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Release #08-2015
nyc.gov/html/doi

FOR IMMEDIATE RELEASE
THURSDAY, MARCH 12, 2015

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DOI INVESTIGATION OF 25 CITY-RUN HOMELESS SHELTERS FOR FAMILIES FINDS SERIOUS DEFICIENCIES

Today, Mark G. Peters, Commissioner of the New York City Department of Investigation ("DOI"), announced results from a year-long investigation of 25 shelters operated and managed by the City Department of Homeless Services ("DHS"). In the Report, DOI documents how these shelters, which provide housing for approximately 2,000 of the City's nearly 12,000 homeless families, exposed residents to serious health and safety violations such as extensive vermin infestations, blocked or obstructed means of egress, non-working smoke and carbon monoxide detectors, and improper and/or missing Certificates of Occupancy. In addition, DOI's investigation found there was a lack of social service programs offered for homeless families at some of these locations. DOI's investigation resulted in an array of recommendations to improve the operational oversight and management of the City's family homeless shelters. During DOI's investigation, DHS began implementing reforms to address the concerns raised in the report and has adopted the substance of the recommendations issued by DOI. The Report is attached to this release and is posted at the following link: <http://www.nyc.gov/html/doi/html/doireports/public.shtml>

DOI Commissioner Mark G. Peters said, "Dangerous living conditions, rat-and-roach infested residences, and fire violations are the stark reality facing too many homeless families and children in the City's shelters. DOI's Report documents the perilous conditions found at many of the 25 shelters we investigated, and recommends a plan for DHS to attack the problems we uncovered. Most of the problems are the result of years of neglect, but they continue and need to be addressed now. To its credit, DHS recognizes the need for change and is reforming the way it does business to address the concerns raised in the Report and better serve the City's homeless families. Much work still needs to be done, and DOI will be here to monitor the progress."

DOI initiated its investigation at the request of Mayor Bill de Blasio. In its investigation, DOI reviewed thousands of pages of documents; interviewed shelter residents; spoke with DHS officials; and inspected 25 DHS family shelters with the cooperation of DHS and the assistance of inspectors from the City Department of Buildings ("DOB"), the Fire Department of New York ("FDNY"), and the City Department of Housing Preservation and Development ("HPD"). As a result of DOI's inspection of the 25 shelters, 621 building, housing, and fire safety violations were issued. DOI's investigation also found that for years DHS has not used the City's contracting process to secure providers, and failed to enforce current contracts, thereby severely diminishing the City's ability to hold providers accountable, particularly when they fail to fix safety violations or meet standards.

DOI's probe looked specifically at:

more

- **Five cluster buildings (which provide shelter in privately-owned residential buildings that house both private, rent-paying tenants and DHS clients)**
 - DOI found the cluster sites to be the worst maintained, the most poorly monitored, and provide the least adequate social services to families.
 - As a result of DOI's investigation of the five sites, 223 building and fire violations were issued for serious risks such as obstructed passageways, locked exits, defective window guards and the existence of roaches, rats, and mice. Despite these violations, landlords continued to earn full rent for the apartments resulting in DHS paying two to three times market rate for housing families in these substandard facilities.
 - Based on information provided by DHS, the average monthly rate for an apartment in a cluster program is approximately \$2,451; while the market rate for non-DHS buildings in the same neighborhoods range from \$528 a month to \$1,200 a month.
 - The City has a total of 16 cluster programs that encompass approximately 400 buildings, which shelter more than 3,000 families. DOI found seven of the 16 cluster programs operate without a City contract. The lack of a contract makes it extremely difficult to successfully enforce the various health and safety codes.

- **Nine hotels (which provide shelter to mostly single pregnant women or single parents with no more than two children)**
 - DOI's inspections resulted in 168 building and fire violations being issued at these facilities that included work without a permit, non-working fire alarm systems and failure to maintain carbon monoxide and smoke detectors in working order.
 - A recurring complaint was the infestation of rats and mice, despite monthly and sometimes weekly extermination.
 - Many of these conditions existed despite recent inspections and passing scores by DHS inspectors.
 - The City is paying a monthly average rate per family of approximately \$2,840. Yet, two of the hotels that DOI investigated had extensive outstanding fines for City-issued violations – more than \$200,000. Unless these hotels are brought under contract, DHS will be unable to adequately protect shelter residents in hotels.
 - In the City there are 48 hotels that provide shelter to approximately 2,045 families. None of the 48 hotels used by the City operate under contract.

- **Eleven Tier II shelters (which provide housing and services to 10 or more families)**
 - While DOI found these facilities to be the best maintained and provide the most social services of the three shelter types, seven of the eleven Tier II sites inspected had either an improper Certificate of Occupancy or none at all. In total, DOI found 230 building and fire violations at the 11 shelters.
 - One of the most hazardous conditions observed during DOI's investigation was at a Tier II shelter located in a City-owned building, in which a stairway was so rusted away it was declared by DOB to be an unsafe means of egress. Residents commonly avoided this stairway, leaving only one functional egress for approximately 140 families. The damage was deemed so extensive that both DOB and FDNY – summoned to the site by DOI -- considered ordering the building immediately vacated. Ultimately, FDNY and DOB ordered round-the-clock fire guards – people hired to physically block the stairway – to regulate traffic in that stairway in case of fire. DHS was required to immediately submit plans to DOB and begin repairing the stairway. As a result of the investigation, the stairwell was finally repaired in September 2014. The cost to DHS for the fire guards, from June 5, 2014 to September 28, 2014, came to more than \$630,000. Prior to the DOI investigation, DHS had ignored this known danger, despite observing it during DHS' own inspections.
 - In the City there are 97 Tier II facilities that provide housing for more than 7,400 families. Most Tier IIs are run by not-for-profits in non-City-owned buildings.
 - DOI found three of the total 97 Tier II facilities operate without City contracts.

DOI's recommendations, which align with reform efforts currently underway at DHS, include:

- DHS should create a three-year phased-in plan detailing how it will bring all three types of shelter facilities into contractual relationships with the City. Each contract must have enforcement mechanisms. DHS should also create a three-year plan detailing how it will increase shelter capacity that may arise from having to close noncompliant, substandard shelters.
- DHS should establish an interagency working group with the FDNY, HPD, DOB and DOI, to better ensure that safety and health violations in shelters are identified and corrected. DHS should share its data with the agencies involved and attend inspections.
- DHS should appoint an Internal Compliance Monitor to audit shelters, ensure violations and repairs are abated and fixed in a timely manner, and enforce contracts. Failure to correct should result in financial penalties for shelters.
- DHS should create a 24-month plan detailing ways in which it will provide round-the-clock security at cluster sites, and provide improved onsite casework services in cluster sites.
- Within the next three months, DHS should use its own maintenance staff to ensure that all shelter "life safety" violations it has previously identified are abated or have repairs in process. Going forward, DHS should task its own maintenance staff with primary responsibility for correcting all life safety violations in shelters.

DOI Commissioner Peters thanked DHS Commissioner Gilbert Taylor, DOB Commissioner Rick D. Chandler, FDNY Commissioner Daniel A. Nigro and HPD Commissioner Vicki Been and their staffs for their cooperation with and assistance in this investigation, with a special thanks to DOB Inspectors Ross Hoffman and Michael Geraci and FDNY Inspector Andrew Dushynskiy.

The investigation was conducted by DOI's Office of the Inspector General for DHS, including Special Investigators Daniela Fernandez, Alexander Dillon, Nils Graham and Katerina Kurteva, Assistant Counsel Kristin DiFrancesco, Deputy Counsel Christos Hilas, Assistant Inspector General Bradley Howard, and Deputy Inspectors General John Bellanie, Kim Ryan, and Edward Richards, with assistance from intern Angela Rodriguez and Legal Fellow Geoff Crary, under the supervision of Inspectors General Shelley Solomon, John Tseng, and Milton Yu, and Associate Commissioner Susan Lambiase, and with important contributions from Chief of Investigations John Kantor and First Deputy Commissioner Lesley Brovner.

DOI is one of the oldest law-enforcement agencies in the country. The agency investigates and refers for prosecution City employees and contractors engaged in corrupt or fraudulent activities or unethical conduct. Investigations may involve any agency, officer, elected official or employee of the City, as well as those who do business with or receive benefits from the City.

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**New York City Department of Investigation:
Probe of Department of Homeless Services'
Shelters for Families with Children
Finds Serious Deficiencies**

**MARK G. PETERS
COMMISSIONER**

MARCH 2015

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EXECUTIVE SUMMARY

At the request of Mayor Bill de Blasio, the Department of Investigation (“DOI”) has conducted an investigation into New York City (“NYC”) Department of Homeless Services (“DHS”) shelters for families with children, which house 11,900 homeless families. DHS currently operates 145 shelters (97 Tier IIs and Tier II-lookalikes and 48 hotels) and 16 cluster programs run by seven providers (for a total of 3,140 units of cluster housing). From its review of over a thousand pages of documents, inspections of 25 shelters, and interviews, DOI has found that the family shelters it inspected and reviewed are too often unsafe and unhealthy for children and families, and that the family shelter system is in need of aggressive immediate as well as long term reform efforts. These problems are not new; indeed they are the inheritance of decades of neglect. In fact, all of the facilities inspected were brought into the DHS portfolio in previous administrations. However, to be clear, these problems have continued and there can be no further delay in addressing them.

DOI, working with inspectors from the Department of Buildings (“DOB”), the Fire Department of New York (“FDNY”), and the Department of Housing Preservation and Development (“HPD”) inspected all three types of NYC family shelters: (1) Tier II shelters, which are often institutional shelter settings providing private rooms, three meals a day and/or cooking apparatus, and an array of social services; (2) hotel shelters, which are generally buildings that were previously hotels converted to shelter use; and (3) “cluster sites,” or apartment buildings that house homeless families as well as renting families.

The investigation revealed deficiencies in all family shelter types reviewed. During the DOI - initiated inspections, the 25 shelters inspected received a total of 621 City-issued violations among them. However, based on DOI’s review, the cluster sites, which house approximately 3,000 families, are in need of the most immediate action. For clusters in particular, security in some locations is so lax that tenants feel unsafe in their buildings, and there is little onsite casework for families. During the inspections at the cluster buildings, DOI investigators observed unsafe and unhealthy conditions including a dead rat in a cluster apartment where four children lived, the decaying smell of which permeated the hallways; roaches

scattering as inspectors knocked on doors; garbage in the stairways and hallways; and in one location, a puddle of urine in the building's only functional elevator.

