC resolution
 - c. NYS filing receipt for the entity
 - d. Certificate of Good standing
 - e. Opinion of Counsel Letter: submit a letter from an attorney stating that:
 - i. 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.
 - ii. The applicant's relationship (official title) to the Entity.
 - iii. 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.
 - iv. The applicant (name) is authorized to bind the Entity (name) with regard to the filing of the Application for CONH.
- 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.
- Documentation of any net leases for the subject property during the inquiry period.
- If you are seeking permits for work in a building that is subject to a program related to the rehabilitation or preservation of a single room occupancy or the provision of affordable housing for persons of low or moderate income, you must submit a signed letter from the application HPD program area as supporting documentation.
- If you are seeking permits for work in a building contained dwelling units that are required to be and actually are restricted base on income, you must submit a copy of the inclusionary housing agreement.
- If you are seeking a permit for work in a building that is a clubhouse, college/school dormitory, or a luxury hotel, you must provide supporting documentation to establish qualification for exemption.

Submission of Original Documents: Submit any original documentation or submit the fee by mail (regular, certified, or registered), private courier, or hand delivery to the CONH Unit, Department of Housing Preservation and Development, 100 Gold Street, Room 6Z New York, NY 10038, Attention: Rhonda Waldon. **Hand deliveries are only accepted Monday through Friday from 9 A.M. to 11 A.M.**

Inquiries: Direct all inquiries regarding this application to: **(212) 863-8266**.

Additional Pages: 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 the question.

The City of New York
DEPARTMENT OF PRESERVATION AND DEVELOPMENT
Housing Litigation Division

Application for an Exemption from the Certification of No Harassment ("CONH") Pilot Program Requirement

1. Property Information: Identify the property that is the subject of this application.

House No.	Street Name	Borough
<input type="text"/>	<input type="text"/>	<input type="checkbox"/> Manhattan <input type="checkbox"/> Queens
		<input type="checkbox"/> Brooklyn <input type="checkbox"/> Staten Island
Block	Lot	HPD Registration ID
<input type="text"/>	<input type="text"/>	<input type="text"/>
		BIN
		<input type="text"/>
		<input type="checkbox"/> Bronx

2. Exemption Sought: Please indicate the exemption requirement you are seeking. Please check every box that applies. The building:

<input type="checkbox"/>	is the subject of a Department-approved program related to the rehabilitation or preservation of a single room occupancy or the provision of affordable housing for persons of low or moderate income.
<input type="checkbox"/>	contains dwelling units that are required to be and actually are restricted based on income pursuant to an agreement under the mandatory inclusionary housing program or the voluntary inclusionary housing program.
<input type="checkbox"/>	is a Rent Regulated Institutional Residence, the occupancy of which is restricted to non-profit institutional use exempted from the requirements of section 27-2093.1 of the Administrative Code by the Department.
<input type="checkbox"/>	is a clubhouse
<input type="checkbox"/>	is a college or school dormitory
<input type="checkbox"/>	is a Luxury Hotel

3. Building Configuration: Attach an original certified copy of the certificate of occupancy if one exists. Describe the legal and actual configuration of the building below.

Type of Unit	Legal Configuration (Number of Units)	Actual Configuration (Number of Units)
Apartment Dwelling Units		
SRO Dwelling Units		
Total Dwelling Units		
Commercial Units		

A. What is the basis of the legal configuration?

☐ Certificate of Occupancy

☐ Other

Specify

4. Building Occupancy: Is the building currently vacant?☐ Yes, Date Vacant (MM/YYYY)☐ No (Describe the current occupancy below.)

Type of Unit	Occupied (Number of Units)	Vacant (Number of Units)	Total
Apartment Dwelling Units			
SRO Dwelling Units			
Total Dwelling Units			
Commercial Units			

5. Applicant(s): Identify the applicant(s). The applicant must be an individual natural person and must be either a title holder, a contract vendee in possession, a net lessee under a lease with at least 10 years remaining in its term or a principal or officer of an owner who is authorized to sign on behalf of and bind such owner. If the building is owned by more than one deed owner, all the owners need to be named as applicants or a 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 or contract vendee in possession, the deed owner has to provide a notarized letter signed by the deed owner authorizing the net lessee or contract vendee in possession to file the application for certification of no harassment on behalf of that owner. In case of a multiple dwelling owned by an entity, you must provide an Opinion of Counsel Letter pursuant to the instructions.

Primary Applicant: The primary applicant identified will receive all communications regarding this application.

