Please Note: As of January 1, 2020, the term "reside" now means that a child under six years of age lives in the dwelling unit in a pre-1960 building, OR a child under six years of age routinely spends 10 or more hours per week in such a dwelling unit.

Instructions to Comply with Violation Orders #618, #619, and #620

For compliance with violation order #618, #619, and #620, you must return **ANY AFFIDAVITS AND COPIES OF SUPPORTING RECORDS** you are providing for all sections of this request. Keep a copy of this form and any affidavits that you submit for your records.

Records should be delivered in person or mailed with proof of delivery retained to:

Department of Housing Preservation and Development 94 Old Broadway, 7^{th} Floor

New York, NY 10027

Attn: Record Audit

Questions about these violations can be directed to HPD's Lead Unit at (212) 863-5581.

Instructions

For each of the below sections, a description of what documentation must be provided for **each year of the audit period** is indicated. Unless otherwise noted, all documents are required in each category.

Section 1: Audit of Annual Notice Distribution and Investigation (for Violation Orders #618, #619 and #620)

1.1 Proof of delivery of the Annual Notice to the Occupant of each dwelling unit

- a) The complete and notarized Affidavit of Delivery of Annual Notice (enclosed with the Dismissal Request) with a sample copy of the annual notice that was delivered. You can also access a sample copy of this affidavit at http://www1.nyc.gov/assets/hpd/downloads/pdfs/rpo1-english.pdf
- b) A complete list with the building address, each dwelling unit number and the date of delivery to each dwelling unit or the date of the email notice sent to each dwelling unit.

ITEM "C" BELOW IS REQUIRED ONLY IF any of the dwelling units are exempt from the presumption of lead-based paint established in Administrative Code §27-2056.5(a) due to the provisions identified in the paragraph below:

c. A complete list of any dwelling units in the building for which there is a lead exemption obtained from HPD for the dwelling unit that is in effect during the audit period; and a complete list of owner/shareholder-occupied cooperative or condominium dwelling units during the audit period, where the owner was not required to provide Annual Notices to such owner/shareholder. Any such lists must be signed by the owner.

1.2 Annual Notice respond received from the occupants of each dwelling unit

- a. A list of the dwelling units with an indication of whether the dwelling unit responded and the response, including whether there is a child under six residing in the unit based on either the occupant's verbal or written response or the owner's inspection/knowledge.
- b. Copies of the completed and returned Annual Notice, where received. Documents must have the building address, dwelling unit number, and occupant's name, signature, and date.

ITEM "C" BELOW IS REQUIRED ONLY IF any dwelling units did not respond to the Annual Notice:

c. The date when access was attempted to confirm the residence of a child or an indication that the owner had knowledge of a dwelling unit with a child under six; proof of providing written notice by certified or registered mail or by first class mail with proof of mailing of the need to access the unit; and a copy of the notice sent by the owner to the Department of Health and Mental Hygiene regarding failure to access any particular dwelling unit.

1.3 Annual investigation reports conducted pursuant to responses by occupants to Annual Notices

- a. Completed and notarized Affidavit of Annual Investigation for Lead-Based Paint Hazards
 (Enclosed with this Dismissal Request). You can also access a sample copy of this affidavit at
 http://www1.nyc.gov/assets/hpd/downloads/pdfs/rpo1-english.pdf
- b. Copies of the inspection reports for dwelling units that were inspected, including a statement whether there was or was not peeling paint on all visually inspected components or similar documentation.

ITEMS "C" AND "D" BELOW ARE REQUIRED ONLY IF access was not gained to a dwelling unit for the investigation:

- c. Completed and notarized Affidavit of No Access to Perform Annual Investigation for Lead-Based Paint Hazards (enclosed with this Dismissal Request).
- d. Copies of the written notice given to the occupant informing the occupant of the need to access the unit or similar documentation and a record regarding access attempts and the reasons for failure of access.

Section 2: Audit of Work Performed to Correct Lead-Based Paint Hazard Violations (Violation Orders #618 and #620)

2.1 For currently open and uncertified violations in the audit period

- ▶ If you require assistance identifying whether there are currently open and uncertified violations in the audit period, contact HPD's Lead Unit at (212) 863-5581.
- ▶ If you have no currently open and uncertified lead-based paint hazard violations from HPD for the audit period, nothing is required to be provided for in Section 2.