Cluster site buildings also routinely ignore basic health and safety measures, committing a variety of fire and building code violations ranging in severity. Among the five cluster apartment buildings DOI investigators assessed, inspectors issued a total of 223 violations (47 DOB, 55 FDNY, and 121 HPD), including for such serious concerns such as: obstructed passageways, usually from bags of garbage in common areas; locked exits; missing or non-functional smoke and carbon monoxide detectors; and extensive vermin infestation throughout the buildings.

Inspections at the hotel shelters also revealed persistent rodent infestations, poor maintenance, fire safety issues and broken fixtures. Residents reported being unable to get basic maintenance service. At these inspections, 168 violations were issued to the nine hotels inspected (63 DOB, 65 FDNY, and 40 HPD), and included such essential health and safety issues as obstruction of egress, failure to provide fire extinguishers, failure to maintain carbon monoxide and smoke detectors, chipped paint and mold.

The Tier II facilities, on inspection, appeared the best maintained of the shelter types, and provided the most services to the homeless residents. However, the Tier II shelters presented their own unique, and serious, problems. At these inspections, DOB, FDNY, and HPD issued 230 violations (92 DOB, 86 FDNY, and 52 HPD). Of the 11 Tier II facilities DOI inspected, seven had either an improper Certificate of Occupancy ("CO")¹ or none at all. If a building's CO is not consistent with the building's use, then crucial safeguards, such as additional fire protections, could be lacking. At the time of DOI's inspection, the COs for the Life Family Shelter, also known as the Catherine Street Shelter ("Catherine"), and the Auburn Family Residence ("Auburn") reflected their prior uses as a school and hospital, respectively, not as residential shelters.² Flatlands Family Residence ("Flatlands"), which is a city-owned building and operated by DHS, had no CO at all, and its last temporary CO expired 16 years ago.³ Another residence, Help 1, had a CO for an eight-family dwelling, but the facility houses up to 191 families. Briarwood Family Residence's temporary CO expired in 1994. Regent Family Residence illegally converted apartment units into offices and the second floor to a day care, violating its CO.

While DHS regularly monitors and inspects its shelter facilities through its review mechanisms called Monitoring Tool Evaluations (“MTE”s) and Routine Site Inspections (“RSRI”s), it fails to ensure corrective actions are implemented and, when they are not, the agency has historically taken little action against the landlords and the providers who are neglecting their legal responsibilities. Of the 25 buildings DOI inspected, DHS had conducted its own monitoring oversight, through the RSRI, on 19 of them within the prior year.⁴ All non-cluster facilities inspected – ten Tier II facilities and nine hotels – passed their DHS inspections, even though DHS found ten of those buildings to have 47 of what DHS calls “life safety hazards.” DHS gave the remaining nine a total of 104 unsatisfactory scores among them. DHS required corrective action plans (“CAP”s) in all 19 instances, but it received them back from the shelters in only approximately 57% of cases. Each time there was a CAP, it did not always report resolution, but often stated future dates by which issues would be resolved. Examples of serious issues that were unresolved at the time the CAPs were submitted include non-functioning carbon monoxide detectors, expired fire extinguisher tags and a malfunctioning fire panel.

Not only are there no financial consequences to the providers and landlords for not correcting issues, but DHS does not follow up to ensure violations are corrected. DHS should, but does not, enforce building maintenance or ensure violations are resolved. It should, but does not, force repairs or regularly do its own repairs, nor does it seek assistance from other agencies in getting repairs made. As a result, many shelters operate with existing violations that make life unsafe for its children and family residents.

Moreover, many shelter sites (all 48 hotels, seven of the 16 cluster programs, and three of the 97 Tier II sites, housing a total of 3,277 families), do not operate under any bidding, procurement or contract requirements and instead operate on an emergency, *per diem* basis. With no contracts, providers and landlords are not subject to competition, and are not held to enforceable contract terms that could, in theory, require them to maintain their buildings or make needed repairs, or else be subject to penalties such as rent reductions or fines. Despite the many problems and low quality of non-contracted shelters, these shelters are actually more expensive than those with contracts. For Fiscal Year 2013, DHS’ expenditures for non-contracted family shelters, which only house approximately one quarter of families in the shelter system,

totaled \$108,513,389.06 (\$78,176,198 for hotels, \$28,213,955 for non-contracted clusters, and \$2,123,194 for non-contracted Tier IIs). In comparison, DHS is paying \$259,931,620 in expenditures for contracted facilities, which house approximately three-fourths of the City's homeless families. But even for the shelters that have contracts, DHS does not use the contracts to enforce terms or impose penalties for non-compliance. Moreover, in some cases, these rents can be three-times the average rent in the relevant neighborhood. While the cost arguably includes social services, DOI found that in many cases those services were minimal at best.

NYC's obligations to its homeless families are among the most stringent in the country,⁵ but the problems are not insoluble. While there is no "quick fix," careful planning and meticulous execution can bring about substantial improvements to the conditions of New York City's shelters. DOI's recommendations, set forth below, if implemented will help alleviate the terrible shelter conditions exposed during this investigation. As a result of this investigation, DOI has been in close contact with DHS throughout 2014 and to date, and DHS informs us that it will implement the substance of the recommendations in this report. According to DHS, it has initiated a series of reforms that are consistent with DOI's recommendations, some of which directly flow from this investigation, as follows:

- Striving to improve shelter conditions by strengthening inspections and redeveloping inspection tools and the DHS inspection unit, and working towards holding providers accountable for programmatic and regulatory violations;
- Working towards reducing the agency's reliance on cluster capacity (including reducing the rates for the same) and improving social services in existing units;
- Bringing on new shelters only pursuant to procurement and contract, as it did with all 23 shelters brought on in 2014; and
- Actively planning to bring non-contracted facilities to contracts and closing down non-contracted shelters failing to meet Agency performance standards.

DOI supports DHS' current reform efforts, set forth further in Appendix A, in particular when taken with the recommendations in this report. DOI specifically recommends the following:

Immediately:

- Using DHS maintenance staff, DHS should ensure that all shelter “life safety” violations it has previously identified are abated or have repairs in process within the next three months;
- DHS should appoint an Internal Compliance Monitor to audit shelters and ensure violations and repairs are timely abated and fixed; failure to correct should result in financial consequences;
- DHS should ensure that all buildings within a cluster program are included in apartment inspections at least twice every year.
- DHS should reevaluate the scoring of its RSRI, so that the scores are tied to actual findings, and so not all shelter facilities pass the review, even when there are numerous building code violations.
- DHS should have written policies requiring all shelters to conform to statutory requirements.⁶
- DHS should establish a partnership with the FDNY, HPD, and DOB, creating an interagency working group, monitored by DOI, to better ensure that safety and health violations in shelters are identified and corrected. The working group should, among other things:
 - devise a plan for an automated system by which its members would regularly share information regarding City-issued violations;
 - coordinate such that DHS shelter inspections get conducted jointly with FDNY, HPD, and DOB inspectors;
- DHS should task its own maintenance staff with the primary responsibility for correcting all life safety violations in shelters;
- DHS should conduct annual audits of City-owned shelter facilities.

Within Three Months:

- DHS should create a 24-month plan detailing ways in which it will:
 - Provide 24/7 security at cluster sites;
 - Provide improved onsite casework services at cluster sites;

Within Six Months:

- DHS should create a three-year phased-in plan detailing how it will bring all three types of shelter facilities into contractual relationships with the City.
 - The plan should set a series of aggressive yet reasonable timetables (i.e., Tier II sites currently without contract will have executed contracts by June 2015; the hotels used as shelters by DHS will be contracted under a timeframe where there is a set increase in the number or percentage of hotels contracted over the course of three to five years; the cluster sites should get a separate schedule). The plan should also identify persons responsible and outline a plan for the DHS Commissioner and DOI to review progress regularly.
 - Each contract must have enforcement mechanisms that have clear consequences.
 - 1) For example:
 - The landlord shall have 30 days to fix an identified issue, except in emergency, in which case s/he has 24 hours to respond; if the landlord does not make the repair or take all reasonable steps to make the repair within the required time frame, DHS shall make the repair and bill the landlord, or deduct the cost from the rent. Or,
 - DHS shall make all repairs, and rents shall reflect the cost of repairs.
 - In either instance, the landlord/provider shall be required to continue to provide shelter and services to the residents.
 - DHS must commit to enforcing the contracts. The contracts should state that non-compliance results in specific financial consequences, and DHS should as a matter of regular policy impose

- the consequences. DHS should terminate shelter contracts for shelters that are consistently substandard.
- The Internal Compliance Monitor should be charged with ensuring contract enforcement.
 - As DHS changes its array of available family shelter housing, DHS should begin the process of canceling housing arrangements with substandard DHS family shelter providers and transitioning families from those shelters.
 - DHS should create a three-year plan detailing how it will provide shelter capacity to residents whose housing will be disrupted from DHS' having to close noncompliant, substandard shelters:
 - The plan should establish clear time frames, calculate estimated capacity needs, and identify persons responsible.
 - The plan should include a provision for systematic review of progress by the DHS Commissioner and DOI.

I. Introduction

New York City's Department of Homeless Services ("DHS") is legally responsible for providing temporary emergency shelter for the City's homeless population of over 56,000 people, including 11,900 families with children (comprised of 17,178 adults and 24,438 children).⁷ As part of its mandate, DHS must ensure that the facilities where it places these most vulnerable City residents adhere to basic health and safety standards. DHS has put in place numerous checks and balances that are designed to ensure that its homeless facilities meet these standards. Yet, for the 25 sites reviewed, those checks and balances are failing.

In 2014, New York City's Department of Investigation ("DOI") conducted an investigation into DHS' Families with Children ("FWC")⁸ shelters to determine whether these sites are adhering to the required standards. The investigation consisted of an extensive document review of DHS' policies, regulations, inspections and evaluations of FWC shelters, and, with the assistance of inspectors from the Department of Buildings ("DOB"), the Fire Department of New York ("FDNY"), and the Department of Housing Preservation and Development ("HPD"), inspections of 25 shelter sites throughout the City, as well as interviews with various individuals with knowledge of and affected by the NYC shelter system. DOI also had extensive discussions with the current DHS administration.

As a result of this investigation, DOI has found that while the mechanisms DHS currently has in place should and often do identify health and safety concerns, DHS does insufficient follow-up to ensure that hazardous and unhealthy conditions are corrected, and little enforcement when violations, even egregious ones, persist. DHS must take immediate steps to ensure that the health and safety of those families living in the shelter system are protected and that dangerous and unhealthy violations are corrected.

