



DEPT OF BLDGS 240033227

Job Number



ES254542820

Scan Code

**L2: REQUESTS FOR OVERRIDES, REDUCTIONS, OR WAIVERS OF
CIVIL PENALTIES FOR WORK WITHOUT A PERMIT
AND STOP WORK ORDER VIOLATIONS**

FORM MUST BE TYPEWRITTEN

1 Job and Request Information (Required for all requests. A copy of the violation is required with the L2 submission.)

Job # _____

Violation # **VW 102093C05H01**

Indicate reason for request here by checking the applicable box:

OVERRIDE REQUEST:

- ☒ **NRV:** No relationship to the violation; where a permit is being sought for work in a space that is not related to the Work Without a Permit (WWP) violation.

REDUCTION REQUEST:

- ☐ **REDT:** Work completed without benefit of a permit constituted only a percentage of the total work. (Section 4 Affidavit of Reduction is required.)

WAIVER REQUEST:

WWP Waiver Reasons:

- ☐ **BFP:** Where the owner is representing that he or she is a bona fide purchaser and the work was performed by the previous owner. (See AC §28-213.2). The following supporting documentation is required:
- Copy of the deed
 - A notarized affidavit or letter of no relationship, which substantiates the owner's claims. If the bona fide purchaser is other than an individual, the affidavit or letter must be submitted on the entity's letterhead and signed by the owner or an officer of the corporation.
 - The affidavit or letter must include: the name of the bona fide purchaser; the location of the property; a statement that the property was not received as a gift; and, a statement that there was no interest or relationship with the prior owner and the new owner is not acting in any way for the benefit of the prior owner
- ☐ **CPP:** Where the civil penalty was already fully paid. (Provide BIS Invoice #: _____
Or provide copy of front and back of cancelled check.)
- ☐ **DUPW:** For another WWP violation that remains open and that was issued for the same work and at the same location. (The initial violation shall require payment of the civil penalty. Provide BIS Invoice # for the penalty that was already paid: _____)
- ☐ **ECB:** Where an Environmental Control Board (ECB) violation for WWP has been dismissed whether on substantive or technical grounds.
- ☐ **EWG:** Emergency work performed by the NYC Department of Housing Preservation & Development (HPD) or other agency as directed by the Commissioner or work on unsafe buildings performed by HPD or other agency pursuant to a precept. (See AC §28-215.1).
- ☐ **EWP:** Emergency work performed without a permit, where an application for the work is filed with the Department within two business days after commencement of the work, except for emergency work described by Code EWG above. (See AC §28-105.4.1).
- ☐ **EXP1:** Where a fence, shed or scaffold or other temporary construction equipment was installed with a valid permit and the permit had expired. (See BC 105.8.2).
- ☐ **EXP2:** When permits (other than for temporary construction equipment) expired and there was no ongoing work.
- ☐ **GOV:** For Federal, New York State, NYC or other government-owned property, or for property owned by eligible public authorities.
- ☐ **TPT:** HPD third party transfers where a court issues a foreclosure judgment allowing the City to transfer title of a foreclosed property to a new owner. (See AC §11-412.2). Any civil penalties accrued before the closing date of the transfer must be waived. The new owner must provide a letter from HPD stating that there was a third party transfer and that penalties should be waived.

Stop Work Order (SWO) Waiver Reasons:

- ☐ **SWBC:** Where the Commissioner had determined that the violation should not have been issued for working against the SWO.
- ☐ **SWOE:** Where the ECB violation issued for violating the SWO was dismissed for any reason.

2 Location Information (Required for all requests)

House No(s) **1373** Street Name **OGDEN AVENUE**

Borough **BRONX** Block **2535** Lot **21** BIN **2003560** CB No. **204**

Work on Floor(s) **OSP** Apt/Condo No(s) _____

3 Owner Information (Required for all requests. Notarized signature by owner or authorized designee is required in Section 6.)

Last Name **SINGH** First Name **RAGHBIR** M.I. _____

Business Name **MSS GOLDEN CONSTRUCTION** Phone **718-659-5700** E-mail Address _____

Address **130-05 25TH STREET** City **S. OZONE PARK** Zip Code **11420**

4	Affidavit of Reduction (Only required if reduction is requested. Affidavit needs to be provided by PE or RA. If the reduction request relates to a Limited Alteration Application—LAA—then the affidavit may be provided by another licensee type, such as a licensed plumber.)
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1. This affidavit is submitted in support of the request indicated in Section 1 of this form (Job and Request Information).
2. On _____ (date) at _____ (am / pm) I inspected the above-captioned premises to determine whether the work covered by the application was commenced without benefit of a New York City Department of Buildings Permit.
3. This affidavit is being submitted to the New York City Department of Buildings within two business days of my inspection.
4. My inspection revealed that the following work, (written description must be provided below with at least four (4) supporting photographs in order to be accepted for consideration), filed for in the application, was completed without benefit of a permit. (Photographs need to have been taken within two business days of inspection.)

