

CIVIL COURT OF THE CITY OF NEW YORK
 County of NY
 Housing Part

Index No.: LT/HP 307504-25

JUDICIAL REQUEST / ORDER

for

HOUSING INSPECTION

DUKLETH et al Petitioner(s),
 against
109 E9 LLC et al Respondent(s)

THE PEOPLE OF THE STATE OF NEW YORK

TO THE DEPARTMENT OF HOUSING PRESERVATION AND DEVELOPMENT OF THE CITY OF NEW YORK:

In connection with the existing case in the Civil Court of the City of New York referred to above, the tenant of the apartment referred to below alleges violation(s) exist and has requested that an inspection of the property be made.

Tenant's Name: VACANT UNIT

Tenant's Address: _____

Apt. _____ Floor _____ email: _____

Tenant's Phone #(s): Home: () _____
 Work: () _____

CHILD UNDER SIX?

Does a child under six live here or routinely spends more than 10 hours a week here? Yes No
 Does the child live here? Yes No or
 Does the child routinely spend more than 10 hours a week here? Yes No
 If yes, please provide the name and age/date of birth for each child.

Name	Age/Date of Birth
_____	_____
_____	_____

You may gain access by contacting: _____

Inspection Date: 6-17-25 <u>6-24-25</u> Weekday Times: <input checked="" type="checkbox"/> 9 AM - 1 PM (all boroughs) <input checked="" type="checkbox"/> 12 PM - 5 PM (MN, BKLYN, BX, QNS) <input type="checkbox"/> 4 PM - 9 PM (MN, BKLYN, BX) Weekend Times: <input type="checkbox"/> 9 AM - 5 PM (MN, BKLYN, BX) <u>TUE 9AM-1PM</u>	Case Adjourned to: <u>7-14-25</u> <u>9:30AM</u>	DIVISION OF CODE ENFORCEMENT Inspector's Name: _____ Inspector's Badge No.: _____ Inspection Date: _____
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Apt. No. (OR PUBLIC AREA)	Which Room?	Condition(s) - Be Specific	REPORT
<u>3A</u>	<u>ALL</u>	<u>1 NO FIRESTOPPING</u>	
<u>(ON FOURTH FLOOR)</u>		<u>2 FLOORING REMOVED</u>	
		<u>3 CEILING REMOVED</u>	
		<u>4</u>	
		<u>5 (VACANT UNIT)</u>	
		<u>6</u>	

YOU ARE HEREBY REQUESTED / DIRECTED to inspect said premises and to report the findings of this inspection to this Court.

5-29-25
 Date

 Housing Judge / Judge of the Civil Court

FOR DIVISION OF CODE ENFORCEMENT USE ONLY
INSPECTION RESULTS

No Access at time of Inspection
 No Violations Issued
 Violations issued, see attached Violation Summary Report (VSR)

CIVIL COURT OF THE CITY OF NEW YORK

Index No.: LT/HP 307504-25

County of New York
Housing Part B

JUDICIAL REQUEST / ORDER

for

HOUSING INSPECTION

Dukleth et. al.

Petitioner(s),

against

107E9 LLC et. al.
HPD, DOB

Respondent(s),

THE PEOPLE OF THE STATE OF NEW YORK

TO THE DEPARTMENT OF HOUSING PRESERVATION AND DEVELOPMENT OF THE CITY OF NEW YORK:

In connection with the existing case in the Civil Court of the City of New York referred to above, the tenant of the apartment referred to below alleges violation(s) exist and has requested that an inspection of the property be made.

Tenant's Name: VACANT UNIT

Tenant's Address: _____

Apt. _____ Floor _____ email: _____

Tenant's Phone #(s): Home: () _____

Work: () _____

CHILD UNDER SIX?

Does a child under six live here or routinely spends more than 10 hours a week here? Yes No

Does the child live here? Yes No or

Does the child routinely spend more than 10 hours a week here? Yes No

If yes, please provide the name and age/date of birth for each child.