While no response can immediately address all of the deficiencies discussed in this report – deficiencies allowed to build up over a decade or more of neglect – DHS has begun to devise plans by which it will correct the systemic deficiencies that are allowing these serious problems to go uncorrected. It is DOI's strong recommendation that in the next six months, DHS prepares a three-year corrective action plan for itself, as well as immediately convene a multi-agency working group that addresses those inter-

agency issues identified in this report. Since DOI's investigation began, DHS Commissioner Gilbert Taylor has already begun taking necessary steps to address many of the issues uncovered, and is undertaking many other initiatives to be rolled out in the coming months to further reform the DHS system.⁹ DOI greatly supports these efforts, taken in tandem with the recommendations in this report. Obviously, DOI will continue to monitor DHS and review implementation.

The issues raised in this report represent significant challenges, yet the recommendations set forth, if implemented, will put New York City on the path of better serving its most vulnerable children and families.¹⁰

II. Background

A. Homeless Services in New York City

DHS' legal mandate to provide temporary emergency shelter to all NYC homeless adults and children – over 56,000 people – and ensure that the facilities that provide this housing adhere to basic health and safety standards was initially recognized in the 1981 state court *Callahan v. Carey* consent decree.¹¹ The *Callahan* consent decree, which granted NYC homeless men the right to shelter,¹² required the City to provide housing for every eligible homeless man, and set forth basic intake and housing procedures, as well as a list of rights and privileges for each resident.¹³ Later cases extended the right to shelter to New York City's homeless women¹⁴ and then to homeless families with children.¹⁵

There are three shelter models within DHS' FWC system: Tier II and Tier II look-alikes¹⁶ ("Tier II's"), hotels, and clusters. All facilities are required to provide social services.¹⁷

The most structured model is a Tier II facility, which "provides shelter and services to ten or more homeless families including, at a minimum, private rooms, access to three nutritional meals a day, supervision, assessment services, permanent housing preparation services, recreational services, information and referral services, health services, and child-care services."¹⁸ Currently, there are approximately 97 Tier II facilities within the DHS FWC system that house over 7,400 families, and all but three have written contracts with the City.¹⁹ Most Tier IIs are run by not-for-profits ("NFPs") in non-City-owned buildings.

DHS provides less structured shelter housing in “hotels,”²⁰ in which approximately 2,045 families reside. These units are used for small families, often single pregnant women or single parents with no more than two children. None of the 48 hotels used by DHS are under contract with DHS,²¹ and their use is governed by statutory requirements.²² Although the hotels do provide onsite social services by providers for families, these services are less than those provided in Tier II facilities.

Finally, DHS provides shelter at cluster sites, which are privately-owned residential buildings that house both privately-renting tenants and DHS clients.²³ There are currently 16 cluster programs that house over 3,000 families across almost 400 buildings throughout the City.²⁴ Of the 16, nine are programs that have written contracts with the City. Seven have no contracts.

All DHS FWC shelters must adhere to safety and health standards whether by statute, contract or DHS requirements measured through inspections. Tier IIs are governed by the standards set forth in Part 900 of Chapter 18 of the New York Codes, Rules and Regulations (the “Code”),²⁵ which governs health and safety requirements and programmatic guidelines for Tier II shelter residents,²⁶ and all but three by contract requirements, and all are monitored by DHS’ own set of internal standards through monitoring tools called the Monitoring Tool Evaluations (“MTE”s) and Routine Site Review Inspections (“RSRI”s). Hotels are subject to statutory requirements under 18 NYCRR § 352.3, and all are monitored by DHS’ inspection tools (the MTEs and RSRI’s). Clusters are subject to DHS inspections through MTEs. Going forward, DHS has required that they also undergo the RSRI inspection process.²⁷ DHS also strives to employ Part 900’s standards to hotels and clusters.

B. DHS’ Contracts with Shelter Care Providers

As stated above, the DHS FWC shelter system has both contracted and non-contracted Tier II and cluster shelter sites.²⁸ In the case of contracted shelters, the contract between the provider and DHS provides for maintenance, security and social services. However, the landlord of the building – usually separate from the provider – employs the building management and the superintendent to perform maintenance. The shelter provider notifies the landlord of maintenance issues such as non-functioning smoke detectors, broken appliances, lack of heat and/or hot water, and the landlord is then responsible for correcting the

issues.²⁹ With City-contracted shelters, there are different contracts for the Tier IIs than for clusters. Both types set forth certain standards providers must maintain to keep the facilities in a sanitary and safe condition. With non-contracted shelters, each building is still required to adhere to applicable fire and building codes.

1. Tier II Contracts

Tier II contracts state that “staff shall implement safety and security procedures in accordance with other applicable provisions of this Agreement, [DHS] Policies, and Part 900 Regulations, including § 900.11 and § 900.12 of those Regulations.”³⁰ Additionally the contracts articulate that “[s]taff shall conduct health and safety inspections of all Family units bi-weekly, except [s]taff shall conduct weekly inspections of the units of Families with newborns and/or open ACS cases. Staff shall maintain documentation indicating their compliance with this subsection B of Section 13.01 of Appendix B of the Tier II Contract, including findings and corrective action taken, subject to inspection by [DHS].”³¹ Specifically regarding maintenance and repair obligations, the Contractor is responsible for “the preventative, daily, corrective, interior, exterior, structural and emergency maintenance and repair of the Facility [and] for curing all violations and deficiencies issued against the building in which the Facility is located.”³² Additionally, “[it] shall immediately notify [DHS] of any such violations and provide [DHS] with a corrective action plan for curing non-capital violations, including time frames for curing these violations, and written notice once these violations have been cured.”³³

2. Cluster Site Contracts

Contracts for the cluster sites require that the residential units be safe and well-maintained.³⁴ Cluster site Contractors are also required to “maintain the Facility in a safe and sanitary condition[,] . . . maintain the Facility in a good state of repair and sanitation and in conformance with applicable State and City Laws, regulations and directions[,] and [clean] . . . public areas periodically.”³⁵

For fire safety, the cluster contracts also require the Contractor to conduct and supervise shelter evacuation procedures and hold periodic evacuation drills.³⁶ Additionally, the Contractor must “institut[e] fire safety measures and arrang[e] for fire safety training for Program staff and residents; fire drills must be

held with staff and residents on a monthly basis, and a record of such drills must be maintained.”³⁷ The Contractor is required to immediately notify DHS if it becomes aware of any violations issued against the Facility.³⁸

3. *Shelter Contracts Contain No Practically Enforceable Penalties*

While the contracts currently in use by DHS require shelter providers to undergo competitive bidding and sign contracts where they agree to abide by certain standards, they do not set forth consequences, other than termination, for nonperformance or negligent performance. While both Tier II and cluster program contracts allow for termination without cause and/or for contractor default,³⁹ termination would require DHS to provide alternative housing for the clients, which may or may not be contracted. DHS does not include in its contracts provisions to withhold funds for nonperformance (while still requiring delivery of services).⁴⁰ Without such terms, the City is depriving itself of a vital enforcement tool when a Contractor fails to satisfy its contract.

4. *Shelters with No Contracts*

While the New York City Administrative Code, the City Charter, the Procurement Policy Board (“PPB”), and Comptroller’s Directive #24⁴¹ all require that DHS contracts with shelter and social services providers and pay those providers through the City’s Financial Management System (FMS), many NYC shelter facilities are not under written contract.

Within the family shelter system, none of the 48 hotels used as shelters, housing approximately 2,000 families, have written contracts with DHS. Seven out of the 16 cluster sites – housing approximately 1,200 families – also operate without contracts. Three of the approximately 97 Tier II sites, housing approximately 77 families, also hold no contracts.⁴²

DHS’ failure to contract with shelter providers in the past has resulted in significant negative consequences. When DHS does not bring on a shelter facility through the procurement process, it does not subject the provider to competition, and does not give DHS service and price comparisons as to any other bidders. Additionally, with no contract, DHS has lost a crucial point of leverage – it cannot enforce the

provision of services through a breach of contract violation subject to basic contract law, giving DHS one less enforcement mechanism by which to hold providers accountable for poor conditions or services.⁴³

C. DHS Inspection Tools That Set Forth DHS-Imposed Health and Safety Requirements

DHS regularly performs two different types of inspections in their shelters: MTEs and RSRI, which set forth DHS' own health and safety standards to which all DHS shelters – contracted or not – must adhere.⁴⁴ However, there are no consequences for health or safety violations identified in the inspections, even when significant.

1. Monitoring Tool Evaluations

MTEs evaluate the performance of each contracted and non-contracted shelter facility and are performed semi-annually for all shelters. The MTEs do not require a full inspection of every unit. Rather, they encompass a monthly apartment fitness report, which is based upon inspection of only *ten percent or at least ten of the units*, whichever is greater, randomly chosen in each facility. The MTE evaluates housekeeping and safety factors in each unit, the social services program, housing placement targets, and unit occupancy. The facilities are given advanced notice of their MTE evaluation.

The MTEs are not scored. The provider is given written summary report detailing the findings of the inspections in eight categories.⁴⁵ Thirty days after receiving the MTE, the provider must submit a Corrective Action Plan (“CAP”) indicating whether corrective action has been taken with respect to all issues requiring correction, or if not, providing an estimated date for correction. Once the CAP is submitted, DHS does not have an interim inspection to ensure the CAP is implemented. Its follow up is the next MTE.⁴⁶

2. Routine Site Review Inspections

DHS conducts RSRI bi-annually for contracted and non-contracted facilities except, until recently, for the cluster sites, which had not previously had RSRI.⁴⁷ Currently the RSRI are conducted by DHS' Maintenance and Repair Unit⁴⁸ and will now include cluster sites.⁴⁹

RSRIs evaluate three main categories:⁵⁰ cleanliness,⁵¹ integrity,⁵² and management.⁵³ Inspectors review the interior and exterior of each facility, including all common areas and each individual unit. The cluster sites are scored per facility.⁵⁴ The RSRIs include written commentary where necessary to elaborate upon conditions. If a site receives a marginal or unsatisfactory RSRI rating,⁵⁵ DHS requires a CAP from the provider.⁵⁶ The provider has 30 days to submit its response and indicate on the CAP whether the issue has been corrected, and if not, how and when it will be corrected. Once a provider has responded, there is no formal policy requiring DHS to follow up to ensure the CAP is implemented. Its follow up is the next RSRI. If a response is not received, DHS sends a follow-up letter to the provider notifying them that their CAP is due.

