

BUILDING'S INFORMATION

House No.(s) _____ Street Name _____

Borough _____ Block _____ Lot _____ IMD No. _____

OWNER'S INFORMATION

Name of Owner _____

Owner's Address _____

Phone Number(s) and Email _____

Alt. No.: _____

PREPARER'S CERTIFICATION *(form must be signed by a licensed Professional Engineer or Registered Architect)*

I am a Professional Engineer/ Registered Architect *(indicate appropriate)*. I certify that this Narrative Statement is a complete and accurate statement of the work proposed in Alteration Application Job No. _____ and plans for the units and common areas described.

I certify that I or my staff *(indicate appropriate)* _____ *(name of staff person)* inspected the IMD residential units _____ on _____ and these plans are based on the inspection. If the residential units were inspected on different dates, I have attached a separate sheet listing the unit, the date of the inspection and the name of the person who completed the inspection. To the best of my knowledge, the architectural plans reflect the conditions as they existed on the date of the inspection.

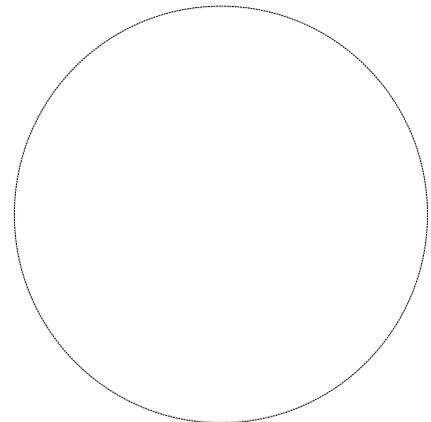
Name (printed)

Mailing Address

License Number and Expiration Date

Signature

Date



Affix seal and signature in accordance with all regulations applicable when applying signature and seal to official documents filed with the NYC Loft Board.

NOTE: False statements may subject you to the penalties provided by law, including fines and/or imprisonment.

NARRATIVE STATEMENT:
Description of Work

LOCATION OF WORK <i>(Unit Designation or Common Area)</i>	WORK TO BE PERFORMED	TYPE & AMOUNT OF MATERIAL/EQUIPMENT	ESTIMATED TIME SCHEDULE	NON-COMPLIANT CONDITIONS ADDRESSES <i>(Include Citation of Law)</i>	COMMENTS
LOCATION OF WORK <i>(Unit Designation or Common Area)</i>	WORK TO BE PERFORMED	TYPE & AMOUNT OF MATERIAL/EQUIPMENT	ESTIMATED TIME SCHEDULE	NON-COMPLIANT CONDITIONS ADDRESSES <i>(Include Citation of Law)</i>	COMMENTS
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NARRATIVE STATEMENT: SECTION 2-01(d)(2)
**Owner's Certification of Compliance with Occupant
Notice Provisions of Code Compliance Regulations**

INSTRUCTIONS

The owner **must** complete this form and file it at the Department of Buildings (DOB) within five (5) days after filing the Narrative Statement and legalization plan with the Loft Board.

BUILDING INFORMATION

House No.(s) _____ Street Name _____

Borough _____ Block _____ Lot _____ IMD No. _____

OWNER INFORMATION

Name(s) of Owner(s) _____

Address _____

Phone Number(s) _____

Email _____

Owner's Verification

I hereby verify, under the penalties provided by law, including fine and imprisonment, or both, that:

1. All occupants of the above address have been served with copies of the Narrative Statement and that the NYC Loft Board has been served with the original Narrative Statement and attachments.
2. I will comply with all other requirements of 29 RCNY Section 2-01(d).
3. I will comply with the requirements for a tenant protection plan pursuant to NYC Administrative Code Section 28-104.8.4; **and**
4. I understand that prior to the issuance of a building permit, I must submit to the borough office a letter from the NYC Loft Board certifying compliance with all requirements of 29 RCNY § 2-01(d).

Name (print)

Title (Owner, Officer of Corporation, Lessee)

Signature

Date