First Name**Last Name****Date of Birth****Social Security No.****E-mail Address****Address****Suite****City****State****Zip****Business Phone****Mobile Phone****Fax Number****Relationship to Property****Secondary Applicant****First Name****Last Name****Date of Birth****Social Security No.****E-mail Address**

6. Basis for Exemption: Please provide a statement detailing the basis for the exemption and all documentation substantiating the claim.

7. Prior Applications for the Property: Has anyone ever submitted an application for an exemption or waiver from the requirement for a certification of no harassment to HPD with respect to the property?

☐ No

☐ Yes (Please provide the details requested below).

Application Date	Applicant First Name	Applicant Last Name	Status

8. Current Ownership

A. Current Owner(s): List each current holder of title to the property including individual owners, joint owners and corporate owners.

Name (1)	Date of Birth	SSN/EIN	Business Phone
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Address	Suite	City	State	Zip
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Name (2)	Date of Birth	SSN/EIN	Business Phone
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Address	Suite	City	State	Zip
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Name (3)	Date of Birth	SSN/EIN	Business Phone
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Address	Suite	City	State	Zip
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

B. Current Principals and Officers: If title to the property is held by an entity rather than by an individual natural 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. You must provide the supporting documentation listed in section 2 of the instructions.

First Name	Last Name	Date of Birth	Social Security No.	Business Phone
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Address	Suite	City	State	Zip	Role
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

B. Current Principals and Officers

First Name	Last Name	Date of Birth	Social Security No.	Business Phone

Address	Suite	City	State	Zip	Role

First Name	Last Name	Date of Birth	Social Security No.	Business Phone

Address	Suite	City	State	Zip	Role

First Name	Last Name	Date of Birth	Social Security No.	Business Phone

Address	Suite	City	State	Zip	Role

First Name	Last Name	Date of Birth	Social Security No.	Business Phone

Address	Suite	City	State	Zip	Role

First Name	Last Name	Date of Birth	Social Security No.	Business Phone

Address	Suite	City	State	Zip	Role

First Name	Last Name	Date of Birth	Social Security No.	Business Phone

Address	Suite	City	State	Zip	Role

First Name	Last Name	Date of Birth	Social Security No.	Business Phone

Address	Suite	City	State	Zip	Role

First Name	Last Name	Date of Birth	Social Security No.	Business Phone

Address	Suite	City	State	Zip	Role

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

First Name	Last Name	Company Name	Business Phone	
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	
Address	Suite	City	State	Zip
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Role	Service Start Date	Service End Date		
<input type="text"/>	<input type="text"/>	<input type="text"/>		

First Name	Last Name	Company Name	Business Phone	
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	
Address	Suite	City	State	Zip
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Role	Service Start Date	Service End Date		
<input type="text"/>	<input type="text"/>	<input type="text"/>		

First Name	Last Name	Company Name	Business Phone	
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	
Address	Suite	City	State	Zip
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Role	Service Start Date	Service End Date		
<input type="text"/>	<input type="text"/>	<input type="text"/>		

First Name	Last Name	Company Name	Business Phone	
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	
Address	Suite	City	State	Zip
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Role	Service Start Date	Service End Date		
<input type="text"/>	<input type="text"/>	<input type="text"/>		

First Name	Last Name	Company Name	Business Phone	
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	
Address	Suite	City	State	Zip
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Role	Service Start Date	Service End Date		
<input type="text"/>	<input type="text"/>	<input type="text"/>		

9. Reason For Application

A. Have any applications for permits been filed with DOB for work at the property which would require a certification of no harassment?

- ☐ Yes (Attach a copy of each application, stamped by DOB, and all attachments thereto).
- ☐ No

B. Is any construction work currently in progress?

- ☐ No
- ☐ Yes (Provide details below).

C. Briefly describe the reason for this application (e.g., the alteration or demolition work to be performed at the property).

Applicant Consent: 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. 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 an Exemption from the requirement of obtaining a Certification of No Harassment.

Further, it is understood that the application may be denied if it contains any false or misleading statements, or material omissions.

Further, it is understood that the applicant and/or undersigned must first obtain an Exemption from the requirement of obtaining a Certification of No Harassment from HPD and all necessary permits from the DOB prior to commencing the 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.

Primary Applicant Signature

Secondary Applicant Signature

Print Name Above

Print Name Above

Relationship to the Property

Relationship to the Property

Corporate Entity Designee Signature

Print Name Above

Relationship to the Owner (title)

Sworn to this _____ day of _____, 20____

Notary