Internal Use Only — Preliminary Borough Review

Building Classification _____ Reduction Amt \$ _____
 Name (please print) _____
 Signature _____ Date _____

5 PE/RA/Other Licensee Applicant Data (Only required if reduction is requested)

Last Name _____ First Name _____ M.I. _____
 Business Name _____ Phone _____
 Address _____
 City _____ State NY _____ Zip Code _____
☐ PE ☐ RA ☒ Other _____ License No. _____

Name (please print) _____

Signature _____

Date _____

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.

PE / RA / Other Seal (apply seal, then sign and date over seal)

6	Notarization
State of New York, County of <u>Queens</u> Sworn to before me this <u>15</u> day of <u>Aug</u> 20 <u>13</u> Notary Seal <u>SATWANT SINGH MINHAS</u> NOTARY PUBLIC-STATE OF NEW YORK No. 01MI6124965 Qualified in Queens County My Commission Expires April 04, 2017 Notary Signature _____ Owner or Authorized Designee Signature _____ Date <u>8/15/13</u> <u>Rashmi</u>	

Internal Use Only	
Borough Commissioner Review	
☐ Approved	☐ Denied ☐ Reduction Amt \$ _____
Approval/Denial Reason: _____	
Name (please print) _____	
1st Level Signature _____	Date _____
2nd Level Review—Fiscal	
☐ Approved	☐ Denied ☐ Reduction Amt \$ _____
Approval/Denial Reason: _____ Tracking #: _____	
Name (please print) _____	
2nd Level Signature _____	Date _____



 [CLICK HERE TO SIGN UP FOR BUILDINGS NEWS](#)

NYC Department of Buildings

DOB Violation Display for 102093C05H01

34097557M NOT FOUND

Premises: 1369 OGDEN AVENUE BRONX

BIN: 2003560 **Block:** 2535 **Lot:** 21

Issue Date: 10/20/1993

Violation Category: WW - VIOLATION WORK WITHOUT
PERMIT - ACTIVE

Violation Type: C - CONSTRUCTION

Violation Number: 05H01

ECB No.: 34097557M (refer to for further details)

Device No.:

Description:

If you have any questions please review these [Frequently Asked Questions](#), the [Glossary](#), or call the 311 Citizen Service Center by dialing 311 or (212) NEW YORK outside of New York City.

ENVIR

NOTICE N.Y.C. DEPARTMENT OF BUILDINGS
COMMISSIONER OF THE DEPARTMENT OF BUILDINGS NOTICE OF VIOLATION

34097557M

RK, PETITIONER, V.

RESPONDENT:

ATTAB Siddiqui
Last Name First Name

MAILING ADDRESS:

28 CAMERON Rd SADDLE RIVER N.J. 07458
Street City State Zip Code

COMMISSIONER'S ORDER TO CORRECT VIOLATION(S)

NOTICE OF VIOLATION(S) AND ORDER TO CORRECT VIOLATION(S)

You are hereby notified that there exists a violation in the subject premises as described below.

You are hereby directed to remove this violation, pursuant to Section 26-248 and/or 26-122 of the N.Y.C. Administrative Code.

All inquiries and reference to this violation should be directed to the Violation Section in the respective borough.

(If this violation is not corrected within ten days, you may be summoned to appear in the Criminal Court.)

MANHATTAN 60 Hudson St., 5th Floor New York, N.Y. 10013 (212) 312-8500	BRONX 1932 Arthur Avenue Bronx, N.Y. 10457 (212) 579-6912	BROOKLYN Municipal Building Brooklyn, N.Y. 11201 (718) 802-3685	QUEENS 126-06 Queens Blvd. Kew Gardens, N.Y. 11413 (718) 520-3215	RICHMOND Borough Hall St. George, N.Y. 10301 (718) 390-5204
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of the N.Y.C. Administrative Code and/or the Zoning Resolution of the City of New York and/or rules and regulations promulgated thereunder.

PLACE OF OCCURRENCE 1315 CORDEN AVE				BORG Bx	DATE OF VIOLATION 10/20/93	Type C	Dist. 05	Code H	No. 0101
Construction II-C	No. of Stories 1	Block 2535	Lot 21	Basis of Violation (P.A. No. or Other) 20/2188		PRIOR VIOLATION NUMBER			
Occupancy at time of inspection RETAIL STORE.									

Com- puter No.	Provision of Law	☐ HAZARDOUS	DESCRIPTION OF VIOLATION(S)	☐ SECOND OFFENSE
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Bof 10/21/93	27-147	WORK WITHOUT A PERMIT
		WORK NOTED* MEZZANINE CONSTRUCTED AT INTERIOR REAR.
		REMEDY: FILE PLANS, OBTAIN PERMIT OR RESTORE BACK TO PRIOR LEGAL CONDITIONS.

34097557M

INSPECTOR'S LAST NAME, FIRST INITIAL

BARGE NUMBER

I PERSONALLY OBSERVED THE COMMISSION OF THE OFFENSE(S) CHARGED ABOVE, AND/OR VERIFIED THEIR EXISTENCE THROUGH REVIEW OF DEPARTMENTAL RECORDS.

Inspector's signature

This statement is affirmed under penalty of perjury.