

**Department of  
Housing Preservation and Development  
Division of Code Enforcement**  
(Form A-B)

Civil Court Index No: LT/HP \_\_\_\_\_

County of \_\_\_\_\_

Housing Part: \_\_\_\_\_ Room \_\_\_\_\_

The case of \_\_\_\_\_

vs. \_\_\_\_\_

will appear on the Court Calendar on:

\_\_\_\_\_ at \_\_\_\_\_ AM/PM

**TENANT'S REQUEST FOR INSPECTION**

Tenant's Name: \_\_\_\_\_

Tenant's Address: \_\_\_\_\_  
\_\_\_\_\_

Apt. No. \_\_\_\_\_ Floor: \_\_\_\_\_

Tenant's Phone #'s: Home: ( ) \_\_\_\_\_

Work: ( ) \_\_\_\_\_

Is there a child under the age of 6 residing in this apartment? Yes  No

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

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

You may gain access by contacting: \_\_\_\_\_

TENANT'S ALLEGATION OF VIOLATIONS			DIVISION OF CODE ENFORCEMENT
Apt. No. (Or Public Area)	Which Room?	Condition(s) - Be Specific	Inspector's No: _____ Date: _____  Signature REPORT
		1.	
		2.	
		3.	
		4.	
		5.	
		6.	
		7.	
		8.	
		9.	
		10.	

In connection with the above mentioned case in the Civil Court of the City of New York, I, the tenant of the apartment referred to, wish to call the Court's attention to the conditions listed above which I allege are violations, and request that an inspection of the property be made to verify my allegations.

Date of Request: \_\_\_\_\_

Tenant's Signature: \_\_\_\_\_

INSPECTION DATE	INSPECTION TIME
An inspector will come to inspect these conditions on: _____	<input type="checkbox"/> 10 AM - 2 PM <input type="checkbox"/> 2 PM - 6 PM <input type="checkbox"/> 5 PM - 9 PM <input type="checkbox"/> <b>Weekend</b> 10 AM - 3 PM <input type="checkbox"/> <b>Staten Island</b> 10 AM - 2 PM