



# THE CITY OF NEW YORK Department of Sanitation

DS 699a(8-95)

125 WORTH STREET  
NEW YORK, NY 10013

## COMPLAINT FORM/AFFIDAVIT

State of New York

} SS:

County of \_\_\_\_\_

\_\_\_\_\_, being duly sworn, deposes and says:  
(Print full name)

1. I reside at \_\_\_\_\_  
(Street Address) (City) (State) (Zip)

2. I am employed with \_\_\_\_\_  
(Name and Address)

3. Phone: Work ( ) \_\_\_\_\_ Home ( ) \_\_\_\_\_

4. (Fill out if under 18 years of age). I am \_\_\_\_\_ years old. My birthdate is \_\_\_\_\_, 19\_\_\_\_.

5. At approximately \_\_\_\_\_ a.m./p.m. on \_\_\_\_\_ 19\_\_\_\_, I personally observed a dump truck or other vehicle dump, or dispose of certain offensive matter, such as:

\_\_\_\_\_  
(Amount) (Describe Material)

\_\_\_\_\_  
(Address/Location) (Borough)

The truck or vehicle bore \_\_\_\_\_ license plate no. \_\_\_\_\_ This truck or vehicle was a(n) \_\_\_\_\_  
(State) (Make, model, color, type, size, etc.)

6. This affidavit is being furnished to the Department of Sanitation to enable the Department to take whatever enforcement action is appropriate after Department investigation as to ownership of the above described vehicle and any other matters believed to be relevant with respect to the statements made by me.

7. I understand that if a legal procedure is commenced against the owner of the above described vehicle, it will likely be necessary for me to appear as a witness in such a proceeding, and I agree to appear if requested by a representative of the Department of Sanitation.

8. I request this case be assigned for adjudication in \_\_\_\_\_ Manhattan \_\_\_\_\_ Brooklyn \_\_\_\_\_ Queens at  
\_\_\_\_\_ 8:30 a.m. \_\_\_\_\_ 10:30 a.m. \_\_\_\_\_ 1:00 p.m. \_\_\_\_\_ 2:30 p.m.

9. I am readily available at the above telephone number(s) and if called agree to appear in ECB court within 2 hours of being notified. Therefore, I request call standby status \_\_\_\_\_  
(Check) (Sign)

(Note: Only available for 8:30 a.m., 10:30 a.m. and 1:00 p.m. appearance times)

Sworn to before me

this \_\_\_\_\_ day of \_\_\_\_\_, 19\_\_\_\_.

\_\_\_\_\_  
(Print Name of Complainant)

\_\_\_\_\_  
(Signature of Notary Public)

\_\_\_\_\_  
(Signature of Complainant)