

INSTRUCTIONS FOR CITIZENS AIR COMPLAINTS

All questions are required to be answered in English. Before filing the complaint form it is important to read the FAQs (frequently asked questions) that can be found on the home page.

Login Page Screenshot:

NYC Idling Complaint



Login

Email *

Password *

[Login](#)

[Forgot Password](#)

[Not registered? Create an account](#)

1 PLEASE LOGIN OR CREATE AN ACCOUNT

2 Login

3 Email

4 Password

5 Login

6 Forgot Password

7 Not registered? Create an account

Registration Screenshot:

Password policy: password must be at least 8 characters, with at least one upper case letter, lower case letter, number, and special character. Remember Security Answer for future password retrieval.

Profile

First Name

Last Name

Email

Password

Confirm Password

Security Question

Security Answer

Address1

Address2

City

State

Zip Code

Telephone

Registration:

8 Password policy: password must be at least 8 characters, with at least one upper case letter, lower case letter, number, and special character. Remember Security Answer for future password retrieval.

9 Profile

10 First Name

11 Last Name

12 Email

13 Password

14 Confirm Password

15 Security Question - **CHOOSE ONE**

A What was the name of your first pet?

B What is the name of the street you lived on in 2010?

C What is the name of your favorite teacher?

D What is your favorite brother-in-law's first name?

E What is your favorite car make and model?

16 Security Answer

17 Address1

18 Address2

19 City

20 State

21 Zip Code

22 Telephone

23 Submit

24 Cancel

Qualifying Criteria/Your Contact Information Screenshot:

Qualifying Criteria

If any of the below qualifying questions apply, please select Yes:

- Is the BUS / VAN capacity 15 passengers or less, including the driver?
- Was the BUS / VAN loading and unloading passengers during the idling event?
- Was the TRUCK / VAN involved in an activity classified as process [i.e. refrigeration trucks, ice cream trucks, cement trucks, trucks using lift gates, armored trucks, garbage trucks collecting waste, etc.] during the idling event?
- Is it a PRIVATE VEHICLE?

Yes No

Your Contact Information

Name	Sara Pecker		Email	specker@dep.nyc.gov	
Telephone	718 595 5487		Address	59-17 Junction Blvd	
City	corona	State	NY	Zip	11373

25 Qualifying Criteria

26 If any of the below qualifying questions apply, please select Yes:

27 Is the BUS / VAN capacity 15 passengers or less, including the driver?

28 Was the BUS / VAN loading and unloading passengers during the idling event?

29 Was the TRUCK / VAN involved in an activity classified as process [i.e. refrigeration trucks, ice cream trucks, cement trucks, trucks using lift gates, armored trucks, garbage trucks collecting waste, etc.] during the idling event?

30 Is it a PRIVATE VEHICLE?

31 Yes

32 No

33 We are sorry. Your submission can not be accepted by DEP. This idling complaint is not consistent with the requirements listed in Section 23-163 of the New York City Administrative Code. Thank you for participating in this effort to improve NYC's air quality.

34 Your Contact Information

35 Name

36 Email

37 Telephone

38 Address

39 City

40 State

41 Zip

Person Associated/Occurrence Prompting Complaint Screenshot:

The Person or Company Associated with Your Complaint ?

Company Name	State
<input type="text"/>	--
<input type="checkbox"/> This address is a P. O. Box	
House Number	Street Name/P. O. Box
<input type="text"/>	<input type="text"/>
Apt/Floor/Suite/Unit	
<input type="text"/>	
City	Zip
<input type="text"/>	<input type="text"/>

The Occurrence Prompting Your Complaint

Occurrence Date From	Occurrence Date To
<input type="text"/>	<input type="text"/>
Location	
--	
House Number	Street Name
<input type="text"/>	<input type="text"/>
State	Borough
NY	--
Vehicle Type	
--	
License Plate	License State
<input type="text"/>	--
In front of School	Section of the NYC Administrative Code (prefix: 24-)
--	24-153

42 The Person or Company Associated with Your Complaint

43 Company Name

44 State

45 This address is a P. O. Box

46 House Number

47 Street Name/P. O. Box

48 Apt/Floor/Suite/Unit

49 City

50 Zip

51 The Occurrence Prompting Your Complaint

52 Occurrence Date From

53 Occurrence Date To

54 Location

55 Location of the vehicle where it was idling for longer than 3 minutes, or longer than 1 minute (if adjacent to a school) **CHOOSE ONE**

--

Between

In front of

Intersection

56 House Number

57 Street Name

58 State

59 Borough

60 Vehicle Type **CHOOSE ONE**

--

61 BUS

62 TRUCK

63 VAN

64 License Plate **REQUIRED**

65 License State

66 In front of School

67 Yes

68 No

Section of the NYC Administrative Code

24-163

Describe Complaint/Acknowledgement Screenshot:

Describe the Complaint

Please describe the complaint in the space here.



Acknowledgement

I am the person who took the video, and witnessed and/or observed the alleged violation of Section 24-163. Pursuant to Section 24-182 of the Administrative Code of the City of New York, I affirm that I have read and adhered to all the requirements that are contained in this Section.



I further affirm that all statements on this form are true and accurate and that I understand false statements are punishable as a Class A Misdemeanor pursuant to section 210.45 of the Penal Law.

69 Describe the Complaint

70 Please describe the complaint in the space here.

71 Acknowledgement

72 I am the person who took the video, and witnessed and/or observed the alleged violation of Section 24-163. Pursuant to Section 24-182 of the Administrative Code of the City of New York, I affirm that I have read and adhered to all the requirements that are contained in this Section.

I further affirm that all statements on this form are true and accurate and that I understand false statements are punishable as a Class A Misdemeanor pursuant to section 210.45 of the Penal Law.