If a site fails an RSRI,⁵⁷ DHS is to notify the provider in writing that a written response is due within 15 days. In that event, the provider must also meet with DHS and the site's Program Administrator. At this meeting, the provider must explain how the issues identified in the RSRI will be corrected, and how reoccurrence of these issues will be prevented going forward.⁵⁸

III. The DOI Inspections

Over the course of four months, DOI, with the assistance of inspectors from DOB, HPD, and FDNY, inspected 25 FWC shelters throughout the city, in all three shelter-type categories.⁵⁹ During the inspections, DOI investigators interviewed DHS clients and shelter staff regarding the conditions at the sites.⁶⁰

A. Facilities Selected for Inspection

During the course of the investigation DOI inspected the following facilities:

- Eleven Tier IIs:
 - Life Family Shelter (“Catherine”), Auburn Family Residence (“Auburn”), Jamaica Family Residence (“Jamaica”), Flatlands Family Residence (“Flatlands”), Regent Family Residence (“Regent”), Hamilton Place Hotel, Help 1, Briarwood Family Residence (“Briarwood”), Corona Family Residence, Liberty Family Residence, Bridge Haven Family Transitional Residence;

- Nine hotels:
 - Mike’s House and Mike’s House Annex, Julio’s Family Place, Ellington Hotel, Frant Hotel, Ping Hotel, Lincoln Atlantic Hotel, King’s Inn Family Center, Kingston Family Residence; and
- Five cluster buildings within three cluster programs:
 - Bronx Neighborhood Cluster Annex (Lafayette Ave, East 243rd Street, and Tinton Ave),
 - Bushwick Economic Development Corp. (BEDCO) Bronx Cluster, (East 174th Street), and
 - Brooklyn Acacia Cluster (Kings Highway).

In its initial round, DOI inspected the four FWC facilities directly run by DHS, all Tier II shelters: Catherine, Auburn, Flatlands and Jamaica.⁶¹ DOI observed that these Tier II shelter facilities were, on the surface, well-maintained and clean, but on closer review, found that these facilities were operating with various FDNY and DOB violations,⁶² many of which involved significant issues regarding egress, maintenance, fire protection systems, and occupancy. For example, two of the four buildings, Catherine and Auburn, did not have proper Certificates of Occupancy (“CO”),⁶³ which document the legal use and/or occupancy of a building. Flatlands did not have a CO at all.

After DOI determined during the initial round of inspections that one third of the FWC DHS-run sites it inspected had CO discrepancies, the second round of inspections focused on buildings identified as having potential CO issues, to determine whether these issues impacted the safety of the facilities. Additionally, DOI sought to identify whether other potential violations correlated to a building having an improper CO.⁶⁴

In this second round, DOI also set out to compare maintenance of the different shelter types. DOI concluded that many of the maintenance issues involve privately-owned buildings not being properly maintained by their landlords, the landlords not correcting open violations, and the landlords not informing DHS and, in some cases, the shelter providers, of these violations. DOI also found a clear disparity in quality between the buildings with on-site social services (Tier II buildings and hotels) compared to cluster sites, which DOI concluded to be substandard.

Based on these findings, on its third round of inspections, DOI targeted buildings with numerous criminal summonses⁶⁵ from FDNY, “Class 1” hazardous violations⁶⁶ from DOB, and numerous HPD violations. For both the second and third round of inspections, DOI went to facilities in the Bronx and Manhattan. During the fourth round of inspections, DOI used the same criteria listed above, inspecting buildings in Queens and Kings Counties. Among the 25 shelters inspected, 621 City violations were issued. The findings are detailed below.⁶⁷

B. Poor Shelter Conditions with Insufficient DHS Oversight

1. Cluster Sites are Poorly Maintained, Lack Adequate Security, Provide Inadequate Social Services and Have Little DHS Oversight

While there are challenges, some significant, with all the shelter models, the inspected clusters were found to be the worst maintained, the most poorly monitored, and to have provided the least adequate social services to families. While, ideally, clusters could provide a useful and unique purpose in that they house large families, usually in two-to-three bedroom apartments, DOI investigators observed these buildings to be run down, filthy, and often riddled with rats, mice and/or roaches. Moreover, security was non-existent. Complaints from clients about all the cluster buildings inspected by DOI concerned client safety, longstanding disrepair of the units, and roach and/or rat infestations. In many of the apartments DOI inspectors witnessed roaches crawling on the walls, fly traps completely covered with flies, chipped paint throughout the units, and holes in the corners and under the sinks, allowing rats and mice access.

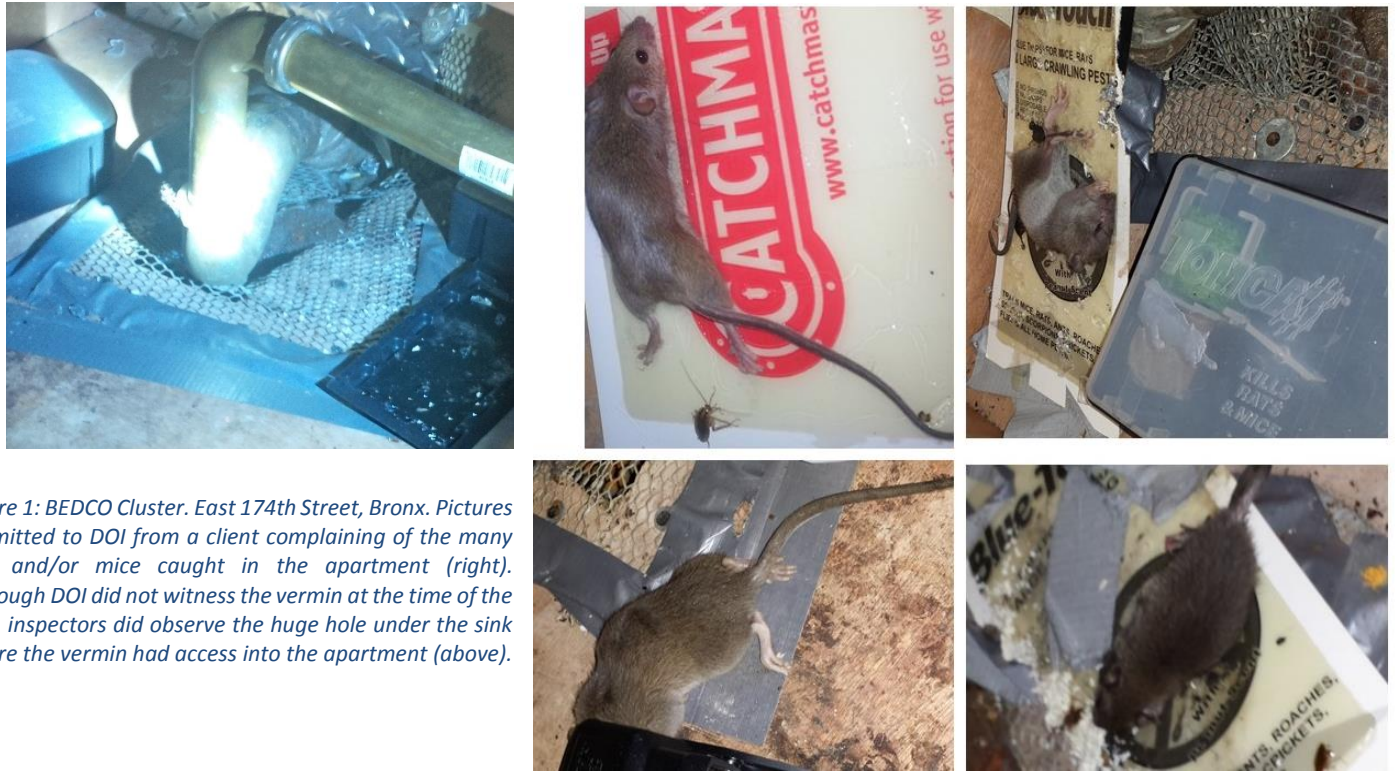


Figure 1: BEDCO Cluster. East 174th Street, Bronx. Pictures submitted to DOI from a client complaining of the many rats and/or mice caught in the apartment (right). Although DOI did not witness the vermin at the time of the visit, inspectors did observe the huge hole under the sink where the vermin had access into the apartment (above).

In four of the five cluster buildings DOI inspected, DHS clients comprised more than 50% of the population (with the remainder being private tenants with private leases). The DHS shelter residents in these buildings had numerous complaints regarding safety, lack of adequate security, and constant security guard turnover. Residents in the cluster sites are often not required to sign in and out, as required. At the East 174th Street location, when DOI entered, the front door was unlocked and there was no security. At Lafayette Avenue, the tenants also reported loitering in the hallway, gang activity inside the building, and a recent shooting inside the building. A criminal activity check of this building confirmed shootings in 2013 and 2014. The residents stated that while NYPD was on site, there were no concerns, but once the officers stopped patrolling the building, the clients became afraid for their safety. At Kings Highway, Brooklyn, a contracted cluster site, there was no security in the lobby, and the front doors were unlocked at the time of the inspection. During the DOI inspection, DHS clients stated that security staff only work in the evening, and are not stationed in the lobby, but on the fourth floor. Clients are expected to log in themselves, without staff oversight, to indicate that they are sleeping at the shelter. Many clients complained that they do not

leave their apartments in the evening because the building is unsafe. A criminal activity check of the building revealed over 100 complaints to the NYPD in the past two years, many of which included felony assault, grand larceny, and burglary. During the inspection, DOI witnessed litter in the stairwell leading from the lobby to the apartments, full garbage bags in front of some clients' doors, graffiti, and exposed electrical wiring.