Name _____ Age/Date of Birth _____

You may gain access by contacting: _____

Inspection Date: <u>6-17-25</u> <u>6-24-2025</u> Weekday Times: <input checked="" type="checkbox"/> 9 AM - 1 PM (all boroughs) <input checked="" type="checkbox"/> (12 PM - 5 PM (MN, BKLYN, BX, QNS)) <input type="checkbox"/> 4 PM - 9 PM (MN, BKLYN, BX) Weekend Times: <input type="checkbox"/> 9 AM - 5 PM (MN, BKLYN, BX) <u>TUE 9AM-1PM</u>	Case Adjourned to: <u>7-14-25</u> <u>9:30 AM</u>	DIVISION OF CODE ENFORCEMENT Inspector's Name: _____ Inspector's Badge No.: _____ Inspection Date: _____
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Apt. No. (OR PUBLIC AREA)	Which Room?	Condition(s) - Be Specific	REPORT
<u>2B</u>	<u>ALL</u>	<u>1 Vacant unit - absence of</u>	
<u>(ON 3RD FLOOR)</u>		<u>2 fire stopping; unrepaired</u>	
		<u>3 ceilings/floors.</u>	
		<u>4</u>	
		<u>5</u>	
		<u>6</u>	

YOU ARE HEREBY REQUESTED / DIRECTED to inspect said premises and to report the findings of this inspection to this Court.

5-29-25
Date

Housing Judge / Judge of the Civil Court

FOR DIVISION OF CODE ENFORCEMENT USE ONLY
INSPECTION RESULTS

No Access at time of Inspection

No Violations Issued

Violations issued, see attached Violation Summary Report (VSR)

CIVIL COURT OF THE CITY OF NEW YORK
 County of NY
 Housing Part

Index No.: LT/HP 307504-25

JUDICIAL REQUEST / ORDER

for

HOUSING INSPECTION

THOMAS DUKLETH et al }
 Petitioner(s),
 against
109 E9 LLC et al }
 Respondent(s),

THE PEOPLE OF THE STATE OF NEW YORK
 TO THE DEPARTMENT OF HOUSING PRESERVATION AND DEVELOPMENT OF THE CITY OF NEW YORK:
 In connection with the existing case in the Civil Court of the City of New York referred to above, the tenant of the apartment referred to below
 alleges violation(s) exist and has requested that an inspection of the property be made.

Tenant's Name: VACANT UNIT

Tenant's Address: _____

Apt. _____ Floor _____ email: _____

Tenant's Phone #(s): Home: () _____
 Work: () _____

CHILD UNDER SIX?

Does a child under six live here or routinely spends more than 10 hours a week here? Yes No
 Does the child live here? Yes No or
 Does the child routinely spend more than 10 hours a week here? Yes No
 If yes, please provide the name and age/date of birth for each child.

Name	Age/Date of Birth
_____	_____
_____	_____

You may gain access by contacting: _____

Inspection Date: <u>6-17-25 - 6-24-2025</u> Weekday Times: <input checked="" type="checkbox"/> 9 AM - 1 PM (all boroughs) <input checked="" type="checkbox"/> 12 PM - 5 PM (MN, BKLYN, BX, QNS) <input type="checkbox"/> 4 PM - 9 PM (MN, BKLYN, BX) Weekend Times: <input type="checkbox"/> 9 AM - 5 PM (MN, BKLYN, BX) <u>TUE 9AM-1PM</u>	Case Adjourned to: <u>7-14-25</u> <u>930</u>	DIVISION OF CODE ENFORCEMENT Inspector's Name: _____ Inspector's Badge No.: _____ Inspection Date: _____
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Apt. No. (OR PUBLIC AREA)	Which Room?	Condition(s) - Be Specific	REPORT
1		1 NO FIRESTOPPING	
<u>2nd Floor</u>		2 <u>FLOORING REMOVED</u>	
<u>RESIDENTIAL</u>		3 <u>CEILING REMOVED</u>	
<u>UNIT</u>		4	
	<u>ALL</u>	5	
<u>(VACANT)</u>		6	

YOU ARE HEREBY REQUESTED / DIRECTED to inspect said premises and to report the findings of this inspection to this Court.