Owner must provide ALL of the following for each currently open and uncertified lead-based paint hazard violation.

- a. Completed and notarized Affidavit AF-5. This document is available at: https://www1.nyc.gov/site/hpd/owners/Lead-Based-Paint.page
- b. An Affidavit from the EPA-certified abatement firm's authorized agent or individual who performed the work to correct the lead-based paint hazard violation(s) stating that the work was performed in accordance with §27-2056.11 of Article 14 of the Housing Maintenance Code and 28 RCNY §11-06; The start and completion date of the work; The address and contact information (phone or fax) for the EPA firm that completed the work. A sample document can be found at https://www1.nyc.gov/site/hpd/owners/Lead-Based-Paint.page
- A copy of the EPA certification for the abatement firm that performed the work to correct the leadbased paint hazard violation(s).
- d. A copy of the State-certified laboratory analysis of all surface dust samples taken which indicates the method of preparation and analysis of the samples.
- e. An Affidavit from the individual who took the surface dust sample, verifying the date the sample was taken and indicating the address/dwelling unit where the sample was taken. A sample document can be found at https://wwwl.nyc.gov/site/hpd/owners/Lead-Based-Paint.page
- f. A copy of the Certificate of Training of the individual who took surface dust samples. The Certificate of Training must be valid for the period when the dust samples were taken.

Section 3: Audit of Non-Violation Work that Disturbed Lead-Based Paint or Paint of Unknown Content (Only Violation Orders #618 and #620)

3.1 Records for all non-violation work that disturbed lead-based paint or paint of unknown lead content on a surface greater than two square feet per room in a dwelling unit where a child under six years of age resides, or in the common areas of the building, including documentation of the work practice used

ITEM "A" BELOW IS REQUIRED ONLY IF no non-violation work on painted surfaces in apartments with children under six at the time of the repair was completed during the audit period:

a. Completed and notarized Affidavit for No Work that Disturbed Lead-Based Paint or Paint of Unknown Lead Content (Non-Violation) (enclosed with this Dismissal Request). You can also access a sample copy of this affidavit at http://www1.nyc.gov/assets/hpd/downloads/pdfs/rpo1-english.pdf

OR IF SUCH WORK WAS PERFORMED:

Owner must provide a list of where work was performed and provide ALL of the following for each instance of work.

- b. An Affidavit from the EPA-certified abatement or EPA-certified Renovation firm's authorized agent or individual who performed the work to correct the lead-based paint hazard violation(s) stating that the work was performed in accordance with §27-2056.11 of Article 14 of the Housing Maintenance Code and 28 RCNY §11-06; The start and completion date of the work; The address and contact information (phone or fax) for the EPA firm that completed the work. A sample document can be found at https://wwwl.nyc.gov/site/hpd/owners/Lead-Based-Paint.page
- c. A copy of the EPA certification for the firm that performed the work.
- d. A copy of EPA certifications of the EPA-certified Renovators or Abatement Workers and Supervisors who performed the work.
- e. The location of the work performed in each room including a description of such work OR invoices for payment for such work.
- f. A copy of the State-certified laboratory analysis of all surface dust samples taken which indicates the method of preparation and analysis of the samples.
- g. An Affidavit from the individual who took the surface dust samples, verifying the date the sample was taken and indicating the address/dwelling unit where the sample was taken. A sample document can be found at http://www1/nyc.gov/site/hpd/owners/Lead-Based-Paint.page
- h. A copy of the Certificate of Training of the individual who took surface dust samples. The Certificate of Training must be valid for the period when the dust samples were taken.

ITEM "I" BELOW IS REQUIRED ONLY IF an occupant is not relocated from the dwelling and the work continues past one day:

i. Checklists completed when/if occupants were allowed temporary access to a work area at the end of the day after work has ceased for the day.

