

- C. The tenant has unreasonably refused to permit owner/agent to restore service which was the basis for a rent reduction order or an order directing restoration of service issued ____/____/____, under Order or Docket Number _____. **Attach a complete copy of the order. Please give explanation on reverse side as to circumstances and attach required documentation as explained below:**

The owner must submit copies of two letters to the tenant attempting to arrange access. Each of these letters must have been mailed at least eight (8) days prior to the date proposed for access, and must have been mailed by certified mail, return receipt requested.

If a "no access" inspection is scheduled by this Agency, the tenant, owner and/or his repair person(s) are required to be present and ready to begin repairs.

Part I - Statement and Affirmation of Owner

Instructions: Clearly describe the restored services, equipment or facilities, the date made or furnished, whether the equipment is new or used and the cost. Submit receipted bills or other evidence of the expenditure. A separate application must be filed for each tenant. (If more space is required, attach a separate sheet to this application.)

Check box D, E, or F if applicable:

- D. The above named tenant of subject unit agrees and consents to same (**PART III -Tenant's Statement of Consent must be signed**).
- E. For building-wide orders only: An affidavit of an independent licensed architect or engineer is included stating that the conditions that are the subject of the order referenced above do not exist. The affidavit is signed by the person investigating the condition(s) and indicates when the investigation was conducted and findings with respect to each condition. See Notice To Owners (RTP-19.1) for further information.
- F. A Major Capital Improvement (MCI) application has been filed for the subject building and is pending under Docket Number _____.

Affirmation

The owner must date and sign.

I have read the above and I affirm under the penalties provided by law that the contents are true of my own knowledge.

Date: ____/____/____ Signature of owner/agent: _____

Part II - Owner's Certification

The owner must complete and sign, unless box C was checked on the front of this application. If this building is owned by a corporation, this Certification must be signed by a principal.

_____, certifies that (s)he is the
(Print Name)
_____ of _____
(Give title: i.e., President; Individual Owner; Partner; etc.) (Full name of owner of building, if a corporation)

and also certifies that the owner is fully familiar with the physical condition of the property; that the owner is maintaining and will continue to maintain all services furnished or required to be furnished under DHCR's Rules and Regulations; and that this certification applies to all of the apartments and all of the building-wide services in this building.

Date: ____/____/____ Signature of owner or principal: _____

Part III - Tenant's Statement of Consent

I, _____, am the tenant of the housing accommodation involved . I have read the application and agree that services have been restored.

Date: ____/____/____

Signature of tenant: _____

It is not necessary that the above be sworn to, but false statements may subject you to the penalties provided by law.

This form must be mailed or delivered to the Division of Housing and Community Renewal (DHCR) office where the subject building is located. These offices are listed below:

New York City

**DHCR, Gertz Plaza
92-31 Union Hall St., 4th Floor
Jamaica, NY 11433**

Nassau

**DHCR
50 Clinton Street, 6th Floor
Hempstead, NY 11550**

Westchester/Rockland

**DHCR
75 S. Broadway, 2nd Floor
White Plains, NY 10601**