5-29-25
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 Housing Judge / Judge of the Civil Court

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CIVIL COURT OF THE CITY OF NEW YORK

Index No.: LT/HP 307504/25

County of NY
Housing Part

JUDICIAL REQUEST / ORDER

for

HOUSING INSPECTION

DUKLETH et al } Petitioner(s),
against
109 EQ LLC et al } Respondent(s),

THE PEOPLE OF THE STATE OF NEW YORK

TO THE DEPARTMENT OF HOUSING PRESERVATION AND DEVELOPMENT OF THE CITY OF NEW YORK:

In connection with the existing case in the Civil Court of the City of New York referred to above, the tenant of the apartment referred to below alleges violation(s) exist and has requested that an inspection of the property be made.

Tenant's Name: PUBLIC AREA

Tenant's Address: _____

Apt. _____ Floor _____ email: _____

Tenant's Phone #(s): Home: () _____

Work: () _____

CHILD UNDER SIX?

Does a child under six live here or routinely spends more than 10 hours a week here? Yes No

Does the child live here? Yes No or

Does the child routinely spend more than 10 hours a week here? Yes No

If yes, please provide the name and age/date of birth for each child.

Name	Age/Date of Birth
_____	_____
_____	_____

You may gain access by contacting: _____

Inspection Date: 6-18-25 <u>6-24-2025</u> Weekday Times: <input checked="" type="checkbox"/> 9 AM - 1 PM (all boroughs) <input type="checkbox"/> 12 PM - 5 PM (MN, BKLYN, BX, QNS) <input type="checkbox"/> 4 PM - 9 PM (MN, BKLYN, BX) Weekend Times: <input type="checkbox"/> 9 AM - 5 PM (MN, BKLYN, BX) <u>TUE 9AM-1PM</u>		Case Adjourned to: <u>7-14-25</u> <u>9:30 AM</u>	DIVISION OF CODE ENFORCEMENT Inspector's Name: _____ Inspector's Badge No.: _____ Inspection Date: _____
Apt. No. (OR PUBLIC AREA)	Which Room?	Condition(s) - Be Specific	REPORT
<u>2ND FL</u>	<u>1</u>	<u>HOLES IN FLOOR</u>	
<u>HALLWAY</u>	<u>2</u>		
	<u>3</u>		
<u>(PUBLIC)</u>	<u>4</u>		
	<u>5</u>		
	<u>6</u>		

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CIVIL COURT OF THE CITY OF NEW YORK

Index No.: LT/HP 307504-25

County of New York B
Housing Part

JUDICIAL REQUEST / ORDER

for

HOUSING INSPECTION

Dukleth et al. Petitioner(s),
against
109E9 LLC et al. Respondent(s),
HPD, DOB

THE PEOPLE OF THE STATE OF NEW YORK
TO THE DEPARTMENT OF HOUSING PRESERVATION AND DEVELOPMENT OF THE CITY OF NEW YORK:
In connection with the existing case in the Civil Court of the City of New York referred to above, the tenant of the apartment referred to below alleges violation(s) exist and has requested that an inspection of the property be made.

Tenant's Name: VACANT UNIT

Tenant's Address: _____

Apt. _____ Floor _____ email: _____

Tenant's Phone #(s): Home: () _____

Work: () _____

CHILD UNDER SIX?

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Name	Age/Date of Birth
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_____	_____

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Apt. No. (OR PUBLIC AREA)	Which Room?	Condition(s) – Be Specific	REPORT
<u>2A</u>	<u>ALL</u>	<u>1 vacant unit - absence of firestopping</u>	
<u>(ON THIRD FLOOR)</u>		<u>2 unsecured ceiling/floor openings</u>	
		<u>3</u>	
		<u>4</u>	
		<u>5</u>	
		<u>6</u>	

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Housing Judge / Judge of the Civil Court

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INSPECTION RESULTS

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Violations issued, see attached Violation Summary Report (VSR)

CIVIL COURT OF THE CITY OF NEW YORK
 County of NY
 Housing Part

Index No.: LT/HP 307504-25

JUDICIAL REQUEST / ORDER

for
HOUSING INSPECTION

DUKLEITH et al Petitioner(s),
 against
109 E9 LLC et al Respondent(s)

THE PEOPLE OF THE STATE OF NEW YORK
TO THE DEPARTMENT OF HOUSING PRESERVATION AND DEVELOPMENT OF THE CITY OF NEW YORK:
 In connection with the existing case in the Civil Court of the City of New York referred to above, the tenant of the apartment referred to below alleges violation(s) exist and has requested that an inspection of the property be made.

