

State of New York Division of Housing and Community Renewal

Office of Rent Administration Web Site: www.hcr.ny.gov Enforcement Unit Gertz Plaza 92-31 Union Hall Street Jamaica, New York 11433

	Oocket Number:	
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Tenant's Statement of Complaint(s) - Harassment

Filing Instructions: Complete an original and two copies of this complaint and include a copy of any attachments to each copy. File the original, two copies and any accompanying documents at the address indicated above by personal delivery or mail. Failure to follow this procedure or include all required information may result in the rejection of this application. See Part II for definitions of harassment.

Part 1 (Must be filled in completely in every case)					
Mailing Address of Tenant:					
Name:					
Number/Street:		Apt. No.:			
City, State, Zip:					
Telephone Number:(Re	sidence)	(Business)			
Email Address:					
Mailing Address of Owner:					
Name:					
Number/Street:					
City, State, Zip:					
Telephone Number:(Re	sidence)	(Business)			
Email Address:					
Name and Mailing Address of Managing A	gent (if different from a	bove):			
Name:					
Number/Street:					
City, State, Zip:					
Telephone Number:					
Email Address:					
Address of Building (if different from abov					
Number/Street		re, Zip Code			
(Complete this box in all cases)	Rooms Occupants	(Insert an address where you can be reached if you leave your present address)			
Apt. No. & Location (as "no. 3, second floor front", etc.)					
Are you a SRO (Single Room Occupancy)	tenant? Yes 🗌 N	Io \square			
Are you or were you an employee of the or	wner? Yes \(\subseteq \)	No 🗆			
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Co	emplete if your unit is in a co-op or condo: (write name and address of each listed below)
Un	it Owner/Proprietary Lessee:
То	Whom do you pay Rent:
Ma	anaging Agent for Rental Units:
	esident or Chairman of Co-op/Condo:
110	
	Part II - Definition of Harassment
(in in in	shall be unlawful for any owner or any person acting on his or her behalf, directly, or indirectly, to engage in any course of conduct necluding, but not limited to, interruption or discontinuance of required services, or unwarranted or baseless court proceedings) which terferes with, or disturbs, or is intended to interfere with or disturb the privacy, comfort, peace, repose or quiet enjoyment of the tenant his or her use or occupancy of the housing accommodations, or is intended to cause the tenant to vacate such housing accommodation waive any right afforded under the Rent Regulatory Laws. False filings with this agency may also be found to constitute harassment.
T	here must be a willful interruption in services or a continuing course of conduct, as distinguished from an isolated incident.
in su	ersons using this form may be summoned to testify under oath in court or before this agency in connection with criminal or civil action itiated on the basis of the statements contained herein. Painting complaints, other service complaints, and complaints of violations ach as overcharges, bonus payments, furniture tie-in sales, security deposits, lease renewals, etc., should not be filed on this form, but a other appropriate forms which may be obtained at your local Borough or District Rent Office.
th re ha A	enalties for Proven Violations: Owners found guilty of harassment are subject to fines imposed by the Commissioner of not less an \$3,000 nor more than \$11,000 for each offense. The Division of Housing and Community Renewal (DHCR) will permit no future nt increases once there has been a finding of harassment, until such finding is lifted by DHCR order. In addition, DHCR may refer transsment violations to the District Attorney. Any owner found guilty of harassment under the rent laws may be referred to the District ttorney's office where, after a criminal prosecution, an owner may be found guilty of a Class E Felony, where fines and imprisonment ay be imposed.
	Part III - General Information
1.	Date you took occupancy: Current rent charged: (wk.)
	Date current owner of building became the owner:
2.	Do you have a current lease? Yes \square No \square If yes, state the term of current lease: From $__/__/_$ To $__/__/_$
3.	Is rent being paid? Yes 🗌 No 📋 Amount paid \$, Amount demanded \$
	Is rent being accepted? Yes \square No \square Are receipts being given? Yes \square No \square Has landlord refused to renew your lease? Yes \square No \square
4.	Give total number of apartments (units) in building: Occupied: Vacant:
	If there are vacant apartments (units) in the building, indicate whether they are left open, locked, boarded up or being altered: (Circle appropriate items)
5.	Have you been notified that the building is scheduled for demolition or alteration? Yes No
6.	Has any alteration or construction work taken place at the building in the last six months? Yes $\ \square$ No $\ \square$
7.	Is a "work permit" from the Department of Buildings on display? Yes \(\subseteq \text{No} \subseteq \)
	Has the owner filed for Certificates of Eviction or for permission not to renew your lease? Yes \square No \square
	If yes, indicate Docket Nos.
8.	Is there a tenant's committee in your building? Yes \(\subseteq \text{No} \subseteq \text{If yes, indicate name, address and telephone number of the Chairman of the Committee:} \(\subseteq \text{Ves} \subseteq \text{No} \subseteq \text{No} \subseteq \text{No} \subseteq \text{If yes, indicate name, address and telephone number of the Chairman of the Committee:} \(\subseteq \text{No} \subseteq No
9.	My apartment is regulated under \square Rent Stabilization; \square ETPA; \square Rent Control; \square Hotel Stabilization (includes SRO tenants.)
10	Do you authorize DHCR to communicate with your attorney/representative concerning this complaint? Yes No If yes, indicate name, address and telephone number:
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	Part IV - Nature of Harassment If you need more space for details use Part V						
11.		I was offered \$ by I was threatened with eviction if I refu I was told that essential services would I was offered another apartment. After I refused the offer, the services was After I refused the offer, I have received.	(name) used to vacate my apartment. d not be provided. ere decreased.	to vacate my apartment by	(date)		
12.		The owner has brought court action against me: Yes No If yes, complete a, b, c & d below. Kind of court action: Date of court action: Index No (If more than one court action, list in Part V) I have retained a lawyer. Give name, address and telephone no.: The claim against me is unfounded for the reasons stated in Part V. Also give status of legal proceeding. (In any subsequent					
13.		The claim against me is unfounded for to conference, please bring copies of any I filed the following applications with the Docket No. & Nature of Complaint	court papers.)	on or other Agency.	Disposition		
		I have also filed complaints with —	Name of Agency	Date	File No.		
_			Disposition				
14.		I have been illegally evicted, "locked-ou	nt" or otherwise excluded from	m my apartment.			
15.		I have taken legal action against the owr	ner: Yes \square No \square If yes, i	ndicate:			
16.		The owner has intentionally decreased, cold water; \square electricity; \square superinte	_				
		Pa	rt V - Further Statement	of Tenant			
	(State in this space additional facts which may assist Office of Rent Administration in processing your complaint) This section must be filled out. All statements and attachments must be in English.						
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Part V - Further Statement of Tenant (cont'd)

(State in this space additional facts which may assist Office of Rent Administration in processing your complaint)

This section must be filled out.

All statements and attachments must be in English.

I have read the foregoing and I hereby affirm under the penalties provided by law that the contents thereof are true of my own knowledge.

It is not necessary that the foregoing be notarized, but false statements may subject you to the penalties provided by law.

	Signature of Tenant	
Dated:		

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