

**CERTIFICATION OF CORRECTION OF VIOLATION(S)**

Complete entire form and sign below.

State of New York

)SS:

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

I, \_\_\_\_\_ (PRINT NAME), swear or affirm under penalty of perjury as follows:

1. \_\_\_\_\_ That the building is a multiple dwelling, or is a one- or two-family house and neither I nor any family member occupies it, and, I am currently registered with the Division of Code Enforcement for the subject property in the capacity of:

- ☐ Owner of the property  
☐ Officer or Director of the Corporation that owns the property  
☐ Managing Agent of the property, or  
☐ Otherwise registered as responsible for the property

OR

\_\_\_\_\_ That I am the owner of a one or two family house and I or my immediate family member occupies the dwelling, and therefore are not required to register.

2. That I have examined the area(s) identified on the Notice of Violation ID \_\_\_\_\_ by violation(s) number(s) \_\_\_\_\_ and to my knowledge such violation(s) whose number(s) I have listed was (were) corrected, including the source of the mold condition, in accordance with the safe work practices outlined in Administrative Code §27-2017.9 and 28 RCNY §54-04(b) on \_\_\_\_\_ (date) by:

\_\_\_\_\_ Myself, an employee, or managing agent \_\_\_\_\_  
 Print Name

OR

\_\_\_\_\_ That if a firm was used to perform mold assessment and mold remediation or abatement all work was performed in accordance with Article 32 of New York State Labor Law using safe work practices as outlined in Administrative Code §27-2017.9 and 28 RCNY §54-04(b). And I have attached the following:

- A copy of the Mold Assessment Contractor license \_\_\_\_\_  
 Firm Name

AND

- A copy of the Mold Remediation Contractor license  
**OR** the Mold Remediator's Worker Supervisor's license \_\_\_\_\_  
 Firm Name

3. My signature below indicates that I am submitting a separate and distinct certification for each violation listed above by violation number and I am aware that I am subject to penalties for false certification for each violation certified on this form.

Sworn to me this

\_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_

Signature

Notary Public

Print Name

Phone Number

THE MAKING OF A FALSE CERTIFICATION IS A CRIME  
 PUNISHABLE BY A FINE AND/OR IMPRISONMENT



Printed on paper containing 30% post-consumer material.