

Request for access to premises

Keys are not to be duplicated.

A. OWNERSHIP INTEREST						
State of New York			SS:			
County of					g duly sworn, deposes and says:	
I an	the o	owner / lessee / other (specify if other) _				
of th	ne pre	mises located at:	(SUBJECT PREMISES)	, floor	(if applicable),	
Borough of						
The	attac	hed documentation will evidence my int	erest in the subject premises.			
			_	(SIGNATU	RE)	
Swo	orn to	me this day of	, 20	Internal Use Only		
				Legal interest accepted by Pac	dlock Enforcement Unit	
Notary Public				(SIGNATURE)	(DATE)	
			D OTATEMENT OF	INITENIT		
			B. STATEMENT OF	INIENI		
Stat	e of N	lew York	SS:			
Col	inty of				g duly sworn, deposes and says:	
000	County of			E)		
1.	1. By order of the Commissioner of the Department of Buildings, an Order of Closure was posted at the subject premises					
	on or about:(DATE)					
	Вус	order of the Commissioner of the Depart	,	emises was sealed on:		
			upon a finding by the Commission	(DATE)		
2. The above Order of Closure posting and sealing of the premises was based upon a finding by the Commissioner of the Depar						
	Buildings that the following violating condition(s) exist(s) at the subject premises:					
I require access to the sealed premises for the following purpose(s):						
	a.	To correct the violating condition(s) by	taking the following actions:			
	b.	Other purpose (describe):				

STATEMENT OF INTENT (CONTINUED)

- 4. I understand that the release to me by the City of New York of the key(s) to the padlock(s) on the subject premises is solely for the purpose(s) listed in paragraph 3, and that the premises will not be open for any other reason. I have attached to this affidavit any documents available to demonstrate the work I intend to do.
- 5. I understand that if the key(s) to the padlock(s) on the subject premises are used for any purpose other than that sworn to by me in this affidavit, such use will be deemed a violation of the Order of Closure described in paragraph 1 above and that I may be subject to arrest.
- 6. I agree to return the key(s) to the padlock(s) on the subject premises to the Department of Buildings upon request, or upon the date indicated below, whichever is earlier.
- 7. I understand that failure to return said key(s) to the Department by the date specified below may result in the Department's pursuing any further remedies provided by law.
- 8. I agree to re-padlock the premises prior to returning the key(s).

(SIGNATURE)

(DATE)

chain and padlock to resecure the premises.

Address __

I hereby state that the above information is correct and complete to the best of my knowledge.

Falsification of any statement is a misdemeanor under the Administrative Code and is punishable by fine, imprisonment, or both.

It is unlawful to give a city employee, or for a city employee to accept, any benefit, monetary or otherwise, either as gratuity for properly performing the job or in exchange for special consideration. Violation is punishable by fine, imprisonment or both.

____ Phone no. ___

Notary Public				
For Internal Use Only				
Photo taken, initialed and attached	Copies of identification attached			
Reasons access granted (If shown on documents, reference documents):			
Key(s) must be returned by(DATE)	Number of key(s) released			
	(SIGNATURE)			
	, c. c			

For Key Return Only

____, I returned _____ key(s) for the above premises, having replaced the Department's

(SIGNATURE)