

**A F F I D A V I T**

**1 VIOLATION INFORMATION**

Summons Number **39159250K**

Place of Occurrence: **316 ECKFORD STREET** **BROOKLYN, NY 11222**

I, **ANDREW FENLON**, duly swear under penalty of perjury that I am the: (check one)  
(Must be the name of an individual, do not list a business entity)

- ☐ Respondent named on the violation (if the named respondent is an individual)
- ☒ Officer, Director, Partner or Managing Member of the named respondent (if the named respondent is a business entity)
- ☐ Owner of Property but not the named respondent (if you are a new owner, attach copy of deed)
- ☐ Current Mortgagee of place of occurrence (attach proof of mortgage agreement and a notarized authorization letter)
- ☐ Other Agent of the respondent or place of occurrence (attach a notarized authorization letter from the respondent or property owner)

My mailing address: **316 ECKFORD STREET BROOKLYN, NY 11222**  
(Insert the certifier's mailing address, indicate the House Number, Street, City, State and Zip Code)

**2 PERSON WHO PERFORMED WORK**

I have complied with the order of the Commissioner to correct each violating condition cited on this summons. The work described in the attached sworn statement was completed on **9/26/25** and was performed by: (check one)

- ☐ Myself ☐ My Employee ☐ Contractor ☒ Licensed Professional

Name of the person who performed the work: **PEDRO SUCHZHANAY**

Company: **N/A**

Address: **4843 58 PLACE WOODSIDE, NY 11377**

License or Registration Number (for licensed professionals and contractors): **2107890-DCA**

**ADDITIONAL REQUIREMENTS**

A notarized **Statement in Support (AEU20)** and documentary proof of correction must also be provided. This statement must describe the steps taken to correct the violating condition(s) and reference all relevant permit numbers, job applications or other records that substantiate correction. The standard AEU20 form may be used or submit a notarized statement on a separate piece of paper. If work was performed on an elevator or boiler, the statement must be on the letterhead of the licensed professional who did the work. All photographs must be labeled with the date the photograph was taken, the location and the summons number. Photographs of **Before** and **After** must be labeled as such.

**3 PENALTY WAIVERS & REDUCTIONS**

If the violation is admitted and certified as corrected, it may be eligible for a penalty waiver or reduction. Penalty waivers and reductions are outlined in the **DOB Penalty Schedule** found in **Title 1 of the Rules of the City of New York, Section 102-01**. To request a cure or stipulation, check the applicable box below. For more information visit [www.nyc.gov/DOBpenaltyschedule](http://www.nyc.gov/DOBpenaltyschedule).

**Cure (waiver):** If the summons states a *Cure Date*, submit an acceptable Certificate of Correction to DOB by the Cure Date. If the Certificate of Correction is approved, a hearing will not be held, and no penalty will be imposed by OATH. If the Certificate of Correction is not approved, attend the hearing to dispute the violation or admit to the violation by paying the penalty before the scheduled hearing date.

☒ **CURE.** I admit the existence of the violation(s) charged. The cure date is: **11/3/25**. (refer to the face of summons for date)

**Stipulation (reduction):** If a pre-hearing stipulation is received and accepted, a reduced penalty of one-half the standard penalty may be imposed if an acceptable Certificate of Correction is submitted to DOB by the compliance due date. If the Certificate of Correction is not approved, the penalty will be increased to the standard or aggravated penalty, whichever is applicable.

☐ **STIPULATION.** I admit the existence of the violation(s) charged. The stipulation compliance due date is: \_\_\_\_\_. (refer to the stipulation offer for the date)

**4 STATEMENT OF SIGNATURE**

I have personal knowledge the violating condition(s) have been corrected as per this affidavit and statement(s) attached.

Name (print) <b>ANDREW FENLON</b>	Notarization State of New York, County of: <b>KINGS</b>	Notary Seal <b>WIESLAW KOMOSINSKI</b> Notary Public - State of New York No: 01KO6137712 Qualified in Queens County My Commission Expires Dec. 5, 2025 Certificate on File: <b>KINGS COUNTY</b>
Signature <i>[Signature]</i>	Sworn to or affirmed under penalty of perjury <b>30 day of SEPTEMBER 25</b>	
Date <b>9/30/2025</b>	Notary Signature <i>[Signature]</i>	

False certification is a criminal misdemeanor under sections 28-203.1.1 and 28-211.1 of the NYC Administrative Code, punishable by up to one (1) year imprisonment and/or fine of up to \$25,000. It is also punishable with a civil penalty of up to \$25,000.

To submit this form, use an eFiling account to login to DOB NOW at [www.nyc.gov/dobnow](http://www.nyc.gov/dobnow) and select the **BIS Options** portal. If you need to create an eFiling account visit [www.nyc.gov/DOBNOWtips](http://www.nyc.gov/DOBNOWtips). Reminder, when submitting this form include all supporting documents.