

The City of New York
DEPARTMENT OF HOUSING PRESERVATION AND DEVELOPMENT
Office of Development / Unlocking Doors Program
Owner's Affidavit

Date:

STATE OF NEW YORK)
CITY OF NEW YORK) SS.:
COUNTY OF)

Re: Application #: _____
Property Address: _____ ("Property")
Unit number: _____ ("Unit")

I, _____, being duly sworn, depose and say:
(name)

1. I am over the age of 18 years and I reside at _____ .
(address/borough)

2. I am the _____ of dwelling "Unit" at the "Property".
(owner, sponsor, officer)

3. I prepared or caused the preparation of the attached application for a Final Certificate of Eligibility for the repair of the Unit in order to secure a reimbursement grant pursuant to Subchapter C of Chapter 10 of Title 68 of the Rules of the City of New York and Chapter 60 of Title 28 of the Rules of the City of New York. I hereby affirm that all the information and documentation submitted is true, accurate and complete.

4. I further affirm, as required pursuant to Section 60-02(c)(2)(C) of Chapter 60 of Title 28 of the Rules of the City of New York, that the Unit is in compliance with the lead-based paint investigation requirement of subdivision a-1 of section 27-2056.4 of the Administrative Code of the City of New York and the turnover requirements of section 27-2056.8 of such code.

5. I make these statements to induce the City of New York to issue a reimbursement grant and know the City of New York will rely on the veracity of such statements in issuing a reimbursement grant. The attached application is intended to be a written instrument as defined in Article 175 of the Penal Law and I understand that any false statement therein is punishable as a Class E felony that provides a term of imprisonment not to exceed four years.

Sworn to me this ___ day
of _____ 202__.

NOTARY PUBLIC

Affiant Signature

Name

Title

Notary Public