ITEMS "J" AND "K" BELOW ARE REQUIRED ONLY IF the work that was performed disturbed more than I00 square feet of lead-based paint or paint of unknown lead content in a room in a dwelling unit where a child under age six resides, or involved the removal of two or more windows in such unit:

- j. A copy of the owner's completed and signed notice of commencement of work that was filed with the Department of Health and Mental Hygiene.
- k. Any changes in the information contained in the notice filed with the Department of Health and Mental Hygiene prior to commencement of work, or if work has already commenced, within 24 hours of any

Section 4: Audit of Work Performed at Turnover of any Dwelling Unit (for Violation Orders #618, and #620)

REQUIRED FOR ALL:

a. The completed and notarized Affidavit for Turnover of Any Dwelling Unit (enclosed with this Dismissal Request) listing any dwelling units where a tenant has vacated a dwelling unit and the dwelling unit has been re-occupied by a new tenant during the audit period. You can also access a sample copy of this affidavit at: https://www1.nyc.gov/assets/hpd/downloads/pdfs/services/rpo1-english.pdf

ITEM "B" BELOW IS REQUIRED ONLY IF no work was necessary to comply with the requirements for turnover of the dwelling unit:

b. The completed and notarized Affidavit of No Turnover Work Necessary (enclosed with this Dismissal Request). You can also access a sample copy of this affidavit at http://www1.nyc.gov/assets/hpd/downloads/pdfs/rpo1-english.pdf

ITEMS "C" THROUH "I" BELOW ARE REQUIRED ONLY IF work was completed to comply with the requirements for turnover of the dwelling unit including remediating lead-based paint hazards or presumed lead-based paint hazards; removing lead-based paint on friction surfaces on all doors and door frames; removing lead-based paint on all friction surfaces of windows or providing for the installation of replacement window channels or sliders; and making all bare floors, window sills, and window wells smooth and cleanable:

- c. An Affidavit from the EPA-certified abatement firm or Renovation firm's authorized agent or individual who performed the work stating that the work was performed in accordance with §27- 2056.I l(a)(3) of Article 14 of the Housing Maintenance Code and 28 RCNY§II-06; The start and completion date of the work; The address and contact information (phone or fax) for the EPA firm that complete the work. (a sample document can be found at https://wwwl.nyc.gov/site/hpd/owners/Lead-Based-Paint.page).
- d. A copy of the EPA certification for the abatement firm where applicable, or Renovation firm that performed the work.
- e. A copy of EPA certifications of the EPA-certified Abatement Workers and Supervisors, where applicable, or Renovators who performed the work.
- f. The location of the work performed in each room, including a description of such work and components of parts of the dwelling unit that were replaced OR invoices for payment for such work.
- g. A copy of the State-certified laboratory analysis of all surface dust samples taken which indicates the method of preparation and analysis of the samples.
- h. An Affidavit from the individual who took the surface dust samples, verifying the date the sample was taken and indicating the address/dwelling unit where the sample was taken (a sample document can be found at https://wwwl.nyc.gov/site/hpd/owners/Lead-Based-Paint.page).
- A copy of the Certificate of Training of the individual who took surface dust sample. The Certificate
 of Training must be valid for the period when the dust samples were taken.

Section 5: Audit of Five-Year XRF Testing Requirements (Violation Orders #618 and #620)

REQUIRED FOR ALL:

- a. Affidavit of Compliance with Lead-Based Paint Testing (enclosed with this Dismissal Request).
- b. Copies of any lead inspection reports done by an EPA certified inspector or risk assessor which includes surfaces or components which tested positive and negative for lead-based paint.
- c. If providing (b) above, a copy of the EPA certification for the certified inspector or risk assessor who performed the inspection and prepared the inspection report and, if tested after August 9,2020, an Affidavit by Certified Individual Who Performed Lead-Based Paint Testing completed by the inspector or risk assessor (enclosed with this Dismissal Request).