Tenant's Name: VACANT UNIT
 Tenant's Address: _____

 Apt. _____ Floor _____ email: _____
 Tenant's Phone #(s): Home: () _____
 Work: () _____

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Does a child under six live here or routinely spends more than 10 hours a week here? Yes No
 Does the child live here? Yes No or
 Does the child routinely spend more than 10 hours a week here? Yes No
 If yes, please provide the name and age/date of birth for each child.

Name	Age/Date of Birth
_____	_____
_____	_____

You may gain access by contacting: _____

Inspection Date: 6-19-25 <u>6-25-2025</u> Weekday Times: <input checked="" type="checkbox"/> 9 AM - 1 PM (all boroughs) <input type="checkbox"/> 12 PM - 5 PM (MN, BKLYN, BX, QNS) <input type="checkbox"/> 4 PM - 9 PM (MN, BKLYN, BX) Weekend Times: <input type="checkbox"/> 9 AM - 5 PM (MN, BKLYN, BX) <p style="text-align: center;">WEDNESDAY</p>		Case Adjourned to: <u>7-14-25</u> @ <u>930 AM</u>	DIVISION OF CODE ENFORCEMENT Inspector's Name: _____ Inspector's Badge No.: _____ Inspection Date: _____
Apt. No. (OR PUBLIC AREA)	Which Room?	Condition(s) - Be Specific	REPORT
<u>4A</u>	<u>ALL</u>	<u>NO FIRESTOPPING</u>	
<u>(ON FIFTH FLOOR)</u>		<u>FLOORING REMOVED</u>	
		<u>CEILING REMOVED</u>	
		<u>(VACANT UNIT)</u>	

YOU ARE HEREBY REQUESTED / DIRECTED to inspect said premises and to report the findings of this inspection to this Court.
5-29-25
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CIVIL COURT OF THE CITY OF NEW YORK

Index No.: LT/HP 307504-25

County of New York
Housing Part B

JUDICIAL REQUEST / ORDER

for

HOUSING INSPECTION

Dukleth, et. al.

Petitioner(s),

against

109E9 LLC, HPD, DoB
et. al

Respondent(s),

THE PEOPLE OF THE STATE OF NEW YORK

TO THE DEPARTMENT OF HOUSING PRESERVATION AND DEVELOPMENT OF THE CITY OF NEW YORK:

In connection with the existing case in the Civil Court of the City of New York referred to above, the tenant of the apartment referred to below alleges violation(s) exist and has requested that an inspection of the property be made.

Tenant's Name: VACANT UNIT

Tenant's Address: _____

Apt. _____ Floor _____ email: _____

Tenant's Phone #(s): Home: () _____

Work: () _____

CHILD UNDER SIX?

Does a child under six live here or routinely spends more than 10 hours a week here? Yes No

Does the child live here? Yes No or

Does the child routinely spend more than 10 hours a week here? Yes No

If yes, please provide the name and age/date of birth for each child.

Name _____ Age/Date of Birth _____

You may gain access by contacting: _____

Inspection Date: <u>6-18-25</u> <u>6-25-25</u> Weekday Times: <input checked="" type="checkbox"/> 9 AM - 1 PM (all boroughs) <input type="checkbox"/> 12 PM - 5 PM (MN, BKLYN, BX, QNS) <input type="checkbox"/> 4 PM - 9 PM (MN, BKLYN, BX) Weekend Times: <input checked="" type="checkbox"/> 9 AM - 5 PM (MN, BKLYN, BX) <p style="text-align: center;">WEDNESDAY</p>	Case Adjourned to: <u>7-14-25</u> @ <u>9:30 AM</u>	DIVISION OF CODE ENFORCEMENT Inspector's Name: _____ Inspector's Badge No.: _____ Inspection Date: _____
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Apt. No. (OR PUBLIC AREA)	Which Room?	Condition(s) - Be Specific	REPORT
<u>2B 4C</u>	<u>ALL</u>	<u>1 vacant unit - absence of</u>	
<u>(ON FIFTH FLOOR)</u>		<u>2 firestopping, removal of</u>	
		<u>3 ceiling & flooring.</u>	
		<u>4</u>	
		<u>5</u>	
		<u>6</u>	

YOU ARE HEREBY REQUESTED / DIRECTED to inspect said premises and to report the findings of this inspection to this Court.

