



HPD3: Single Room Occupancy
Multiple Dwelling (SRO MD)
Anti-Harassment Checklist

Must be typewritten.



1 Location Information Required for all applications.

House No(s) 224 Street Name W 137 ST Work Proposed on Floor No(s) OSP, CEL, BAS, 1 T 3
Borough MANHATTAN Block 01942 Lot 0045 BIN 1058968 CB No. 110

2 Applicant of Record Required for all applications.

Last Name ALI First Name ASHRAF Middle Initial
Business Name ASHRAF ALI PE PC Business Telephone 212 423 5730
Business Address 130 E 107TH STREET 1ST FLOOR Business Fax 212 4230 5731
City NEW YORK State NY Zip 10029 Mobile Telephone 917 470 2472
E-Mail ABID265@GMAIL.COM License Number 084178 ☒ PE ☐ RA

3 Exemption/Certification Declaration Required for all applications. For every yes/no question required, you must answer "yes" or "no".

In accordance with 28 RCNY § 10-02, Rules of the Department of Housing Preservation and Development, I certify that the scope of work for the job number identified above:

Yes No

- ☐ ☒ increases or decreases the number of dwelling units
- ☐ ☒ increases or decreases the number of kitchens or bathrooms (include kitchens or bathrooms either 1) located within a dwelling unit, or 2) serving occupants of a dwelling unit even though the kitchen or bathroom may not be located within a dwelling unit)
- ☐ ☒ alters the layout, configuration or location of any portion of a dwelling unit
- ☐ ☒ alters the layout, configuration or location of any portion of a kitchen or bathroom (include kitchens or bathrooms either 1) located within a dwelling unit, or 2) serving occupants of a dwelling unit even though the kitchen or bathroom may not be located within a dwelling unit)
- ☐ ☒ demolishes any dwelling unit and/or demolishes any portion of the building serving dwelling units (such as lobbies, lounges, recreation spaces, tenant storage, laundry rooms, etc.)
- ☐ ☒ Changes the use or occupancy of any dwelling unit and/or changes the use or occupancy of any portion of the building serving dwelling units (such as lobbies, lounges, recreation spaces, tenant storage, laundry rooms, etc.)

- ☒ Check this box if all six boxes above are checked "no". Therefore, per 28-107.3 and 28 RCNY § 10-02, a **Certificate of No Harassment IS NOT required**. Submit this completed form with your application for construction document approval (please proceed to Section 4).

If any of the above boxes are checked "yes". In such case, I further certify that the scope of work for the job number identified above:

Yes No

- ☐ ☐ is comprised solely of work for the purpose of making the public areas of a multiple dwelling accessible to persons with disabilities without altering the configuration of any dwelling unit
- ☐ ☐ is comprised solely of work for the purpose of making dwelling unit accessible to persons with disabilities
- ☐ ☐ is comprised solely of work performed by a city agency or by a contractor pursuant to a contract with a city agency

Check only one of the following

- ☐ Any of the three boxes above are checked "yes". Therefore, per 28-107.3, a **Certificate of No Harassment IS NOT required**. Submit this completed form with your application for construction document approval.
- ☐ All of the three above boxes are checked "no". Therefore, per 28-107.3, a **Certificate of No Harassment IS required**. Submit this completed form with your application for construction document approval, and attach the Certificate of No Harassment from the Department of Housing Preservation and Development.

4 Applicant's Statements and Signatures Required for all applications.

Falsification of any statement is a misdemeanor and is punishable by a fine or imprisonment, or both. It is unlawful to give to a city employee, or for a city employee to accept, any benefit, monetary or otherwise, either as a gratuity for properly performing the job or in exchange for special consideration. Violation is punishable by imprisonment or fine or both. I understand that if I am found after 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 this code or of a rule of any agency, I may be barred from filing further applications or documents with the Department.

Name (please print)

ASHRAF ALI

Signature

P.E. / R.A. Seal (apply seal, then sign and date over seal)

