



Buildings

Administrative Enforcement Unit

280 Broadway, 5th Floor

New York, NY 10007

Tele (212) 566-2850 Fax (212) 566-5850

Statement in Support of Certificate of Correction

(For Department of Buildings ECB Violations Only)

ECB violation number: - - -

Place of Occurrence: _____
Address to which the violation was issued (Street address, city, state, zip code)

I, _____ duly swear or affirm under penalty of perjury, that I am:
(Print Name)

Respondent Owner (not respondent) Contractor Respondent's Employee Licensed Professional

Other (specify) _____

I PERSONALLY performed the following work to correct the above-cited E.C.B violation on _____:
(date)

Describe the work performed (if additional space is needed, use attached supplement form AEU20S):

Signature: _____ Date _____

Sworn to, or affirmed under penalty of perjury, before me

This _____ day of _____ 20____

Notary Public

[Affix Stamp Here](#)

Notice- Pursuant to New York City Administrative Code Section 26-124 it is a crime to knowingly make a false statement on any form or certificate of correction required by the Code or Department rules.



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**SUPPLEMENT:
Statement in Support of Certificate of Correction**

(Attach only if needed)

ECB violation number: ---

Page _____ of _____

Lined area for writing the statement in support of the certificate of correction.