



State of New York
Division of Housing and Community Renewal
 Office of Rent Administration

Gertz Plaza
 SCORE Intake
 92-31 Union Hall Street
 Jamaica, NY 11433
 (718) 739-6400

Docket Number:
For Office Use Only

**Failure To Provide Heat And/Or Hot Water -
 Tenant Application For Rent Reduction**

Under the Multiple Dwelling Law and Housing Maintenance Code heat and hot water are required. Heat must be provided from **October 1 through May 31 as follows:**

6 AM to 10 P.M.:

When the outside temperature is below 55° F, the inside temperature must be at least 68° F.

10 PM to 6 A.M.:

When the outside temperature is below 40° F, the inside temperature must be at least 55° F.

Hot water is required 365 days per year, **24 hours a day** at a minimum of **120° F** at the tap. If a tub or shower is equipped with an anti-scald valve that prevents the hot water temperature from exceeding **120° F**, the minimum hot water temperature for that tub or shower is **110° F**.

TENANT INSTRUCTIONS: Please type or clearly print all information requested. Be sure to date and sign the back of the application. Mail or deliver the original plus one copy of the signed application to the DHCR address shown above. Keep one copy for your records.

Part I - General Information

1. Mailing Address of Tenant:

 Name

 Number/Street Apt. No.

 City, State, Zip Code

Telephone No.: Bus. () _____
 Res. () _____

2. Mailing Address of Owner/Managing Agent:

 Name

 Number/Street

 City, State, Zip Code

Telephone Number: () _____

3. Subject Building (if different from tenant's mailing address):

 Number and Street Apartment Number City, State, Zip Code

4. My apartment is: Rent Stabilized Rent Controlled Hotel Stabilized SRO (Single Room Occupancy)

Complete the following, if applicable:

A Co-op/Condo
 Unit Owner/Proprietary Lessee: _____
 Name of Cooperative Corp./Condo Assn.: _____
 Managing Agent: _____

My building is managed by a 7-A Administrator.
 Name of 7-A Administrator: _____

5. I moved into my apartment on: ____ / ____ / ____.

6. My current rent is: \$ _____ per: week month

7. I have a current lease. The lease term is from ____ / ____ / ____ to ____ / ____ / ____.
Date Date

I do not have a current lease.

Part II - Tenant's Statement of Complaint

8. Check appropriate boxes to indicate services not provided.

Heat - Not Provided/Inadequate

Hot Water - Not Provided/Inadequate

Date(s)					
Time(s)					

Date(s)					
Time(s)					

Describe Extent of Reduction of Service: _____

9. The conditions stated in this complaint were brought to the attention of the:

a. Owner/Superintendent Agent or Co-op Corp./Condo Assn.

b. In person: ____ / ____ / ____ By phone: ____ / ____ / ____ By Letter: ____ / ____ / ____
Date Date Date

c. Unable to contact Owner/Agent

Part III - Tenant's Affirmation

I have read the information on this application and I affirm the contents to be true of my own knowledge.

____ / ____ / ____
Date of Mailing

Tenant's Signature