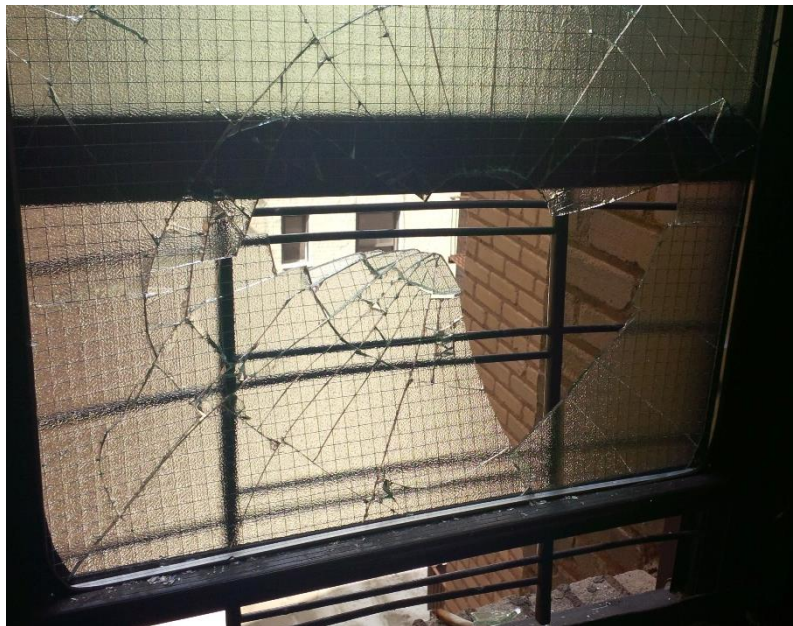


Figure 2: Brooklyn Acacia Cluster. Kings Highway, Brooklyn. At the time of the inspection, one elevator was broken and stuck on the sixth floor, the other had a large puddle of urine on the floor. The broken elevator was not locked or blocked off in anyway so that anyone, including a child, could access it (left); broken window in hallway of the top floor. Glass remnants were left on the window sill (right).

Additionally, many residents complained that the social services offered were lacking and were not providing them with the necessary tools for them to leave the shelter system.⁶⁸ DOI spoke with residents who had been living in these cluster site apartments for two to three years, some even up to five or six. The clients at East 174th Street in the Bronx reported that there is no on-site staff and they must travel two and a half miles to Southern Boulevard to speak with a caseworker or to request repairs. At Lafayette Avenue, also in the Bronx, the only caseworker mentioned by residents assigned to the building resigned about two

weeks prior to DOI's inspection and had not been replaced. The residents did not know where, how, or to whom to address complaints.⁶⁹

DOI's review of the two MTEs for 2013 performed on the Bronx Neighborhood Annex Cluster program⁷⁰ further confirmed the discrepancies clients reported in social services in clusters as compared to other shelter types. The MTEs' overall finding in its social services reviews was "poor," and DHS criticized the program for its continued decline in performance, inadequate staffing levels to keep up with increased capacity, and inadequate managerial oversight.⁷¹ The MTEs were conducted for two periods in 2013: January through June and July through December. For the MTE covering the period from January through June, 40 case files were randomly selected for review. Of those 40, only 13% had their bi-weekly independent living plans ("ILP"s) completed on time and only 10% of the cases showed progress to permanency on the ILP forms. For clients who were "housing-ready" and able to search for permanent housing, the case files did not contain the mandatory apartment checklist forms as required by DHS, or any proof of housing search efforts. In the second MTE covering the period, from July through December, this program was again cited for its lack of adequate social services. The review by DHS found that only 34% of the 41 case files reviewed contained up-to-date information, and only 8% presented a clear picture of the clients and their service needs.

Although a cluster program consists of multiple buildings, a program only receives two MTE evaluations a year, and most buildings are not physically inspected as part of the MTE evaluation. Of the 21 buildings⁷² in the Bronx Annex cluster, for example, no apartments in four buildings were included in the Apartment Fitness Review, and the few apartments in the eight buildings that were inspected were looked at only once within 2013. The consequences of failing to inspect a number of the buildings in a cluster, potentially failing to inspect a particular building at all in the course of several years, could be devastating.

The Tinton Ave cluster building in the Bronx was not seen during an MTE at all in 2013. In April 2014, the building was the site of the death of a four year-old boy who was known to the Administration for Children's Services ("ACS"),⁷³ and whose cause of death is still undetermined.⁷⁴ The building was

reported to be in deplorable condition at the time of his death. Despite prior warnings about this cluster program being inadequate for families known to ACS,⁷⁵ DHS placed the boy's family in the cluster in August 2013.

During DOI's joint inspection of the building on May 1, 2014, FDNY issued 23 violations and DOB issued three violations against this building. All three violations DOB issued are classified as Class 1-hazardous.⁷⁶ DOI observed the building to be filthy, badly maintained and with garbage in the common areas. The security guard at the front door indicated that it was her first day on the job. An interview with the security guard revealed that she only kept logs of incidents and did not log people in and out as required. DOI observed people going in and out of the building without signing in or out. The resounding complaint of clients in the building was a rat infestation.⁷⁷ During its inspection, DOI observed a dead rat in an apartment. It was reported that it had been dead for two days and, indeed, DOI inspectors found that the decaying smell permeated into the hallway outside of the apartment. The client told DOI that he informed the superintendent, but that the super had not removed it. Four children resided in that apartment.



Figure 3: Bronx Neighborhood Cluster Annex. Tinton Ave, Bronx, 1st Floor Apt. Dead rat found in a first floor apartment. Four children reside in the apt with two adults. DOI had the superintendent, who was aware it was there, remove the rotting carcass that had been in the apartment for two days.

Another building within the Bronx Neighborhood Cluster program located at Lafayette Avenue was similar to Tinton Avenue – dirty and poorly maintained.⁷⁸ On the date of the DOI inspection, investigators observed that the front door to the building was unlocked and allowed free entry.⁷⁹ The smoke detector in the building hallway was hanging off the wall and appeared to be broken.⁸⁰ There was a security guard posted at the head of the first flight of stairs in the building, with a camera monitoring the bottom of the stairs. However, the camera did not capture the entire corridor, but just the front door, leaving the side of the vestibule unmonitored. The security officer stated that persons often hide in this unmonitored area.

One client of this building explained that she lived in her shelter unit with her six children for nearly six years. Her living room was completely devoid of furniture. If the family had been in a Tier II facility, Part 900 would require that “living rooms, sitting rooms, lounges and recreation areas must be furnished with tables, chairs, lighting fixtures and other equipment appropriate to the size and function of the specific area.”⁸¹ If the family were in a DHS hotel, statute would require “furniture necessary for daily living, *including but not limited to* tables, chairs, beds, and cribs shall be in each room.”⁸² Clusters with contracts provide for client furniture such as a futon sofa, bunk bed (including mattress), crib, dresser, tables, and chairs.⁸³ This building, though, had no contract and was not subject to Part 900. But DHS should hold providers of cluster facilities to uniform standards, and the clients in this facility should not be provided any less than clients in hotels or Tier IIs.



Figure 4: A cluster resident's empty living room (left). According to the resident, the caseworker and the superintendent took all the furniture from the apartment and she did not know why. Additionally the resident's radiator was uncovered and protruding from the wall, easily accessible to her six children (close-up, right).

The same client also explained that there is inconsistent electricity in the apartment and that recently she had no electricity in her apartment for three days. She stated that some repairs that were started were not completed and described the management as non-responsive, a recurring sentiment for many residents. Although her apartment has multiple rooms, the client stated that the family did not sleep in one of the bedrooms because it was roach-infested, and added that the roaches lived in the doorframes in the unit as well.



Figure 5: A cluster resident's bedroom that is not slept in. She told DOI that roaches crawl in through the crack in the wall.



Figure 6: There were not enough beds in the same resident's unit (three beds for seven people) and some were broken.

Despite being criticized in its 2013 MTEs for its continued decline in performance, inadequate staffing levels to keep up with increased capacity, inadequate supervision and/or managerial oversight, general overall maintenance concerns of the buildings and failure to properly monitor ACS-involved cases, this non-contracted program received \$8,387,507.33 for Fiscal Year (“FY”) 2013 and \$8,782,379.68 for FY 2014 to house approximately 400 homeless families, in addition to the landlord receiving rental payments from non-DHS clients. Additionally, a check with the Department of Finance (“DOF”) and the Office of Administrative Trials and Hearings (“OATH”) revealed that all three cluster locations DOI inspected had outstanding fines for City-issued violations: \$11,910 at Lafayette Ave, \$26,300 at East 243rd Street, and \$26,400 at Tinton Avenue.⁸⁴

As Table 1 illustrates, during DOI’s inspections, 223 FDNY, DOB, and HPD violations (47 DOB, 55 FDNY, and 121 HPD) were issued for the five cluster apartment buildings. Many of the buildings were cited for the same serious issues: obstructed passageways usually from bags of garbage; locked exits; missing or non-functioning smoke and carbon monoxide detectors; failure to maintain record of fire extinguisher testing; defective window guards; broken floor tiles; chipped paint; nuisance of roaches, rats, and mice; water damage; mold; and, work without a permit.⁸⁵

Cluster	ADDRESS	DATE	Number of Violations Issued By Agency			Total Number of Violations	Contracted
			DOB	FDNY	HPD		
BRONX NEIGHBORHOOD ANNEX	Lafayette Ave, BX	7/9/14	7	8	53	68	N
BEDCO (Bushwick Economic Development Corp.)	East 174th Street, BX	7/9/14	6	8	42	56	N
BK ACACIA CLUSTER	Kings Highway, BK	8/19/14	14	8	26	48	Y
BRONX NEIGHBORHOOD ANNEX	Tinton Ave , BX	5/1/14	4	23	N/A	27	N
BRONX NEIGHBORHOOD ANNEX	East 243rd Street, BX	6/5/14	16	8	N/A	24	N
Total:			47	55	121	223	

Table 1: The number of city violations issued at each cluster site by each agency during DOI's joint inspection. HPD did not accompany DOI for two of the locations.

The five cluster buildings inspected are part of three different cluster programs, one of which, the Brooklyn Acacia Cluster, is contracted. The Brooklyn Acacia Cluster has 15 buildings that shelter 216 families. The Bronx Neighborhood Annex, non-contracted, has 15 buildings that house 178 families. The BEDCO Bronx Cluster, also-non-contracted, has 39 buildings that house 390 families. These 784 families are relegated to living in buildings with open City violations⁸⁶ while the landlords continue to earn the same amount of money for them. According to DHS, the average nightly rate for an apartment in a cluster program is \$81.71 (\$2,451 monthly).⁸⁷ Brooklyn Acacia's contract rate, which includes both rent and social services, was \$104.17 per family per night (\$3,125 monthly).⁸⁸ The average rent for buildings in the same neighborhood as the five clusters reveals rents of \$528, \$725, \$858, \$950, and \$1200 a month.⁸⁹ Based on this comparison, the City is paying two to three times market rate for these substandard living conditions.

DHS plans to reduce the use of cluster sites, and is now including cluster sites in the RSRI process.⁹⁰ Both of these measures are important steps in improving the safety and conditions at locations where DHS clients reside. Timely implementation of these plans is critical. However, as DOI's recommendations below detail more fully, DHS also needs to provide increased security and on-site social services for the families that require it, and must mandate contracts, and establish and implement financial consequences in contracts for all cluster sites.

