

Independence Plaza North Tenants Association

Instructions for Filling Out the DHCR Overcharge Complaint Form

- a) Included here is a copy of the form, with notes showing how to answer each question.
- b) Garage Tenants: a form is provided here which you can use as an attachment to show the garage rent you have paid. (This will be the attachment for question #20.)

Reminder: The Overcharge form is available on our web site, http://ipnta.org or from DHCR, http://www.dhcr.state.ny.us/ora/forms/pdf/ra89.pdf

Submit overcharge form with whatever documentation you have, but DO file even if you do not have all the documentation.

Please note: The instruction page on the DHCR form states you will hear back from DHCR. **This does not apply to IP**, which at this time is still not considered "stabilized."

Use that page for mailing address, not for general instructions. We have a special case.

State of New York Division of Housing and Community Renewal Office of Rent Administration

Web Site: www.dhcr.state.ny.us

Tenant's Complaint of Rent and/or Other Specific Overcharges in Rent Stabilized Apartments

Type or print in ink all information requested (write in the box)

1. Tenant's Last Name	First Name	Middle Initial
YOUR NAME		
2. Current Mailing Address (Include Street Number and I	Name) Apartment No.	
(IPN) YOUR ADDRI		
3. City (Borough or Town) Include this	at the beginning of you	Zip Code
4. Subject Building Address and Apartment Number	er (If different from the above.)	
same as above		
5. Telephone Number (Home)	(Day time)	
The information requested is necessary to process you information is missing.	our complaint. Your complaint will i	not be accepted if
6. I informed my building owner man See attached by letter (attach copy)		nint on/
7. I am a prime tenant sub-tenar	nt hotel/SRO tenant	
8. I live in a co-operative apartment. Yes	No	(date)
9. Number of rental units in the building: Six of	or more less than six	(Enter date here
10. I moved into the subject apartment on/	(Complete (a) or (b) below	v) (
(a) with a written lease of years, commended at an initial rent of \$ per month.	cing on/ and expirin	g on/
at an initial rent of \$ per month.	It's OK if you dor	it have
(b) without a written lease at an initial rent of \$	per month.	ease as long
11. My current rent is \$per month.	as	it was
12. Electricity is vis not included in my rent currently	Electricity was be-	initial rent ease as long it was fore 2004.
RA-89 (7/04) Internet base rent on your bill	until June 2007.	

13. Mailing Address of Owner/Agent: Name: Stellar Management	14. Mailing Address of Prime Tenant: Name:
Number/Street: 156 William St Apt. No.:	Number/Street:
City, State, NY NY 10038	City, State, Zip Code:
elephone Number: ()	Telephone Number: ()
Others: 6. I believe I am being overcharged because: (W you believe caused the alleged overcharge? Plea	That are the rental events occurring in the last four years which is list below and submit proof to support your claims).
7. Security Deposits: I am being charged \$ rent.	as a security deposit, which is more than one month's
rent.	as a security deposit, which is more than one month's the owner/agent on/
rent. A security deposit of \$ was paid to the secu	the owner/agent on/
rent. A security deposit of \$ was paid to the secu	the owner/agent on/
rent. A security deposit of \$ was paid to the secur	the owner/agent on/
rent. A security deposit of \$ was paid to the secur	use your security deposit to pay part of the rent? ude most recent amount paid and all HCR? If youdon't know when paid mber(s): Leave blank
A security deposit of \$ was paid to to (a) If you vacated the subject apartment did you Yes No \nequelet No. 18. Have you filed any other complaint(s) with DI Yes No, If "yes," list Docket Number 1.	the owner/agent on use your security deposit to pay part of the rent? ude most recent amount paid and all HCR? The youknow: amount to HCR? If youdon't know when paid mber(s): leave blank ised in Court? Yes No

Leas No From	se Period(s) - To	Lease Amount		Additional Security Deposit Charged, Yes or No, If Yes, Write Amount Below		
1 current	ease or extension	\$			J. 100 100 100 100 100 100 100 100 100 10	
2		\$			A STATE OF THE STA	
3		\$			the substrate of the su	
4 last H-L le	cuse or extension	\$			our de la monde de la	
your Just Sul	t Wiltedo Ste perceded yo ents: Last four;	Slar Mgnt. Lead rur Lest Mi rears or from the date	se stated or tchell-Lama	19/1/04. It as lease/extension y (whichever is less)	utomatically	
Month & Year	Current Year	Last Year	2 Years Prior	3 Years Prior	4 Years Prior	
anuary February				amount of your rent o		
6 1			•			
March	Note 1: Beginning	June 1, 2007 base re	ent no longer includ	ded electricity and was	s billed	
March April	Note 1: Beginning separately. [IF YC	June 1, 2007 base re	ent no longer includ		s billed	
March April May	Note 1: Beginning separately. [IF YC \$ per month for	June 1, 2007 base re DU ALSO PAID FOR or air conditioners.	ent no longer includ AC ADD: My rent	ded electricity and was included electricity and	s billed d I paid an	
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no	dividual Apartment thave this information).								
No	Item(s)			Date of Improvement		Before or During* your occupancy?		Amount Charged	
1	Not Kno	wn					\$		
2								\$	
3								\$	
4								\$	
	*If the improvements were made during your occupancy, did you sign a written consent? Yes No 23. Rent Reduction and Restoration Orders (Only those issued within the last four years):								
D	Did you pay a reduced rent? Docket Number(s) Did you pay a reduced rent? Yes or No (month/year) Did you pay a reduced rent? Yes or No (month/year) Visit Reduction And Restor atton Orders (Only those issued within the last four years). What was the amount of rent you paid? What was the amount of rent you paid? What was the amount? Yes or No (month/year) If "yes", when did you begin paying the full amount? Yes or No (month/year)								
1	Vone		,	,	\$	\$			
					\$	\$			
					\$	\$			
					\$	\$			
Ĺ	24. (Optional) Additional Comments or Other Rent Increases (Occurring within the last four years) Not Listed Above: (Attach additional sheets if necessary for this information. Specific dates and documentation must be provided.) See Attached.								
(Check all that apply) 25. Providing the following evidence will make processing quicker and more accurate. Please indicate which of the following documents are attached. Leases Rent Receipts Canceled Checks DHCR Order(s) Additional Sheet(s) Other:									

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Tenant's Complaint of Rent and/or Other Specific Overcharges in Rent Stabilized Apartments.

Attachment to Complaint of:

Гепаnt's Last Nam	ne:	First Name		Middle Initial:		
Address: IPN				Apt.No		
Dated and affirmed	l:					
Addition to Questi	on 20. The followi	ng are Rental paym	nents for garage spa	ace at IPN.		
Γhe payments liste	d	include	do not include	NYC tax reduction		
Month & Year	2008	2007	2006	2005	2004	
January	\$	\$	\$	\$	\$	

Month & Year	2008	2007	2006	2005	2004
January	\$	\$	\$	\$	\$
February	\$	\$	\$	\$	\$
March	\$	\$	\$	\$	\$
April	\$	\$	\$	\$	\$
May	\$	\$	\$	\$	\$
June	\$	\$	\$	\$	\$
July	\$	\$	\$	\$	\$
August	\$	\$	\$	\$	\$
September	\$	\$	\$	\$	\$
October	\$	\$	\$	\$	\$
November	\$	\$	\$	\$	\$
December	\$	\$	\$	\$	\$