AFFIDAVIT OF LEAD-BASED PAINT RECORDS FROM PREVIOUS OWNER

I,	(print name), swe	ear or affirm under penalty of perjury as follows:
	the owner/managing agent for the building located at: ress) ("Premises").	
	/Corporation(date). I have attached a copy of the	-
Preven	although the Premises is subject to compliance with the nation Act of 2003 (Local Law 1 of 2004, as amended as for at least ten years under Administrative Code Seeds be transferred to new owners, I have:) which requires that certain records be kept by
Must	Select ONE:	
	not received any records related to compliance wire previous owner.	th the Lead Poisoning Prevention Act from the
OR		
	received only the attached records related to the co Act from the previous owner for the period covere my purchase of the Premises. These records are for	ed by the start of this audit through to the date of
	Proof of the delivery of the Annual Notice	Non-violation work that disturbed lead- based paint or paint of unknown lead content
	Annual Notice response received	Work performed at turnover
	Annual investigations conducted	
(Print	Name)	(Signature)
`	,	
****	*****************	***********
State	of, County of	Stamp
Sworr	n to before me thisday of	, 20
(Notai	ry Signature)	

AF-RPO1 Rev 12/29/2023

AFFIDAVIT OF DELIVERY OF ANNUAL NOTICE – MAILING/EMAILING/HAND-DELIVERY

I,		(print name), s	swear or affirm under penalty of p	erjury as follows:
that is	s required under Admin		Lead-based Paint Hazards Inquir -2056.4 ("Annual Notice") to ea("Premises") was	
Select	all that apply:			
	Myself, the owner/ma My employee under m A third party hired by		my direction	
The plocate occup	procedure during the aud d at the "Premises" was ant of the dwelling unit, or	it period to deliver the A (must select one) by \square or by \square a combination of $\mathfrak c$	nnual Notice to each dwelling u email or by mail or by hemail, mail, and hand delivery.	nit in the building and-delivery to the
•	A sample copy of the delivered to the occup A complete list with each dwelling unit or the individual who performs	ne Annual Notice in Engloants of the building; the building address, each the date of the email not formed the delivery to each	ish and Spanish that was mailed a dwelling unit number, the date lice sent to each dwelling unit, ar dwelling unit; and company's name and address.	/emailed/hand-
	Name)	********	(Signature)	*****
State	of New York, County of_			Stamp
Swori	n to before me this	day of	, 20	
(Nota	ry Signature)			

AF-RPO2 Rev 1/29/2020

AFFIDAVIT OF ANNUAL INVESTIGATION FOR LEAD-BASED PAINT HAZARDS

I,	(print name), swear or affirm under penalty of perjury as fo	llows: I
am the owner/managing agent for	the building located at:(address) ("Premises").	
based paint hazards in dwelling u	al hired by me for this purpose, conducted a visual inspection for leadnits where a child under the age of six resides and the common areas the age of six resides that are required to be inspected annually under 056.4.	s of
2004) was amended so that the wordwelling unit in a pre-1960 building	2020, the NYC Childhood Lead Poisoning Prevention Act (Local Labord "resides" now means that a child under six years of age lives in the ug, OR a child under six years of age routinely spends 10 or more houther case, the child is considered to "reside" in the unit for purposes of	ie irs per
In support of this Affidavit, I am of the audit period that reflect:	attaching any of the records which I have in my possession for each	year
	ich an inspection was conducted, including the name of the person weetion, the date of the inspection, and the dwelling unit number and reach unit.	
(PrintName)	(Signature)	
*********	****************	****
State of New York, County of		
	Stamp	
Sworn to before me this	day of	
(Notary Signature)	<u> </u>	

AF-RPO3 Rev 1/29/2020

AFFIDAVITOF NO ACCESS TO PERFORM ANNUAL INVESTIGATION FOR LEAD-BASED PAINT HAZARDS

I,		(print name), sw	vear or affirm under	penalty of perjur	y as follows:
I am the owner/(address) ("Pren		for the building located at	t:		
for lead-based p to be inspected a I understand that 2004) was amen dwelling unit in	paint hazards in annually under A teffective Januar anded so that the ware pre-1960 build	ridual hired by me for the dwelling units where a administrative Code section 2020, the NYC Childhood word "resides" now meansing, OR a child under six yeither case, the child is controlled.	child under the ag on 27-2056.4. od Lead Poisoning F that a child under si years of age routinel	Prevention Act (Lo ix years of age live by spends 10 or mo	that are required ocal Law 1 of es in the ore hours per
compliance with		,		1 1	
_	ite attempts to ga	apleted in certain dwelling ain access and written not inspection.		-	
of the audit peri • The dw	od that reflect: velling units in we each such unit: Copies of the occupant of sudate of mailing The dates an a The reason(s) tannual notice r	written notice provided by the units regarding the need with proof of mailing, or ttempt was made to gain a chat the inspection was not egarding lead-based paint iffication of need for access	recertified, registered d to access the unit access; and t conducted (for exal hazards, refusal to a	red but was not color first-class mail for inspection, inclion;	to the luding the
(PrintName)			(Signature)		
	:******	********		******	*****
State of New Yo	ork, County of_				Stamp
Sworn to before	eme this	day of		20	
(Notary Signatur	re)				