5-29-25
Date

Housing Judge / Judge of the Civil Court

FOR DIVISION OF CODE ENFORCEMENT USE ONLY

INSPECTION RESULTS

No Access at time of Inspection

No Violations Issued

Violations issued, see attached Violation Summary Report (VSR)

CIVIL COURT OF THE CITY OF NEW YORK
 County of New York
 Housing Part B

Index No.: LT/HP 307504-25

JUDICIAL REQUEST / ORDER

Dukleth et. al. Petitioner(s),
 against
109 E 9 LLC et. al. Respondent(s),
HPD, DOB

for
HOUSING INSPECTION

THE PEOPLE OF THE STATE OF NEW YORK
TO THE DEPARTMENT OF HOUSING PRESERVATION AND DEVELOPMENT OF THE CITY OF NEW YORK:
 In connection with the existing case in the Civil Court of the City of New York referred to above, the tenant of the apartment referred to below alleges violation(s) exist and has requested that an inspection of the property be made.

Tenant's Name: PUBLIC AREA
 Tenant's Address: _____
 Apt. _____ Floor _____ email: _____
 Tenant's Phone #(s): Home: () _____
 Work: () _____

CHILD UNDER SIX?

Does a child under six live here or routinely spends more than 10 hours a week here? Yes No
 Does the child live here? Yes No or
 Does the child routinely spend more than 10 hours a week here? Yes No
 If yes, please provide the name and age/date of birth for each child.

Name	Age/Date of Birth
_____	_____
_____	_____
_____	_____

You may gain access by contacting: _____

Inspection Date: <u>6-19-25 THURS 6-26-25</u> Weekday Times: <input checked="" type="checkbox"/> 9 AM - 1 PM (all boroughs) <input type="checkbox"/> 12 PM - 5 PM (MN, BKLYN, BX, QNS) <input type="checkbox"/> 4 PM - 9 PM (MN, BKLYN, BX) Weekend Times: <input type="checkbox"/> 9 AM - 5 PM (MN, BKLYN, BX) <u>9AM - 1PM</u>		Case Adjourned to: <u>7-14-25</u> <u>@</u> <u>9:30 AM</u>	DIVISION OF CODE ENFORCEMENT Inspector's Name: _____ Inspector's Badge No.: _____ Inspection Date: _____
Apt. No. (OR PUBLIC AREA)	Which Room?	Condition(s) - Be Specific	REPORT
<u>Stairwell (PUBLIC)</u>		<u>1 Insecure Railings</u>	
		<u>2 Loose stairwell tread btwn 3rd &</u>	
		<u>3 4m floor landings.</u>	
		<u>4</u>	
		<u>5</u>	
		<u>6</u>	

YOU ARE HEREBY REQUESTED / DIRECTED to inspect said premises and to report the findings of this inspection to this Court.
5-29-25 Date
 _____ Housing Judge / Judge of the Civil Court

FOR DIVISION OF CODE ENFORCEMENT USE ONLY
INSPECTION RESULTS

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CIVIL COURT OF THE CITY OF NEW YORK

Index No.: LT/HP 307504-25

County of New York
Housing Part 13

JUDICIAL REQUEST / ORDER

for

HOUSING INSPECTION

Dukeleth et. al. Petitioner(s),
against
101E9 LLC et. al. Respondent(s),
HPD, DOB

THE PEOPLE OF THE STATE OF NEW YORK

TO THE DEPARTMENT OF HOUSING PRESERVATION AND DEVELOPMENT OF THE CITY OF NEW YORK:
In connection with the existing case in the Civil Court of the City of New York referred to above, the tenant of the apartment referred to below alleges violation(s) exist and has requested that an inspection of the property be made.

Tenant's Name: PUBLIC AREA

Tenant's Address: _____

Apt. _____ Floor _____ email: _____

Tenant's Phone #(s): Home: () _____
Work: () _____

CHILD UNDER SIX?

