

FOR OFFICE USE ONLY

IMD No.: _____

Issue Date: _____

NOTE: For Owners

This registration application **must** be completed if the building is being registered as an Interim Multiple Dwelling (IMD) pursuant to § 281(5) of Article 7-C of the New York State Multiple Dwelling Law (MDL). The Loft Board reserves the right to reject, revoke or amend the registration for the building or units at any time pursuant to Title 29 of the Rules of the City of New York (29 RCNY) § 2-05(b)(9). For additional information or instructions, please refer to 29 RCNY §§ 2-05 and 2-08(m) of the Loft Board's rules or the Loft Board's website. You may also contact the Loft Board at **(212) 393-2616**

NOTE: For Tenants and Owners

Any tenant or owner who contests coverage of a unit listed in SECTION 3 of this form under the MDL, or the building in its entirety, must, in accordance with the terms of 29 RCNY § 2-05(b)(5), file an application with the Loft Board by no later than: (i) forty-five (45) days after service of this registration application is deemed complete; or (ii) forty-five (45) days following the date this registration application is filed with the Loft Board, whichever is later. For additional information, please refer to the Loft Board's rules, its website, or contact the Loft Board at **(212) 393-2616**.

Before submitting this registration, check each box to confirm the following documents are attached:

- a copy of the lease in effect on June 21, 2010, (or if vacant, copies of the most recent lease in effect) for each of the residential units listed in SECTION 3 below **and** for each of the commercial tenants listed in SECTION 4 below;
- a copy of the lease in effect during the 'window period' for each of the residential units listed in SECTION 3 below, or if there was no lease in effect, proof of residential occupancy during the window period;
- a copy of the current lease in effect for each of the residential units listed in SECTION 3;
- a check in the amount of **\$500.00 for each unit listed in SECTION 3** below, payable to the **City Collector/Loft Board; and**
- a current copy of the building Certificate of Occupancy (C/O), if any.

If a particular question below is not applicable, please enter **Not Applicable** and attach a separate signed statement explaining the reasons why such information is not applicable.

To be considered complete, the following documents should be attached to this Registration Application:

- Copies of the most recent lease for each of the residential units listed in section **SECTION 3**.
- A copy of the building's rent roll listing the monthly rent collected for each unit listed in section **SECTION 3**.
- A check in the amount of **\$500.00 per unit** listed in section **SECTION 3** payable to the **City Collector/Loft Board**.
- A copy of the current building Certificate of Occupancy (C/O), if any.

SECTION 1: Building Information

HOUSE NO. <small>(include range)</small>	STREET NAME	BOROUGH	TAX BLOCK	TAX LOT	ZONING DISTRICT	C/O NO. <small>(if applicable)</small>

SECTION 2: Building Owner and Management Information

Unless otherwise indicated, the Loft Board will use owner's name listed below as the primary contact person for the building. That person will receive all notices and correspondence issued by the Loft Board. Pursuant to 29 RCNY § 2-05, an owner of an Interim Multiple Dwelling (IMD) building is required to report to the Loft Board any change to the ownership/management information within five (5) days of the change. Failure to do so may lead to the imposition of civil penalties or fines in accordance with Title 29 of the Rules of the City of New York §2-11.1.

NAME(S) OF OWNER(S) _____

BUSINESS ADDRESS _____

BUSINESS PHONE NO. _____

EMAIL _____

If the building owner is not an individual, list the name, title, phone number and email address each officer/member. For corporations, list stockholders/shareholders who own or control at least 10 percent of the corporation's stock:

NAME & TITLE	PHONE NO.	EMAIL ADDRESS
	()	
	()	
	()	
	()	

BUILDING LESSEE (*entire building, if applicable*)

NAME(S) OF LESSEE(S) _____

BUSINESS ADDRESS _____

BUSINESS PHONE NO. _____

BUSINESS EMAIL _____

MANAGING AGENT (*if applicable*)

NAME(S) _____

BUSINESS ADDRESS _____

BUSINESS PHONE NO. _____

BUSINESS EMAIL _____

I hereby consent to designation as **Managing Agent** of the above-referenced building.

Signature of Managing Agent

Date

SECTION 3: Residential Units

1. Has the building ever been occupied for manufacturing, commercial or warehouse purposes?
 YES NO

2. Has the building been issued a residential Certificate of Occupancy by the NYC Department of Buildings?
 YES NO

3. List each unit that was occupied for residential purposes for at least twelve (12) consecutive months between January 1, 2008 and December 31, 2009 (the 'window period'). Attach additional pages as necessary. **For each of the residential units listed below, you must attach copies of:**
 - the lease in effect on June 21, 2010 (or if vacant, a copy of the most recent lease in effect)
 - the lease in effect during the 'window period' (or, if no lease exists, proof of residential occupancy during the window period), **and**
 - the current lease in effect.

