

RA-54 (10/04)

State of New York Division of Housing and Community Renewal

Office of Rent Administration

Web Site: www.hcr.ny.gov

Gertz Plaza 92-31 Union Hall St. Jamaica, NY 11433

Docket Number:

Owner's Application for Order Granting Approval to Refuse Renewal of Lease and/or to Proceed for Eviction

Mailing Address of Tenant: (Please	print or type)	$\overline{}$	Mailing Add	dress of Owner/Age	ent: (Please print or type)	
Name:			Name:Number/Street:			
State, Zip Code:			State, Zip Co	ode:		
Telephone Number:			Telephone N	Tumber:		
Subject Building (if different from ter	nant's mailing addr	•				
Number and Street		Apartmen	t Number	Ci	ty, State, Zip Code	
Address of Housing Accommodati				Apartment Number	City, State, Zip Code	
2. The Legal Regulated or Maximum	Rent is: \$		per	·		
3. The lease in effect is for the term f	rom:	nth Da	, 20	to Month	, 20	
Refusal to renew lease is bas						
4. Owner occupancy. (Does not	apply to rent stabil	lized apartmen	ts in New York	c City.)		
5. Withdrawal from the rental ma	arket.					
6. Demolition.						
7. Other grounds. (Must be cons	sistent with the app	licable statute,	regulation or	code.)		
Names of all tenants and adult member	ers of household w	ho may be evi	cted if applicat	tion is granted:		
Name	Age (if known)		nrs in y (if known)		nirment Preventing Substantial mployment (if applicable)	
If a hearing is deemed appropriate base owner and the tenant of the time and documentary evidence necessary to su	place. At such hea apport owner's app	aring the owner lication.	r will be requir		of ownership and such other	

- 1 -

(Attach any additional pages, if required, and any supporting proof.)	
I have read the above and I affirm, under the penalties provided by law, that the contents are true of my own knowledge. It is not necessary that the above be sworn to, but false statements may subject you to the penalties provided by law.	
Signature:	
Name and Title Date	
Notice to Tenant	
On the front side of this form is an application filed by the owner. This notice affords you the opportunity to respond to that application. Your response should be submitted, in duplicate, on the answer forms enclosed, within twenty (20) days, by delivery or mail to the New York State Division of Housing and Community Renewal Office listed at the top of the front side	

- 2 -

of this application.

RA-54 (10/04)