2. Hotel Shelters Require Improved Conditions and Enforced Standards

The hotel shelters are also in need of increased vigilance by DHS. Although onsite services at hotels are not provided to the extent they are at Tier IIs, there is more onsite staff at a hotel than a cluster. Upon entering a hotel, there is security in a reception-type space, where people log in and out. Case workers have an onsite office where they meet and are available to residents. The hotels vary in size and condition. Most are former Single Residence Occupancies ("SRO"s) that have private bathrooms and may contain some form of in-room cooking unit such as a stovetop range. However, some hotels were previously residential buildings with multiple bedrooms. Three of the hotels observed were multiple family dwellings.

These tended to be in worse condition than the SRO-style units. Unlike clusters, the hotels consist entirely of DHS clients.



Figure 7: Mike's House (hotel): A 5th floor apartment. Evidence of mold in the bathroom (left): exposed heating pipe in the resident's children's room (right). The exposed portion would be reachable by the children (ages 3, 5, and 7).

A recurring complaint at the hotels was the infestation of rats and mice, despite monthly and sometimes weekly extermination. Units ranged in levels of disrepair. There were visible holes in the walls close to the floor where the mice were entering. One apartment at Mike's House that was adjacent to an alley had a particularly vexing vermin problem, and the client indicated that the day of the inspection – about which DHS had advanced notice – was the first time the superintendent had cleaned that area in months.⁹¹



Figure 8: Mike's House (hotel): Dead mouse in a drawer of one of the units.



Figure 9: Mike's House (hotel). Severely chipped paint and water damage in the public hallway.

It was also clear during the DOI inspections that the superintendent at Julio's Family Place was cleaning and making repairs because of DOI's pre-announced presence, which many of the residents confirmed.



Figure 10: Julio's Family Place (hotel). Superintendent fixing loose stairwell bannister after inspectors brought it to his attention (left): DHS was aware that DOI would be inspecting this location and most residents confirmed that the superintendent was painting because of the inspection (right).

The SRO-style hotel shelters appeared better maintained than the more residential hotel shelters, but the DOI inspection yielded concerns regarding the size of the rooms and the heat. The rooms house up to two adults and two children. Many of the residents were pregnant women and/or women who had just given birth. In some rooms, the bunk beds and the cribs provided by the facility blocked the windows to the fire escape, but because the rooms were so small, there was no other way to configure the furniture. In addition, many of the residents were told by shelter staff that without a diagnosed medical condition and a doctor's note, air conditioning is not permitted, even if the residents could provide their own unit. Shelter staff reiterated this policy to DOI investigators.⁹² Given the room size and lack of ventilation, since many units had only one window, the rooms could become extremely hot, which was very evident during DOI's inspections.

Residents in all SRO-style facilities also reported vermin and told investigators that staff respond slowly to their complaints and as a result, most issues take weeks to address, if at all. Some of the units had visible signs of disrepair, such as cracked floors and walls. The major complaint from residents appeared to be broken ranges and/or missing or broken furniture.

As Table 2 demonstrates, of the nine hotel facilities DOI inspected, at that inspection, DOB, FDNY, and HPD collectively issued 168 violations on the buildings (63 DOB, 65 FDNY, and 40 HPD). Violations included but were not limited to obstruction of egress, work without a permit, basic maintenance of the building involving plumbing and electrical equipment and wiring, non-working fire alarm system, no fire guards in the building, failure to provide fire safety guides to building occupants, failure to provide sufficient portable fire extinguishers, failure to maintain carbon monoxide and smoke detectors in working order, broken floor tiles, chipped paint, and mold.⁹³ These serious violations existed despite passing RSRI scores for each facility at approximately the same time as the DHS inspections. Table 2 also lists the passing RSRI scores each facility received despite multiple violations being issued at every location during the subsequent DOI inspections, further echoing the lack of DHS follow-up of its facilities and need for a more accurate scoring system.

Hotels	DATE	Number of Violations Issued by Agency			Total Number of Violations	Latest RSRI Score (70 is Passing)	RSRI Date
		DOB	FDNY	HPD			
KINGSTON FAMILY RESIDENCE	8/19/14	8	13	9	30	80	7/23/14
FRANT HOTEL	7/8/14	7	13	8	28	77	4/22/14
LINCOLN ATLANTIC	8/20/14	6	8	13	27	77	8/7/14
ELLINGTON HOTEL	7/8/14	7	15	3	25	76	3/24/14
MIKE'S HOUSE AND MIKE'S HOUSE ANNEX	6/4/14	15	5	N/A	20	76 70	7/11/14 7/31/14
PING HOTEL	7/8/14	3	10	2	15	80	4/24/14
KING'S INN	8/20/14	9	1	5	15	80	7/15/14
JULIO'S FAMILY	6/5/14	8	0	N/A	8	72	7/16/14
Total:		63	65	40	168		

Table 2: The number of city violations issued at each hotel by agency during DOI's joint inspection and the date and score of the facilities' RSRI. None of the hotels are contracted. HPD did not accompany DOI at two of the locations.

Although 100% of the hotel shelter population is DHS clients, none of the hotels is contracted,⁹⁴ depriving DHS of the possibility of any contract enforcement mechanism. According to DHS the average rate per night per family for the hotel is \$94.70 (\$2,841 monthly). The City is paying this amount for families of up to four people to live in one room with a bathroom and kitchenette. Two of the eight hotels have extensive outstanding fines for City-issued violations: \$191,156 at the Frant Hotel and \$45,277 at the Ellington Hotel.⁹⁵ Unless these facilities are brought under contract, where DHS requires penalties in the contracts for breaches and uses the powers of the law to enforce contract breaches, DHS will be unable to adequately protect shelter residents in hotels. As DOI recommends, until such time as these facilities are under contract, DHS should devise an alternate enforcement mechanism, through policy, for providers that do not adhere to safety and health requirements. This mechanism can include withholding payment for services and/or working with other City agencies to ensure that fines for City issued violations are collected.

3. Tier II Shelters Pose Significant Challenges

The Tier II shelter facilities presented their own challenges, but the DOI inspection revealed them to be the best-equipped shelters that provide residents with the most services. These facilities tended to be better maintained and the clients had the least complaints. While some of the Tier II facilities also had issues with vermin, occasional leaks, and slow response time from staff for apartment-specific issues, overall these buildings presented the least openly visible issues to DOI investigators. Nonetheless, serious problems persisted beneath the surface. As Table 3 demonstrates, of the 11 Tier II facilities DOI inspected, at the inspections, DOB, FDNY, and HPD issued 230 violations (92 DOB, 86 FDNY, and 52 HPD). As with the hotels, all these facilities also passed their RSRI.

Tier II	DATE	Number of Violations Issued by Agency			Total Number of Violations	Latest RSRI Score (70 is Passing)	RSRI Date
		DOB	FDNY	HPD			
REGENT FAMILY RESIDENCE	6/4/14	19	16	N/A	35	72	5/14/14
HELP 1	8/19/14	9	8	15	32	74	6/18/14
HAMILTON PLACE HOTEL	6/5/14	21	10	N/A	31	75	4/2/14
BRIARWOOD	8/20/14	10	8	12	30	79	4/16/14
LIBERTY FAMILY RESIDENCE	8/19/14	2	16	5	23	75	5/29/14
BRIDGE HAVEN	7/9/14	5	5	9	19	78	6/12/14
FLATLANDS	4/22/14	13	5	N/A	18	77	8/27/14
CORONA*	8/20/14	4	0	11	15		
LIFE	4/22/14	4	9	N/A	13	74	5/20/14
AUBURN	4/22/14	3	6	N/A	9	77	6/13/14
JAMAICA	4/22/14	2	3	N/A	5	77	4/4/14
Total:		92	86	52	230		
*Corona was mistakenly labeled in DHS' system as a cluster and therefore did not receive an RSRI.							

Table 3: The number of city violations issued at each Tier II by agency during DOI's joint inspection and the date and score of the facilities' RSRI. All of these facilities are contracted. HPD did not accompany DOI at six of the locations.

One major problem identified at the Tier II inspections was that many buildings had improper Certificates of Occupancy (“COs”) or none at all. According to DOB inspectors, this is relevant because

when the occupancy or use of a building is changed, the building may require additional fire protections such as a sprinkler system, a fire door with an increased fire resistance rating, installation of fire escapes, a widened corridor width, and additional exit doors. This all depends on the new occupancy and the new Use Group (“UG”). If the CO is not consistent with the building’s use, then crucial protections could be lacking.

Specifically, seven of the eleven facilities held improper Certificates of Occupancy (“CO”)⁹⁶ for the buildings’ current use as a shelter. At the time of the inspection, the CO for Catherine was for a school, its prior use, and the CO for Auburn was for a hospital, its prior use. Flatlands, which is a City-owned building and operated by DHS, had no CO at all. While it had previously been issued several Temporary Certificates of Occupancy, (“TCO”s), its last TCO expired 16 years ago, in 1997. DHS applied for a DOB-issued Letter of No Objection (“LNO”)⁹⁷ to use Flatlands as a family shelter, but it was denied in 2009. At that time, DHS was informed by DOB to either obtain a new TCO or a permanent CO. However neither occurred, nor were any subsequent applications made, by the time DOI inspected. Another residence, Help 1, had a CO for an eight-family dwelling, but the facility houses up to 191 families. Briarwood’s TCO expired in 1994. The CO for Regent indicates that there should be apartments and hotel rooms on floors two through 17. However, some of the apartment units were illegally converted into offices and the second floor was illegally converted to a daycare,⁹⁸ which also implies that work for these conversions was performed without a properly issued permit by DOB.⁹⁹

Despite the fact that these Tier II facilities routinely passed their RSRI, serious safety-related violations were issued to each facility at the DOI inspections. For seven of these facilities, DOI’s inspection occurred *after* DHS performed its latest RSRI for that facility, when the facility passed its inspection. Yet, violations were issued at all DOI inspections. For example, numerous fire violations in the following categories were issued at the inspections:

- Failure to provide and/or maintain required portable fire extinguishers, fire hoses or other portable fire extinguishing devices;
- Failure to provide and/or maintain required signs, postings, notices, and/or instructions;

- Failure to provide required means of egress from, any premises or part thereof, free from obstructions or impediments, including overcrowding by reason of the presence of persons in locations that obstruct or impede egress, and/or failure to maintain means of egress;
- Failure to provide and/or maintain fire protection systems, including sprinkler systems and other fire extinguishing systems, standpipe systems, fire pumps, fire alarm systems, and/or other devices, and equipment associated with fire protection systems;
- Failure to provide, protect and/or maintain a required door or window, including fire-rated doors, self-closing doors, access doors, or fire-rated glass; and,
- Failure to conduct a required initial or periodic inspection or test of any device, equipment, system, facility or premises.

