



NOTICE OF VIOLATION AND HEARING



COMMISSIONER OF THE DEPARTMENT OF BUILDINGS OF THE CITY OF NEW YORK, PETITIONER, AGAINST

Violation No. 34925099P ENVIRONMENTAL CONTROL BOARD

Respondent: Domingue Marie Lisotte. Mailing address: 144-01 Lakewood Ave, NYC 10035. License No. (if applicable): SRO's. Project Code: F.D.N.Y.

Commissioner's Order To Correct Violations

Place of occurrence: 144-01 Lakewood Ave, NYC 10035. Date of violation: 04/27/2012. Type: C. Code: 28-210.1. Basis of violation: SRO's F.D.N.Y.

Based on an inspection of the premises and/or records of the Department, the undersigned has determined that you are in violation of the sections of law cited below, of Title 27, Title 28 of the NYC Administrative Code, the NYC Construction Codes, the NYC Zoning Resolution, the Reference Standards and/or Titles 1 and/or 2 of the Rules of the City of New York.

Violating Conditions Observed: Residence altered for occupancy as a dwelling from one or two families to 4 or more families; in that the entire attic and cellar was altered, shut-out partitions erected, creating sleeping quarters: One in the cellar and two in the attic.

Remedy: Restore the attic and cellar to prior legal condition immediately. Vacate cellar and attic.

ILLEGAL CONVERSION - CLASS 1. Per 28-202.1 & 1RCNY 102-01, additional daily penalties for continued violation of 28-210.1 also applicable.

The Commissioner of the Department of Buildings orders that you correct these conditions and file a certificate of such correction.

Important information: As detailed in §28-201.4 and Section 102-01 of Subchapter B of Title 1 of the Rules of the City of New York, violations may be subject to aggravated penalties of the first order, which shall be imposed in accordance with the ECB Buildings Penalty Schedule.

Resolution options: CURE DATE: [blank]. HEARING DATE: 06/05/2012 at 7:30 AM. Environmental Control Board hearing locations: Queens, Manhattan, Brooklyn, Bronx, Staten Island.

Issuing officer's last name, first initial (print): SMITH, S. I personally observed the violation(s) charged and/or verified their existence through review of departmental records. Issuing officer's signature: [Signature].

34925099P ECB-PC (Rev. 9/08)

Affidavit / Affirmation of Service

STATE OF NEW YORK, COUNTY OF Queens ss:

The undersigned affirms, or, being duly sworn, deposes and says: That I am over 18 years of age, and not a party to this proceeding, and that on the 24th day of April 2017 at 10:30 a.m. (circle one) at 144-01 Kewwood Ave QNS (full address)

I served the within Notice of Violation and Hearing on the respondent named therein:

Note: You must complete either section A or B or C. Section D must also be completed if service was effected through A1, A2, or B1.

A. INDIVIDUAL OR PARTNERSHIP

- 1. Individual or Partnership - Personal Service, by delivering and leaving a true copy with _____ respondent personally.
- 2. Individual or Partnership - Substituted Service, by delivering a true copy to _____ a person of suitable age and discretion at respondent's actual place of business, dwelling or usual place of abode within the state.
- 3. Required Mailing (Use with 2). On ___/___/___ I enclosed a copy of same in a first class post paid envelope properly addressed to respondent's last known residence or actual place of business and deposited said envelope in an official depository under the exclusive care and custody of the U.S. Postal Service. The envelope bore the legend "personal & confidential" and did not indicate on the outside thereof, by return address or other wise that the communication was from an attorney or concerned an action against the respondent.

B. CORPORATION

- 1. Corporation/LLC, by delivering and leaving a true copy with _____ an officer, director, managing agent, or general agent (circle one) of said respondent corporation, or any member of the LLC or person designated to receive service of process.
- 2. Secretary of State Service, by delivering to and leaving two copies with _____ in the Office of the Secretary of State of the State of New York, personally at the Office of the Secretary of State of the State of New York. Said service was made pursuant to article three of the Business Corporation Law. Deponent further says that s/he knew the person so served as aforesaid to be employed in the Office of the Secretary of State of the State of New York, duly authorized to accept such service on behalf of said respondent.

C. ALTERNATE METHOD/CHARTER SERVICE

- Alternate method of service pursuant to New York City Charter §1049-a(d)(2) [Affix and Mail Service]. A true copy of the notice of violation was posted in a conspicuous place upon the premises where the violation occurred after a reasonable attempt to effectuate service upon the respondent or upon other person whom service may be made was unsuccessful.

Additional Information (Explain specific details on where violation was posted on the premise or other information):
There was no available party to serve (hid team my) therefore a copy of same was posted on the entrance door.

D. DESCRIPTION OF INDIVIDUAL SERVED

Deponent further states that s/he describes the person actually served as follows:

- Male Black skin Black hair White hair 14-20 yrs. under 5' under 100 lbs.
- Female Brown skin Blond hair Balding 21-35 yrs. 5'0"-5'3" 101-130 lbs.
- White skin Brown hair Mustache 36-50 yrs. 5'4"-5'8" 131-160 lbs.
- Gray hair Beard 51-65 yrs. 5'9"-6'0" 161-200 lbs.
- Red hair Glasses Over 65 yrs. Over 6'0" Over 200 lbs.

Other identifying characteristics _____

<p>Served by: _____</p> <p>Signature <u>[Signature]</u></p> <p>Print full name <u>Seo Field Smith</u></p> <p><input checked="" type="checkbox"/> Issuing officer, City of New York This service statement is affirmed under penalty of perjury.</p> <p><input type="checkbox"/> Process Server (complete next box)</p>	<p>For process server SWORN TO BEFORE ME ON:</p> <p>_____ day of _____</p> <p>Notary signature _____</p>
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