Building Owner / Representative

Address

Borough, State & Zip

Date

The Mayor’s Office for People with Disabilities

100 Gold Street, 2nd Floor

New York, New York  10038

**RE: Project Open House**

To Whom it May Concern,

Please be advised that I am the building owner / representative of the building located at \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ *(Applicants full address where work is to be done)*. I hereby give the NYC Housing Preservation & Development (“HPD”) and The Mayor’s Office for People with Disabilities (“MOPD”) the authorization to perform accessibility modifications for \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ *(Applicants full name)* as per the attached scope of work provided by HPD & MOPD.

Sincerely,

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*(Building owner / Representative name)*