Regent, a City-owned facility, provides a glaring example of DHS ignoring known, dangerous violations. DHS had identified seven life safety hazards in its May 14, 2014 RSRI, but gave the facility a passing score of 72.¹⁰⁰ The results were sent to the shelter director on May 21, 2014 with a CAP due within 30 days and an earlier response due by June 7, 2014 for the seven life safety hazards cited.

DOI's inspection of Regent occurred on June 4, 2014. All of the seven hazards previously identified by DHS still existed and were cited as violations at the DOI inspection.¹⁰¹ Despite the inspection, Regent's CAP was not submitted when due. DHS followed up with the facility on July 7, 2014 about the overdue CAP. Regent finally submitted a CAP on July 16, 2014, stating that the issues were either corrected or still due to be corrected. Despite the fact that the CAP contained future "to be completed" dates, DHS required no further action and considered all items addressed.

The worst condition referenced in the Regent RSRI (but not labeled as a life safety item) and witnessed at the DOI inspection involved a stairway in the building that was literally falling apart and dangerous to walk on – the treads were so rusted away that it was declared by DOB at the DOI inspection to be an unsafe means of egress. Residents stated that it was common practice for residents to not use this stairway, leaving only one functional means of egress for approximately 140 families.



Figure 11: Regent Family Residence Stairway A: severely corroded and rusted stairs. Visible large holes (bottom left). The DOI inspection resulted in fire guards being placed at the stairs 24 hours a day.

The damage was so extensive at the DOI inspection that both DOB and FDNY considered ordering the building immediately vacated. Ultimately, the resolution was to order 24 hour-a-day fire guards – people hired to physically block the stairway – to regulate traffic in that stairway in case of fire.¹⁰² DHS

was required to immediately submit plans to DOB and begin repairing the stairway. In the interim, the cost to DHS for the fire guards came to a total of \$637,258.34 for the period of June 5, 2014 until September 28, 2014.

DHS had been aware of this hazardous stairwell since 2012, when a DHS-hired consulting firm assessed some of the shelter facilities. At that time, the consultant found serious life and safety issues and Code violations at the shelter, including this one, which required immediate resolution. Aside from recommending repair of the stairs, the consultant also noted stairway doors that were not fire-rated, handrails in the stairwell being damaged, exhaust shafts being misused, access doors not being up to Code, electrical problems that caused life safety issues, emergency and exit lighting not being up to Code, and a fire alarm system not being fully functional. At the time of the 2012 assessment, the estimated cost to remediate all of these dangerous violations was approximately \$3,865,000.¹⁰³ In March 2013, the consulting firm was asked to re-assess the site and discovered that the condition of the stairwell had deteriorated to the point where it required a full replacement of the entire stairwell. At the time, DHS sought funding for this project but was informed it could not use capital funds, and thus, DHS began the procurement process to engage a private vendor. This building is under DHS control, as it is City-owned, and yet the stairwell had been left to rot for years despite DHS inspectors witnessing and documenting the deteriorating condition over that time.¹⁰⁴ After DOI's inspection, DHS then sought and obtained an emergency declaration from the Comptroller permitting it to procure an emergency contract and immediately began fixing the stairway, which alone is costing DHS over \$750,000.¹⁰⁵ According to DHS, DOB approved the structural work for the stairwell and allowed the stairs to be reopened on 9/26/14.

Although the Tier II facilities provide the best services and the safest conditions, DHS must still ensure basic safety and maintenance. Passing RSRI scores are clearly not a true reflection of a shelter's condition, as evidenced by the 211 City-issued violations that occurred during DOI's inspections. The average cost per family per night at a Tier II shelter is \$110.76, or \$3,322.80 monthly. With 7,497 families in Tier II shelters, DHS is paying shelter providers on average \$24,905,034 monthly. DHS should be ensuring that City funds are providing facilities and services that abide by its standards.

IV. Conclusion

Although DHS is performing its inspections regularly and documenting its findings, it lacks enforcement and urgency in requiring repairs, even when the tools for enforcement exist and even when conditions endanger residents. At its worst, DHS is turning a blind eye to violations that threaten the lives of shelter residents. Of the 25 buildings inspected, DHS had conducted recent RSRI's on 19 of them.¹⁰⁶ All 19 facilities (nine Tier IIs and ten hotels) received a passing grade.¹⁰⁷ Of the 19, six were deemed "Needs Improvement"¹⁰⁸ and one was "Unsatisfactory"¹⁰⁹ and yet still received a passing RSRI score. Of those RSRI's that were declared to be "Satisfactory," the facilities passed despite DHS finding 47 life safety hazards across ten buildings. Nine buildings had a total of 104 unsatisfactory scores listed in the reviews. In many instances, the life safety hazards found in the RSRI's directly corresponded to FDNY and DOB violations issued at DOI's inspections.¹¹⁰ CAPs were required in all instances, but were received in only approximately 57% of cases. In all cases, CAPs had future dates for which certain issues would be resolved. Serious issues that remained unresolved at the time of the CAPs included non-functioning carbon monoxide detectors, expired fire extinguisher tags, and fire panels in "trouble" mode. Although the contracts for Tier II and cluster programs detail maintenance and repair obligations for the providers, there are no provisions for financial consequences when building related issues are not corrected,¹¹¹ and in fact DHS fails to follow up.

DHS is aware of the conditions present in its current shelter system but historically has not been able to implement long-term, systemic and lasting reforms. Too many persistent problems – locked exits, obstructed passageways, non-functioning smoke and carbon monoxide detectors, and rodent infestations, to name some egregious examples – are downright dangerous. But these serious life safety concerns cannot be left to chance. DHS can and must immediately begin to devise a plan to correct the deficiencies in its emergency shelters and must provide safe and adequate homes to the over 12,000 homeless families that need shelter.

V. Findings and Recommended Reforms

Below are DOI's findings of internal management weaknesses and related recommendations to build a plan for negating those weaknesses, deterring future building neglect and mismanagement, and keeping families safely sheltered. Also included is DHS' response to each of the recommendations and the actions DHS represents it has already taken to address these issues.

FINDING#1: Lack of contracts, and failure to enforce existing contracts, impede DHS' ability to ensure that providers of shelter facilities maintain and repair their facilities even after potentially life-threatening deficiencies are noted. Additionally, the inadequate array of family shelter housing to meet capacity needs adds further difficulty for DHS to ensure shelter providers comply with contract requirements.

- Within the family shelter system, none of the 48 hotels used as shelters have written contracts and seven out of the 16 cluster sites also operate without contracts. Three of the approximately 97 Tier II sites also hold no contracts. DHS is losing an important enforcement tool by ignoring the procurement contracting process and its protections. There is no legal accountability without contracts.
- For all the non-contracted sites, the shelter operators simply submit monthly invoices to DHS for payment. For Fiscal Year 2013, DHS' expenditures for non-contracted FWC shelters totaled \$108,513,389.06 – a high price to pay for housing that is too often substandard.
- Even for sites that are contracted, DHS does not enforce the terms of the contracts, and the contracts themselves provide no practical enforcement mechanisms nor any consequences for contract breaches.
- According to DHS, it plans to bring in new shelter capacity only through the City's procurement process, through contracts, and to evaluate which non-contracted sites should be put to contract.¹¹² DOI supports this initiative.

RECOMMENDATION #1A: Within the next six months, DHS should create a three-year plan to negotiate and execute contracts with all providers and owners who provide shelter housing to NYC's homeless family population.

- DHS' failure to enter into written contractual arrangements with the majority of shelter providers has compromised DHS' leverage to ensure that the providers adequately maintain their buildings, repair dangerous conditions, provide safe entry and egress and provide acceptable living conditions. While entering into contracts with the vast majority of shelter providers is not something that will occur overnight, and will require combating market forces that give landlords great leverage, DHS should immediately devise a plan to bring the providers into contractual relationships over the course of time in order for DHS to effectively implement proper enforcement mechanisms.
- The plan should set a series of aggressive yet reasonable timetables (i.e., Tier II sites currently without contract will have executed contracts by June 2015; the hotels used as shelters by DHS will be contracted under a timeframe where there is a set increase in the number or percentage of hotels contracted over the course of three to five years; the cluster sites should get a separate schedule). The plan should also identify persons responsible, and there must be a plan for the DHS Commissioner and DOI to review progress regularly.

Agency Response: DHS agrees with the recommendation that it bring non-contracted facilities to contract, as the lack of contractual agreements hinder the Agency's ability to hold providers fully accountable for quality social services delivery and maintenance of the physical plant. To address this situation, DHS is taking the following actions:

- All non-contracted facilities have been evaluated by DHS program divisions and by the Agency's Maintenance & Repair (M&R) unit to assess both the quality of current social services that are being provided as well as the physical conditions of each site to determine the viability of bringing these sites to contract. The Agency will then:
 - Bring viable non-contracted sites to contract;
 - Within three years, eliminate non-contracted sites that do not meet programmatic and physical plant thresholds; find clients who are affected acceptable alternative housing;
- The Agency expects to have all viable non-contracted shelter facilities in the contracting process by the end of FY 2015 and have all contracts signed and registered by the end of Calendar Year ("CY") 2015.
 - In November 2014, OMB approved funding for DHS to proceed with the contracting process for the viable sites.
 - The RFP process has already been initiated.

RECOMMENDATION #1B: DHS should incorporate and commit to enforcement mechanisms that have clear consequences into all new shelter contracts.

- Within the contracts themselves, DHS should require provisions that mandate that shelter providers will fix deficiencies in their buildings that are noted by DHS Inspectors and Program Administrators within 30 days of notice of the deficiency (or, as needed, with shorter timeframes for emergencies. If the shelter provider fails to make the required repair or fails to fix the noted condition within the required time frame, the contract should then specify that DHS will order the repair or fix to be made by city employees, at a cost to be deducted from the rent paid by the City to the shelter provider. The City must then ensure that the repairs are made within the same timeframes.
- The contracts should mandate that landlords/providers will still be required to provide shelter and services to the clients despite reduction in payment.

