



212-615-8329 housing@recovery.nyc.gov nyc.gov/builditback

Appeal Form

The Build it Back program provides customers with a process for appealing certain program determinations made by the program. If your Request for Review of a Build it Back program determination was denied you may file an appeal with the HRO.

INSTRUCTIONS

Please complete and submit this form to:

Mayor's Office of Housing Recovery Operations

Church St Station

P.O. Box 468

New York, NY 10008-0468

You may also fax the form to (212) 312-0857 or e-mail it to legal@recovery.nyc.gov

Name (Please print)	:			
Application # (If kn	own):			
Mailing Address:				
Date of Determinat	ion:			

(complete next page)

Please provide a written explanation of why you believe the appeal should be granted and what you believe the determination should be. You may attach additional documents to support your explanation. An Appeal must be filed no later than thirty (30) days after the date of the denial of the Request for Review. **EXPLANATION** (required) Date Signature