



sanitation

ENFORCEMENT

1824 Shore Parkway
Brooklyn, NY 11214

ONE, TWO or THREE FAMILY PROPERTY OWNER COMPLAINT FORM FOR UNAUTHORIZED DISTRIBUTION OF UNSOLICITED ADVERTISEMENT

COMPLAINANT'S NAME: (Print Full Name)

FOR OFFICE USE ONLY
COMPLAINT FORM #

- I am the legal owner of a one, two or three-family dwelling located at
Address: _____ Borough: _____ Zip Code: _____
- I currently reside at: _____ Borough: _____ Zip Code: _____
- Telephone No.
Work: _____ Home: _____ Cell: _____
- My E-mail address is: _____ (If you do not have an e-mail address, please indicate "NONE").

5. Upon my property: _____ ,
(describe location, i.e. front door, window, posted on lawn)

I have conspicuously posted or caused to be posted a sign which is not less than 5 inches by 7 inches in size and which states in legible letters at least one inch in size: "Do Not Place Unsolicited Advertising Materials On This Property."

6. On _____ , 20 ____ , at _____ am/pm., I personally observed on my property unsolicited advertising materials _____ , in the form of: _____
(describe specific location of where material was found.) (menu, pamphlet, bag of flyers, etc.)
and which contains the name of : _____

on such written solicitation.

NOTE: Please identify one or more business names that appear on the material. More detailed information facilitates effective enforcement.

- I have attached the original unsolicited advertisement material to this complaint form in its entirety and in its original form, including any materials that were packaged together.
- I am furnishing this complaint form to the New York City Department of Sanitation to enable the Department to undertake appropriate enforcement action pursuant to the New York State General Business Law Section 397-a. I hereby acknowledge and understand that if any legal proceeding is commenced against the person or business. I have identified above through the submission of the unsolicited advertising material, it may be necessary for me to appear as witness in such a proceeding.

CERTIFICATION

I hereby certify that the statements contained in this complaint form are true and accurate. I understand that any false statements made in this complaint form are punishable as a class A misdemeanor pursuant to Section 210.45 of the New York State Penal Law.*

COMPLAINANT'S NAME (PRINT)	COMPLAINANT'S SIGNATURE	DATE:
----------------------------	-------------------------	-------

* Section 210.45 of the Penal Law states: Making a punishable false written statement. A person is guilty of making a punishable false written statement when he knowingly makes a false statement, which he does not believe to be true, in a written instrument bearing a legally authorized form notice to the effect that false statements made therein are punishable. Making a punishable false written statement is a class A misdemeanor.