For cooperatives and condominiums, only attach leases for units that are not owner-occupied.

FLOOR	UNIT NO.	PERIOD OF RESIDENTIAL OCCUPANCY <small>(between 1/1/08 and 12/31/09)</small>	NAME OF TENANT IN OCCUPANCY <small>(between 1/1/08 and 12/31/09)</small>	NAME(S) OF PROTECTED OCCUPANT(S) <small>(if there is currently no tenant in the unit, write VACANT)</small>

4. Are any of the units listed above located in a cellar? YES NO
 If yes, indicate which unit(s) _____

5. Do any of the units listed above require access through another residential unit? YES NO
 If yes, indicate which unit(s) _____

6. Does each of the units above have at least one window opening onto a street, yard or court? YES NO
 If no, list the unit(s) that do not have a window _____

7. Are each of the units above at least four hundred (400) square feet in area? YES NO

If no, indicate what unit(s) have less than 400 square feet in area _____

8. Is the Building located in an *Industrial Business Zone*? YES NO NOT SURE

If yes, specify the location _____

SECTION 4: Manufacturing/Commercial Units

1. Are there any manufacturing/commercial units in the building? YES NO

If yes, list each of the commercial/manufacturing tenants in the building as of June 21, 2010 below. **You must attach:**

- a copy of the lease for each commercial tenant listed below. If no lease exists, attach a signed affidavit outlining the terms of the rental agreement;
- a completed **Professional Certification** contained on **page 5** of this form.

FLOOR	UNIT NO.	COMMERCIAL TENANT'S NAME	USE GROUP	DESIGNATION <i>(briefly describe current activity in unit)</i>

(please attach additional pages as necessary)

SECTION 5: Owner's Verification

Falsification of any statement is a misdemeanor and is punishable by a fine or imprisonment, or both.

I verify, under penalties provided by law, including fines and/or imprisonment, that all statements made are true and correct. I have attached all required documentation. Further, I am maintaining and will continue to maintain all minimum housing maintenance standards required by the loft board rules.

Name (print)

Owner's Signature

Date

Whole Building Lessee's Name (print)

Lessee's Signature

Date

Managing Agent's Name (print)

Managing Agent's Signature

Date

NOTE: *The Loft Board reserves the right to reject, revoke or amend the registration for the building or units listed herein at any time pursuant to Title 29 of the Rules of the City of New York §2-05(b)(9).*

INSTRUCTIONS

Pursuant to § 2-08(m) of Title 29 of the Rules of the City of New York, this certification must be submitted with the initial registration application for the building. For additional information, please refer to the Loft Board's rules, visit our website at www.nyc.gov/loftboard or call (212) 393-2616.

Building Information

HOUSE NO. <i>(include range)</i>	STREET NAME	FLOOR	UNIT NO.	BOROUGH	ZIP CODE	TAX BLOCK	TAX LOT

Being mindful of my responsibilities as a licensed Professional Engineer/ Registered Architect in the State of New York and acting as designated agent for the applicant, I certify that the above described building did not contain commercial activity in a commercial unit on June 21, 2010 that is set forth in use group eighteen (18), as described in the Zoning Resolution of the City of New York in effect on June 21, 2010, **and**:

1. has or should have a New York State environmental rating of 'A', or 'B' under part two hundred and twelve (212) of title six (6) of the New York Codes, rules and regulations, for any process equipment requiring a New York City Department of Environmental Protection operating certificate; or
2. is or should be required under the Community Right-to-Know Law, at Chapter 7 of Title 24 of the Administrative Code of the City of New York, to file a Risk Management Plan for Extremely Hazardous Substances; **or**
3. is or should be classified as High-Hazard Group H occupancy as set forth in Section 307 of the New York City Building Code.

Check one:

- The commercial activity described above was present in the building on June 21, 2010, but the activity does not exist as of the date of this registration application.
- The commercial activity is still present in the building, but the commercial activity does not create an actual risk of harm which cannot be reasonably mitigated.
- The commercial activity is still present in the building and the commercial activity creates an actual risk of harm which cannot be reasonably mitigated.

Falsification of any statement is a misdemeanor and is punishable by a fine or imprisonment, or both. I understand that if I am found after a hearing to have knowingly or negligently made a false statement or to have knowingly or negligently falsified or allowed to be falsified any certificate, form, signed statement, application, report or certification of the correction of a violation required under the provisions of the Building Code or of a rule of any agency, I may be barred from filing further applications or documents with the New York City Department of Buildings.

NYS PE/RA Name (printed)

Signature

License Number

Affix seal and signature in accordance with all regulations applicable when applying signature and seal to official documents filed with the Loft Board.

