

FOR OFFICE USE ONLY

DOCKET #: _____

Respondent Information

<p>NAME: _____</p> <p>MAILING ADDRESS: _____</p> <p>CITY, STATE: _____</p> <p>ZIP CODE: _____</p> <p>IMD ADDRESS: _____</p> <p>_____ IMD NO. _____</p> <p>DAYTIME PHONE: () _____</p> <p>BUSINESS PHONE: () _____</p> <p>FAX NUMBER: () _____</p> <p>EMAIL ADDRESS: _____</p>	<p>RESPONDENT IS:</p> <p><input type="checkbox"/> Owner</p> <p><input type="checkbox"/> Net Lessee</p> <p><input type="checkbox"/> Managing Agent</p> <p><input type="checkbox"/> Residential Tenant</p> <p><input type="checkbox"/> Commercial/Manufacturing Tenant</p> <p><input type="checkbox"/> Other (<i>specify</i>)</p> <p>_____</p> <p>_____</p> <p>_____</p>
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If the answering party is an Owner, Managing Agent or a Net Lessee, please complete the following certification.

I certify that, as of the date of this answer, all records related to a sale of improvements pursuant to § 286(6) and sales of rights pursuant to § 286(12) of the Multiple Dwelling Law for any Interim Multiple Dwelling unit in the subject building have been filed with the New York City Loft Board.

Name (print)

Relationship to Respondent (if same, write 'Same')

Signature

Date

Answer

Title 29 of the Rules of the City of New York (29 RCNY) §1-06(c) requires that an answer to an application contain facts and arguments relevant to the application. Use the space below to state all facts relevant to the application and your answer. Extra sheets of paper may be attached as necessary. If required (see (c) above), all supporting documents **must** be attached to this Answer Form, or an explanation **must** be provided for not attaching the supporting documents.

Verification or Affirmation

I verify or affirm that all statements made in this answer and in the attached rider, if applicable, are true and correct except for those statements that I have stated to be based on information and belief, and as to those matters, I believe them to be true and correct.

Name (print)

Relationship to Applicant (if same, write 'Same')

Signature

Date

PLEASE NOTE:

- *One original and four copies of this Answer and attachments must be filed with the Loft Board.*
- *Failure to sign the Verification/Affirmation may result in rejection of the Answer.*
- *False statements may subject you to the penalties provided by law, including fines and/or imprisonment.*

On _____, I served a true copy of the ANSWER *(check all that apply)*
(date of service)

- By mailing to applicant(s) in a stamped, sealed envelope, in a post office or official depository of the U.S. Postal Service within the State of New York, addressed to the last known address of the applicant(s) as indicated below.
- By facsimile transmission to applicant(s) at last known fax/address as indicated below.

Name of person served with the ANSWER

Address of person served with the ANSWER (including floor or unit number)

City, State and Zip Code

Fax Number

Name (print)

Signature

Date

NOTE: False statements may subject you to the penalties provided by law, including fines and/or imprisonment.