AF-RPO4 Rev 1/29/2020

AFFIDAVIT FOR NO WORK THAT DISTURBED LEAD-BASED PAINT OR PAINT OF UNKNOWN LEAD CONTENT (NON-VIOLATION)

I,		(print name), swear	or affirm under pen	alty of perjury as follows:
(address) ('any work the in any room the audit per I understand 2004) was arrin a pre-1960 dwelling unit I have list	Premises") and I hat at disturbed more the of an apartment wheriod. If that effective January mended so that the way building, OR a chief. In either case, the	t for the building located at: ave not performed or caused to be an two square feet of any lead-banere a child under six years of ago ary 2020, the NYC Childhood Le rord "resides" now means that a clild under six years of age routined child is considered to "reside" in the where work was performed dur have indicated the basis for stating the root of the stating and the stating are the sta	ased paint or paint of the resided at the time and Poisoning Preventild under six years by spends 10 or more the unit for purpose tring the audit period.	of unknown lead content eat the Premises during ntion Act (Local Law 1 of of age lives in the dwelling unite hours per week in such a sof compliance with the law.
		Choose the rea	son below (X).	
Unit Number	Unit has HPD lead free paint exemption.	Unit was tested for lead- based paint by an EPA- certified Inspector or Risk Assessor and no painted surface tested positive for lead-based paint.*	No child under 6 years of age resided in the unit at the time.	The work performed did not disturb more than two square feet of any lead paint or paint of unknown lead content in a room.
attaching tAAA(A	he following required a copy of the inspect a copy of the EPA can notarized Affidavi Affidavit enclosed	tion report prepared by an EPA-c ertification of the Inspector or Ri t by the Inspector or Risk Assess	ertified Inspector of sk Assessor valid for sor who conducted	r Risk Assessor. or the inspection date. the inspection.
(Print Nar	,	('	Signature) *******	*********
State of N	New York, County o	f		Stamp
Sworn to	before me this	day of		

AF-RPO5 Rev 2/1/2021

AFFIDAVIT FOR TURNOVER OF ANY DWELLING UNIT

I,	(print name), swear or affirm under penalty of perjury as follows:							
I am the owner/managing agent for (address) ("Premises") and that:	the building located at:							
Must Select ONE : ☐ No dwelling unit was vaca when I was the owner/managing ag	ted and re-occupied by a new tenant (t	urnover) during the audit period						
OR The following dwelling unit audit period when I was the owner/	its were vacated and re-occupied by a managing agent.	new tenant (turnover) during the						
Unit Number	Date the previous tenant ended occupancy	Date the new tenant started occupancy						
	- Company	- computer						
For any unit that did turn over, the "c" through "i" of the Record Produ	Affidavit if additional space is needed owner/managing agent must also submetion Order to demonstrate compliant for which turnover work was not requidavit of No Turnover Work Necessa	nit all records listed in Section 4 re with the work requirements.						
(Print Name)	(Signature)							
*********	**********	*****						
State of New York, County of		Stamp						
Sworn to before me this	day of	, 20						
(Notary Signature)								

