

**NEW YORK CITY HOUSING AUTHORITY
APPLICATIONS & TENANCY ADMINISTRATION DEPARTMENT**

TRESPASS: RESIDENCE EXCEPTION APPLICATION

EXCLUDED PERSON

NAME: _____ DATE OF BIRTH: _____

PRESENT ADDRESS: _____ APT #: _____

BOROUGH: _____ STATE: _____ ZIP: _____

EXCEPTION ADDRESS: _____

BOROUGH: _____ STATE: _____ ZIP: _____

NYCHA DEVELOPMENT: _____

DATE OF ARREST: _____ ARREST NUMBER(S): _____

PLACE OF ARREST: _____

LEGAL REPRESENTATIVE (IF ANY): _____

PRESENT ADDRESS: _____ APT #: _____

BOROUGH: _____ STATE: _____ ZIP: _____

I REQUEST THAT MY EXCLUSION FROM NYCHA PROPERTY BE SUBJECT TO A RESIDENCE EXCEPTION FOR THE APARTMENT LISTED ABOVE BECAUSE I AM AN AUTHORIZED RESIDENT OF THAT APARTMENT. I HAVE ATTACHED THE FOLLOWING DOCUMENTS IN SUPPORT OF THIS CHALLENGE: (You must submit proof that you are an authorized resident of the apartment listed above, such as a copy of a current lease or tenant's affidavit of income with your name on it.)

SIGNATURE OF EXCLUDED PERSON	DATE
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DIRECTIONS FOR FILLING OUT THIS FORM:

ATTACH TO THIS FORM ANY DOCUMENTS THAT SUPPORT YOUR CLAIM.

SUBMIT THIS FORM IN PERSON OR BY MAIL TO:
NEW YORK CITY HOUSING AUTHORITY, OFFICE OF THE TRESPASS COORDINATOR
90 CHURCH STREET, 9TH FLOOR, NEW YORK, NY 10007

NOTE TO THE EXCLUDED PERSON: YOU WILL RECEIVE A WRITTEN DECISION IN THE MAIL TELLING YOU WHETHER OR NOT YOUR APPLICATION HAS BEEN GRANTED. WHILE YOU ARE WAITING FOR THE DECISION, YOU ARE STILL BARRED FROM NYCHA PROPERTY AND YOU MAY BE ARRESTED FOR CRIMINAL TRESPASS IF YOU ARE FOUND ON NYCHA PROPERTY IN VIOLATION OF THE EXCLUSION ORDER THAT YOU RECEIVED. ONLY A WRITTEN DECISION FROM THE TRESPASS COORDINATOR CAN END THE EXCLUSION.