Does a child under six live here or routinely spends more than 10 hours a week here? Yes No
Does the child live here? Yes No or
Does the child routinely spend more than 10 hours a week here? Yes No
If yes, please provide the name and age/date of birth for each child.

Name	Age/Date of Birth
_____	_____
_____	_____

You may gain access by contacting: _____

Inspection Date: <u>6-19-25</u> <u>THUR 6-26-25</u> Weekday Times: <input checked="" type="checkbox"/> 9 AM - 1 PM (all boroughs) <input type="checkbox"/> 12 PM - 5 PM (MN, BKLYN, BX, QNS) <input type="checkbox"/> 4 PM - 9 PM (MN, BKLYN, BX) Weekend Times: <input checked="" type="checkbox"/> 9 AM - 5 PM (MN, BKLYN, BX) <u>9AM - 1PM</u>	Case Adjourned to: <u>7-14-25</u> @ <u>9:30am</u>	DIVISION OF CODE ENFORCEMENT Inspector's Name: _____ Inspector's Badge No.: _____ Inspection Date: _____
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Apt. No. (OR PUBLIC AREA)	Which Room?	Condition(s) - Be Specific	REPORT
<u>3rd floor</u>		<u>1 Removed water closet</u>	
<u>PUBLIC AREA</u>		<u>2 (between 2A & 2B)</u>	
		3	
		4	
		5	
		6	

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5-29-25
Date

Housing Judge / Judge of the Civil Court

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INSPECTION RESULTS

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CIVIL COURT OF THE CITY OF NEW YORK

Index No.: LT/HP 307504-25

County of New York
Housing Part B

JUDICIAL REQUEST / ORDER

Dukleth et. al. }
Petitioner(s),
against
109 E9 LLC, et. al. }
Respondent(s),
HPD, DOB

for
HOUSING INSPECTION

THE PEOPLE OF THE STATE OF NEW YORK
TO THE DEPARTMENT OF HOUSING PRESERVATION AND DEVELOPMENT OF THE CITY OF NEW YORK:
In connection with the existing case in the Civil Court of the City of New York referred to above, the tenant of the apartment referred to below alleges violation(s) exist and has requested that an inspection of the property be made.

Tenant's Name: PUBLIC AREA
Tenant's Address: _____
Apt. _____ Floor _____ email: _____
Tenant's Phone #(s): Home: () _____
Work: () _____

CHILD UNDER SIX?

Does a child under six live here or routinely spends more than 10 hours a week here? Yes No
Does the child live here? Yes No or
Does the child routinely spend more than 10 hours a week here? Yes No
If yes, please provide the name and age/date of birth for each child.

Name	Age/Date of Birth
_____	_____
_____	_____

You may gain access by contacting: _____

Inspection Date: <u>6-26-2025</u> Weekday Times: <u>9 AM - 1 PM (all boroughs)</u> <input type="checkbox"/> 12 PM - 5 PM (MN, BKLYN, BX, QNS) <input type="checkbox"/> 4 PM - 9 PM (MN, BKLYN, BX) Weekend Times: <input type="checkbox"/> 9 AM - 5 PM (MN, BKLYN, BX) <u>9AM - 1PM THURSDAY</u>	Case Adjourned to: <u>7-14-25</u> <u>9:30 AM</u>	DIVISION OF CODE ENFORCEMENT Inspector's Name: _____ Inspector's Badge No.: _____ Inspection Date: _____
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Apt. No. (OR PUBLIC AREA)	Which Room?	Condition(s) - Be Specific	REPORT
<u>4th floor</u>	<u>1</u>	<u>Removed common kitchen</u>	
<u>PUBLIC AREA</u>	<u>2</u>	<u>Removed bathing facilities</u>	
	<u>3</u>		
	<u>4</u>		
	<u>5</u>		
	<u>6</u>		

YOU ARE HEREBY REQUESTED / DIRECTED to inspect said premises and to report the findings of this inspection to this Court.

6-26-25
Date

Housing Judge / Judge of the Civil Court

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INSPECTION RESULTS

No Access at time of Inspection
 No Violations Issued
 Violations issued, see attached Violation Summary Report (VSR)

ALBERT J. ...
JUDGE