AF-RPO6 Rev 1/29/2020

AFFIDAVIT OF NO TURNOVER WORK NECESSARY

Ι,		(print name), swear or a	affirm under penalty of perjury a	as follows:				
("Premises the audit	s") and that the fol	ent for the building located at:lowing dwelling units were vacate was the owner/managing agent 27-2056.8.						
I have liste	ed each unit below	and indicated the basis for stating t	he unit did not require turnover	work:				
	Choose the reason below (X).							
Unit Number	Unit has HPD Lead Free paint exemption.	Unit has no painted window and door friction surfaces, the floor, window sills and window wells were smooth and cleanable, and there were no lead-based paint hazards or underlying defects to correct.	Unit window and door friction surfaces have tested negative for lead-based paint*, the floor, window sills and window wells were smooth and cleanable, and there were no lead-based paint hazards or underlying defects to correct.	Unit was tested for lead-based paint by an EPA-certified Inspector or Risk Assessor and no painted surfaces tested positive for lead-based paint.*				
for lead-ba above), I a • A • A • A • W	ased paint (column and attaching the following attaching the following copy of the inspect copy of the EPA conotarized Affidavitith this order).	ed for lead-based paint and either the B, above) or no painted surfaces testowing required documentation: tion report prepared by an EPA-cer ertification of the Inspector or Risk by the Inspector or Risk Assessor of this Affidavit if additional space	tified Inspector or Risk Assessor Assessor valid for the inspection, who conducted the inspection,	or. on date.				
(Print Nan	,	`	nature)					
		f		** Stamp				
Sworn to b	pefore me this	day of	, 20					
(Notary Si	gnature)		_					

AF-RPO7 Rev 2/1/2021

AFFIDAVIT OF COMPLIANCE WITH LEAD-BASED PAINT XRF TESTING

I,		(print n	ame), swear or affirm under penalt	y of perjury as follows:
I am the ow	vner/managin	g agent for the buildin		
		ting documentation reg tion 27-2056.4 a-1:		I am making the following pased paint testing requirements of
Part A Sel	ect ONE:			
		he age of six years old mises since August 9,		more hours per week in a dwelling
OR				
	nit ("reside")			d 10 or more hours per week in a ng a document with the following
Unit Number	Date the c	hild came to reside	Was the unit tested for lead- based paint? (Yes or No)	Date of the Testing
*****	*****	********	**********	**********
	•		ther than those that are listed/attac be XRF tested no later than August	hed in Part A above, I understand 9, 2025 and I am affirming:
Select ON	E:			
□ No OR	other dwelling	ng units have been XR	F tested for lead-based paint at the	Premises as of this date.
	_	units have been XRF to cout the tested units:	ested at the Premises and I am attac	ching a document with the
Unit Num	ıber	Date of the Testing		
*****	*****	******	 *************	********
submitting • Co	the following	records to demonstrat lead inspection repor	art A or Part B where XRF testing e compliance with the testing requits, which includes surfaces which	irements:
• A c		-	ch certified inspector(s) or risk asse	essor(s) who performed the
		ugust 9, 2020, a notariz affidavit enclosed with t	ed Affidavit by the Inspector or Rischis order).	k Assessor who conducted
	e) ******		(Signature)	*********
State of Ne	w York, Cou	nty of		Stamp
Sworn to be	efore me this	day of		
(Notary Sig	gnature)			

AF-RPO8 Rev 2/01/2021

AFFIDAVIT BY CERTIFIED INDIVIDUAL WHO PERFORMED LEAD-BASED PAINT TESTING

(Submit only where required by this Record Production Order)

I, _					()	print n	ame	e), pe	rformed	the inspec	tion
	testing	and/or	sampling	for	lead-based	paint (stree	at e t),	the	premise	s located	at
(city	y),		(state), _		(z	ip),			(u	nit numbe	r, ii
app	licable) o	on		(date).						
40 c testi Dep	of the Connection of the Conne	de of Feor r samplir of Housin	deral Regul ng in accord g and Urbar	ations lance 1 Deve	ns and testing subparts L Title 40 CF elopment's Cong, 2 nd Edition	and Q. R § 74: Guidelir	I po 5.22 nes fo	erforr 7, and	ned the ind d Chapter	nspection, 7 of the U	and J.S
	(check o	mployed		tified l	Firm (name	١٠					
	_				t firm's EPA		catio	on.			
					of my EPA					expires	
(Pri	nt Name)					(Signa	ature	e)			
***	*****	*****	*****	****	*****	*****	***	****	*****	*****	***
State	e of New	York, Co	ounty of					-	No	otary Stam _l	p
Swo	orn to befo	ore me th	is	da	ny of			, 2	0	_	
(Not	tary Print	Name)				(Notar	ry Si	gnatı	ıre)		

AF-RPO9 Rev 2/1/2021