NYCServ Violation Copy

Internet

35688351H

NYC Buildings

SUMMONS AND COMMISSIONER'S ORDER• CIVIL PENALTIES APPLY

35688351H

SUMMONS NUMBER: 35688351H

ENFORCEMENT AGENCY: NYC DEPT OF BUILDINGS

AGENCY ADDRESS AND WEBSITE: 280 Broadway, New York, NY 10007 www.nyc.gov/buildings

RESPONDENT: 199 MALCOLM X AMS, LLC (First Name/Entity, Last)

MAILING ADDRESS: 2 WEST 45 STREET 15TH FLOOR **DOB License/Registration #:**

NEW YORK NY 10036

CELL PHONE: N/A

DATE OF OCCURRENCE: 02/06/2025 **TIME OBSERVED:** 9:30 (am)/pm

PLACE OF OCCURRENCE: 199 MALCOLM X BLVD **BOROUGH:** BK

BLOCK: 1652 **LOT** 7 **BIN:** 3045534

You must appear or respond to the details of violation(s) below. For HOW TO RESPOND, see the back of this summons.

HEARING DATE: 4/16/2025 **AT:** ☑ 8:30 am ☐ 10:30 am ☐ 12:30 pm

OFFICE OF ADMINISTRATIVE TRIALS AND HEARINGS: BROOKLYN [Borough] (See reverse side for address)

Phone: (844)628-4692

REFER TO THE SUMMONS NUMBER ABOVE ON ALL CORRESPONDENCE.

WARNING: If you do not appear or respond to this Summons, the City will decide the Summons against you and impose penalties. Failure to pay a civil penalty could lead to the denial of an application for, or the suspension, termination or revocation of a City license, permit or registration. In addition, the City may enter a judgment against you in court.

COMMISSIONER'S ORDER TO CORRECT VIOLATION CONDITION(S)

CURE DATE (Zero Penalty Option, if available): — **Must Appear:** ☑

☐ 1-2 Family Property **Details of Violation(s)** **(If disputing the charge)**

Type of Construction: III **No. of Stories:** 3 **Vio. Type:** C **Dist.** MN **Code** 29 **No.** 02

Occupancy at Time of Inspection: MIX USE **Complaint#:** OCE (If applicable) **Related Job#** (If applicable)

Based on an inspection of the premises and/or records of the Department, the undersigned has determined that you are in violation of the section of law cited below of the NYC Administrative Code, the NYC Zoning Resolution and/or Titles 1 or 2 of the Rules of the City of New York.

Violating Conditions Observed	Infraction Code	Class	Provision of Law	Recurring Condition- Aggravated I per 1RCNY 102-01(f)	Stop Work/Vacate Order Issued ☐ Full ☐ Partial #
	B1E8	1	28-210-1		
	B172	1	28-202-1		

☒ **ILLEGAL CONVERSION—CLASS 1** Per 28-202.1 & 1 RCNY 102-01 additional daily penalties for continued violation of Article 210 of Title 28 also applicable

☐ Per 28-202.1 & 1 RCNY 102-01, additional Class 1 daily or Class 2 monthly penalty may apply ☐ **Aggravated II Condition per 1 RCNY 102-01(f)**

Violation Detail(s): ILLEGAL OCCUPANCY WITH 3 OR MORE ADDITIONAL DWELLING UNITS. ILLEGAL OCCUPANCY NOTED AT APTS 2R AND 3R HAVE BEEN CONVERTED / OCCUPIED AS ADDITIONAL 6 FURNISHED ROOMS RENTING SEPARATELY AND INDEPENDENTLY FROM EACH OTHER WITH PERSONAL ITEMS. AT ROOM 2, APT 2R OCCUPIED BY ONE GUEST. (RM. 2 AT MIDDLE)

SEPARATE VIOLATIONS FOR EACH ADDITIONAL DWELLING UNIT

Remedy: RESTORE TO PRIOR LEGAL CONDITION.

THE COMMISSIONER ORDERS THAT YOU TIMELY CORRECT THESE CONDITIONS AND FILE A CERTIFICATE OF SUCH CORRECTION. See 1RCNY 102-01 and the reverse for instructions on certifying correction. Uncorrected violations are subject to additional violations and penalties. For certain charges, additional DOB civil penalties may apply pursuant to sections 28-213.1, 28-219.1 and 28-207.2.6 of the Administrative Code. A property owner may be liable for payment of these additional civil penalties even if not cited as respondent on this summons.

NYC Charter Sections 1048 and 1049-a and the Rules of the City of New York authorize the NYC Office of Administrative Trials and Hearings (OATH) to hold hearings. **For hearing options, see other side of this notice.**

I, an employee of the Department of Buildings, affirm under penalty of perjury that I personally observed the commission of the violation(s) charged above and/or verified their existence through a review of departmental records. False statements made herein are punishable as a Class A Misdemeanor pursuant to section 210.45 of the Penal Law.

Issuing Officer: QUINTANAR, R **Signature:** [signature] **Badge#** 3659 **Unit Code:** M 1

35688351H

ORIGINAL - OATH/ECB COPY

ECB-PC (Rev. 8/21)