Consumer BY: Affairs MAR 3 1 2020			09402838			
Certificate of Inspection	• 4020		1 <b>1</b>			
Record ID No. SDSD-2020 - CMA	р. Ц	icense No.	Зу	License Expiration Da	ate Business Category	
Premises/Incident Address (Location of Inspect	tion) 🔲	Intersection	Landmark			
Building No./Direction (NE, SW, etc.) Street 1 17942	SiDe	Aue		Intersection only)		
	ZIP Code	11432	, Borough			
Contact Information and Address (if different from above address)						
Business Name (Individual, Partnership, Corporation)	nacy	INC	Doing-Bu	isiness-As (DBA) Name	3	
Building No./Direction (NE, SW, etc.) Street 1	0		Street 2 (	Intersection only)		
Apartment/Suite/Other City	State	ZIP Code	Telephon	e	Email	

## Inspection Details (for Office Use Only)

$\frac{\text{Inspection Date}}{D3}/30/2$	020	Start Tippe	: 52		End Time :	2
Туре	🗖 CIO		🛛 FTR	<b>P</b> P00		D'PTL Pro C
()pc	RCS	REV	SUS 🖬	🗅 SUSA		MOther 1100 Gouging
Result	CAN	CLD			D NEA ·	
		D POS	RBO		D WAR	Other
CPP Participant		🛛 Yes 🖾 No	□ N/A		CPP Sign Observed	🖬 Yes 🔲 No

## **Inspector Remarks**

DDAS AN Walled	Knocked a Few femiles waited and NO one
come to the Door.	

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 (Fring) - Toouro K	Inspector Signature	Enforcement Unit	Badge 7 //
L DE Jesur, K	+ ( Child ( ) ( )		18 ICIM
Inspector Name (Print)	Inspector Signature	Enforcement Unit	Badge /
	l		

FOR BUSINESS USE: I received a copy of t	his document.		
Name (Print)	Signature	Position/Title	Date
			01/29/2018



March 27, 2020

Lorelei Salas Commissioner

42 Broadway New York, NY 10004

Dial 311 (212-NEW-YORK)

nyc.gov/dca

Re: Case Number: 8080-2020-CMPL - GLOBAL UNITED PHARMACY INC

## **Regarding your complaint against GLOBAL UNITED PHARMACY INC**

Thank you for contacting the NYC Department of Consumer Affairs (DCA). We have carefully reviewed your complaint against GLOBAL UNITED PHARMACY INC and are investigating further. We will notify you of the results. Please allow up to six weeks.

If you do not hear from us after that time, you can call the Consumer Services Division at +1 212 487-4110.



\*8080-2020-CMPL\*