



**Board of Standards  
and Appeals**

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New York, NY 10007  
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646-500-6271 - Fax  
[www.nyc.gov/bsa](http://www.nyc.gov/bsa)**

***Margery Perlmutter***  
*Chair/Commissioner*

FORM FOR OBJECTION OR CONSENT

The NYC Board of Board of Standards and Appeals has scheduled a public hearing on the following application:

Address:

Applicant:

Please complete the Affidavit provided below and indicate whether you consent or object to the application.

Name: \_\_\_\_\_

I am the owner of or lessee at the following:

Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_ I support the application

\_\_\_ I object to the application for the following reasons (attach additional paper if necessary)

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

\_\_\_\_\_  
Sign Here

Sworn to before me this \_\_\_\_\_ day

Of \_\_\_\_\_ 2 \_\_\_\_\_

\_\_\_\_\_  
(Notary Public)