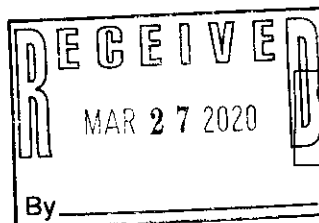




**Consumer  
Affairs**



Certificate No.

09482306

# Certificate of Inspection

Record ID No. <b>5464-2020-CMPL</b>	Cross Reference No.	License No.	License Expiration Date <b>1 / 1</b>	Business Category <b>810</b>
<b>Premises/Incident Address (Location of Inspection)</b> <input type="checkbox"/> Intersection <input type="checkbox"/> Landmark				
Building No./Direction (NE, SW, etc.) <b>141-14</b>	Street 1 <b>NORTHERN BLVD.</b>		Street 2 (Intersection only)	
Apartment/Suite/Other	ZIP Code <b>11354</b>	Borough <b>04</b>		
<b>Contact Information and Address (if different from above address)</b>				
Business Name (Individual, Partnership, Corporation) <b>NY HOPE PHARMACY LLC</b>			Doing-Business-As (DBA) Name	
Building No./Direction (NE, SW, etc.)	Street 1		Street 2 (Intersection only)	
Apartment/Suite/Other	City	State	ZIP Code	Telephone <b>718 353 8202</b>
				Email

## Inspection Details (for Office Use Only)

Inspection Date <b>03/26/2020</b>	Start Time <b>10:15</b> <input checked="" type="checkbox"/> a.m. <input type="checkbox"/> p.m.	End Time <b>10:45</b> <input checked="" type="checkbox"/> a.m. <input type="checkbox"/> p.m.
Type	<input type="checkbox"/> CJO <input type="checkbox"/> EDA <input type="checkbox"/> FTR <input type="checkbox"/> POO <input type="checkbox"/> PRQ <input type="checkbox"/> PTL <input type="checkbox"/> RCS <input type="checkbox"/> REV <input type="checkbox"/> SUS <input type="checkbox"/> SUSA <input type="checkbox"/> UNL <input checked="" type="checkbox"/> Other <b>PRICE GOUGING</b>	
Result	<input type="checkbox"/> CAN <input type="checkbox"/> CLD <input type="checkbox"/> LDC <input type="checkbox"/> LIC <input type="checkbox"/> NEA <input checked="" type="checkbox"/> NVI <input type="checkbox"/> OOB <input type="checkbox"/> POS <input type="checkbox"/> RBO <input type="checkbox"/> UTL <input type="checkbox"/> WAR <input type="checkbox"/> Other	
CPP Participant	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	CPP Sign Observed <input type="checkbox"/> Yes <input type="checkbox"/> No

## Inspector Remarks


**NOTICE: Bribery is a crime.** A person who gives or offers a bribe to any employee of the City of New York, or an employee who takes or solicits a bribe, is guilty of a felony punishable by imprisonment and/or a significant fine. **Obstructing an inspector in the performance of his or her duties is punishable by civil and criminal penalties.**

I/We affirm that on the noted Inspection Date:

- I/we inspected the business listed on the Certificate of Inspection and took appropriate action in accordance with the laws and rules administered and enforced by the Department of Consumer Affairs.
- I/we provided a copy of this Certificate of Inspection to the business by leaving a copy with the owner or an employee of the business.
- I/we understand that falsification of any part of the document may subject the certifying inspector(s) to civil and/or criminal penalties.

## FOR INSPECTOR USE ONLY

Inspector Name (Print) <b>C. SIERRA</b>	Inspector Signature 	Enforcement Unit <b>LC9</b>	Badge <b>71219</b>
Inspector Name (Print)	Inspector Signature	Enforcement Unit	Badge <b>1</b>

## FOR BUSINESS USE: I received a copy of this document.

Name (Print) <b>Jonathan Kim</b>	Signature 	Position/Title <b>owner/Pharmacist</b>	Date <b>03/26/2020</b>
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01/29/2018

DEPARTMENT COPY





March 31, 2020

Lorelei Salas  
Commissioner

42 Broadway  
New York, NY 10004

Dial 311  
(212-NEW-YORK)

[nyc.gov/dca](http://nyc.gov/dca)

Re: Your Complaint against: MY HOPE PHARMACY LLC  
Case Number: 5469-2020-CMPL  
Investigation Result: No Violation

Dear Consumer:

Thank you again for contacting the NYC Department of Consumer Affairs (DCA). Above is the result of our investigation of the business.

If the result is "In Violation," DCA issued violations to the business.

If the result is "No Violation," DCA did not issue violations to the business. We will continue to monitor the business and its practices.

Sincerely,

Consumer Services Division



\*5469-2020-CMPL\*