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NYC DEPARTMENT OF FINANCE • RENT FREEZE PROGRAM

CERTIFICATION OF NO RENEWAL LEASE FORM

Mail to: NYC Department of Finance, Rent Freeze Program, P.O. Box 3179, Union, NJ 07083

Instructions: This form should be completed, signed, and submitted by a rent-stabilized renewal applicant who is unable to obtain a renewal lease from the landlord. This form is not a substitute for your renewal application. You must submit your renewal application in addition to this form. Note, you may not use this form for consecutive renewal periods.

A renewal lease is required by the Department of Finance to grant any increase to your benefit. Please make all efforts to obtain and submit a lease that has been signed by you and your landlord. If you are unsuccessful, you may submit this form with proof of tenancy/address. Your benefit can be renewed, with no increase to your current benefit, if you meet all other eligibility requirements. An adjustment will be made once a lease is provided.

If you have questions about this form, please visit www.nyc.gov/contactdof, or call 311.

SECTION I - APPLICANT INFORMATION

First Name:		Last Name:	
Address (Number and Street):		Apartment Number:	
City:	State:	ZIP Code:	
Docket Number:		Telephone Number:	

SECTION II - REASON FOR FILING FORM

Indicate the reason you cannot provide a lease with your renewal application (check one box only):

- My lease is about to expire/has expired on ___/___/___ and my landlord has not provided me with a renewal lease.
Date
- My landlord and I have a verbal agreement, and I will not receive a renewal lease.
- Other. Please explain: _____

SECTION III - PROOF OF TENANCY/ADDRESS

In lieu of a lease, the Department of Finance requires that you submit proof that you currently reside in the apartment. Please submit one of the following:

- Rent statement for this month or the previous month.
- Utility bill in your name for this month or the previous month.
- Proof of rent paid for this month or the previous month.

SECTION IV - CERTIFICATION

I hereby affirm under the penalties imposed by law that the information provided herein is true, correct, and complete. I understand that by submitting this document, my benefit will be renewed without an increase if I meet all other requirements.

I acknowledge that I cannot receive an increased benefit unless I provide a renewal lease indicating my new and increased rent.

_____ / ___ / _____
Signature of Tenant Printed Name of Tenant Date