Agency Response: DHS agrees with the recommendation that contracts should be used more aggressively to hold providers accountable to deliver high quality social services and to ensure that physical plant and maintenance issues are addressed. To that end, DHS is taking the following actions:

- Last year, DHS modified the Corrective Action Plan (CAP) process to require providers to submit CAPs within 30 calendar days following the date of Routine Site Review Inspection (RSRI), changing the previous requirement that they be submitted within 30 business days. Making this change from business days to calendar days has reduced the response time by 1 week.
 - All contracts currently require provider agencies to comply with DHS policies and procedures. DHS is developing a Shelter Inspection Policy and Procedure (the “Procedure”), and will implement the procedure in March 2015.
 - The Procedure will more precisely define life-safety violations and will require that such violations be corrected within 24 hours of being assessed. Providers will be required to submit proof that corrective measures were taken in this time frame. This change will be fully implemented by March 6, 2015.
 - Additionally, the Procedure will require provider agencies to submit CAPs within 14 calendar days following any RSRI that has resulted in a failing score at their site.
 - DHS will be issuing Notices of Non-Compliance to provider agencies who fail to provide CAPs within these new timeframes. Failure to respond to the notice of non-compliance within 5 days will result in the issuance of a Notice of Intent to Disallow/Withhold Funding.
 - DHS Legal Affairs will convene Enforcement Conferences with any agency providers who have outstanding CAPs or who fail to comply with the Agency’s request for a CAP based on a failed inspection.

- Beginning in February 2015, as part of the contracting process, DHS will review leases and other site control agreements between provider agencies and landlords to ensure that they contain repair clauses and have language in them which is consistent with the above listed standards promulgated in the Shelter Inspection Policy and Procedure.
- During the FY 2015 contracting process, DHS will amend contract language with provider agencies and will modify their budget to specifically fund ongoing maintenance and repair. A contract clause will be including prohibiting providers from using these funds for non-related agency expenses. The contract will also provide for disallowances of funds if providers do not properly address repairs.
- The contracts will provide that, if repairs are not made within a specified time frame, DHS will perform the repair on any City-owned property. For non-City-owned properties, DHS is exploring its alternatives and investigating whether HPD can perform the repairs not done by the providers.

RECOMMENDATION #1C: As DHS increases its array of available family shelter housing, DHS should begin the process of canceling housing arrangements with substandard DHS family shelter providers and transitioning families from those shelters.

Agency Response: DHS agrees with this recommendation and, as part of the process of bringing non-contracted shelter to contract, DHS will be discontinuing the use of shelter stock that does not meet the Agency’s programmatic and regulatory expectations. Immediate steps were also taken in 2014, including the following:

- DHS inspected all cluster units in the portfolio in 2014 and issued corrective action plans when needed. Units with deplorable conditions that created life safety risks were removed from the portfolio.
- DHS implemented programmatic changes at the Auburn and Catherine Street shelters and they are no longer being used to shelter families with children.
- DHS continues to review its policies and procedures related to assessing and monitoring the quality of shelter service being provided by each provider agency, including:
 - Assessing the physical condition of the building;
 - Assessing the quality and intensity of the social services provided to families;
 - Assessing the nature of children’s experience in shelter;
 - Assessing the nature of the families’ interactions with each other while in shelter.

RECOMMENDATION #1D: Within the next six months, DHS should create a three-year plan how it will provide shelter capacity to residents whose housing will be disrupted from DHS’ having to close noncompliant, substandard shelters:

- The plan should establish clear time frames, calculate estimated capacity needs, and identify persons responsible, and there must be a plan to regularly review progress, including by the DHS Commissioner and DOI.

Agency Response: DHS is engaging in a multipronged approach to move homeless families into permanent housing in the community. Through these efforts, DHS hopes to sufficiently reduce its shelter census to the point that additional shelters for families with children will not be necessary. Specifically, while DHS opened 23 new shelters in CY 2014 (the majority of which were for families with children), it also put in

place a variety of tools that are being used to reduce the shelter census including: access to public housing; additional Section 8 vouchers allocated to families in shelters; and rental assistance programs to exit thousands of families from shelter. DHS is confident that these efforts will allow the Agency to avoid bringing on additional shelter capacity for families with children, and instead, create vacancy in the current system.

FINDING #2: The DHS cluster sites lack security, making residents in cluster locations unsafe.

- From all the sites visited and the documents reviewed, it is clear that the DHS cluster sites are by far the most lacking in security, endangering DHS clients residing there.
- Contracted cluster programs are required to provide security.¹¹³ Additionally, Part 900 of the NYCRR requires that supervision includes “surveillance of the grounds, facility and activities of the residents to prevent theft and resident harm.”¹¹⁴ “[A]ll facilities must have at least one awake staff person on duty and onsite 24 hours per day [and] a sufficient number of competent staff must be onsite at all times to supervise, operate and maintain the shelter in a safe and sanitary condition.”¹¹⁵

RECOMMENDATION #2: Within the next three months, DHS should create a 24-month plan for all DHS cluster site locations to have 24/7 security personnel on site in each cluster site building.

- In order to ensure that the cluster site locations are safe for DHS families, DHS must keep the buildings safe. It is essential that residents are assured that there is staff available to keep them safe. Therefore, DHS must ensure adequate security staffing at the cluster site locations, either through vendor contracts or by staffing the sites using DHS’ own police staff.

Agency Response: DHS agrees that security at cluster sites is an important issue and should be augmented. Therefore, in the next three months, DHS will develop a two-year plan for addressing security and social services in its cluster programs. The major issue to consider in DHS’ planning is the fact that many of the cluster apartments are in buildings which also house private rent - paying tenants. DHS will be discussing this further with the Law Department to better understand how to address this recommendation to ensure the propriety of any actions. DHS is also developing a uniform procedure on how to implement and maintain its Client Responsibility program in family shelters, especially focusing on incidents of Gross Misconduct that threaten the safety of families, children and shelter staff. While ensuring it meets the needs of its clients, DHS is pursuing sanctions against adult residents of family shelters who violate shelter rules, in particular, by engaging in violent behavior against other shelter residents or staff. This initiative was launched in fall 2014.

FINDING #3: The DHS cluster sites lack readily available services for DHS shelter residents.

- From the site visits and documents reviewed, it is clear that the DHS cluster sites lack services comparable to that offered in Tier IIs and even hotels. Cluster contracts dictate that families should be receiving ongoing case management to develop “independent living skills identified in the independent living plan so that the family may obtain permanent housing, including, but not limited to, providing directly or through referrals supportive social, medical and mental health services, including but not limited to psychiatric, drug, and alcohol services; assistance in securing employment assessments, job training and job placement services; advocacy; referral information; linkages to community based service programs; crisis management; life skills development; and recreation.”¹¹⁶
- As detailed earlier, however, it was clear from DOI’s inspections and in speaking with the clients that many families are not receiving these type of services. Although some of the clusters are not contracted, families should not be deprived of the skills and tools necessary to move into permanent housing because they weren’t fortunate enough to be placed in a contracted facility.
- Clusters are underperforming in reaching their placement targets. All facilities regardless of type have targets for placing the families in permanent housing. The target goal is 18% of that facility’s capacity measured on a quarterly basis within a fiscal year. As the table below shows, clusters are considerably deficient in meeting their performance targets as compared to hotels and Tier II facilities:

DHS FWC Placement Targets: Performance for the Past Two Quarters		
Facility Type	FY14 Q3 (% target achieved)	FY14 Q4 (% target achieved)
Tier 2	86%	93%
Hotels	84%	90%
Clusters	60%	56%

RECOMMENDATION #3: Within the next three months, DHS should create a 24-month plan for all DHS cluster site locations to have casework and services on site in each cluster site building or in an adjoining building in the cluster.

- If the not-for-profit providers cannot provide adequate casework services in their clusters, then DHS should offset the disparity. Flatlands, Auburn, Catherine, and Jamaica are all shelters run directly by DHS staff and provide these services. DHS is capable of providing these services to their clients.

Agency Response: DHS agrees with the recommendation that social service delivery in cluster units needs to be augmented and strengthened to better match what is currently provided in Tier IIs and Hotels. In the next three months, DHS will develop a two-year plan for addressing security and social services in cluster programs. The work related to this began in 2014, and includes, as follows:

- In August 2014, DHS dispatched case management teams to all of the cluster sites operated by Aguila Inc. to conduct client assessments and to ensure that appropriate services were being offered to families.
- In November 2014, DHS conducted case reviews with provider agency staff to review high-risk cases where child safety was in question. These reviews enhanced dialogue with provider agencies and promoted critical thinking related to safety factors and risk elements that would result in increased monitoring of high-risk cases to ensure child safety.
- In December 2014, DHS hired and deployed a team of Masters-level Social Workers (Safety First Teams) to visit families and review cases with high-risk factors.
- DHS has conducted targeted visits to various shelters to assess the quality of social service delivery. Over 20 shelters (including some cluster sites) have been visited to date and during these visits, staff has been interviewed and cases have been assessed, including interviews being done with families. As a result of these visits, units have been taken off line, families have been moved to different shelters where we deemed it necessary, and in some cases child welfare referrals were made.
- Beginning in March 2015, DHS will implement a procedure which requires all sites within the DHS system to submit an Operational Plan. The Operational Plan must delineate the provision of social services (employment, housing-search, etc.), staffing models, etc. DHS will approve, modify, and supplement the plans as necessary. DHS conducted case reviews of all its long-term-stayer families in its directly-operated shelters to determine their specific needs and to develop pathways to permanency. That review is now complete. The next round of case reviews are currently in process for long-term-stay families in provider-operated shelters. *The current review will be completed within the next 90 days.*

FINDING #4: There is insufficient monitoring and follow up to ensure that DHS shelters are operating in compliance with the mandates required to ensure safe and secure facilities.

- DHS already has in place two monitoring systems over NYC residences for homeless individuals and families: the MTEs and the RSRI. However, there are several flaws in the way these systems function. Most importantly, there is no repercussion for a facility that fails to make mandated

repairs as a result of a problem being identified in an MTE or RSRI. While DHS requires Corrective Action Plans to be submitted, the follow-up ends there. Thus, if a facility is cited for a problem and does not fix it, at the next MTE or RSRI, it is likely to be cited for the same issue, with no penalty.

- Additionally, the sites know ahead of time when an MTE inspection will occur, giving them opportunity to mask issues.
- The RSRI's never "fail" any facility, giving passing marks to facilities even when they have numerous outstanding building code and fire code violations.¹¹⁷
- Although the RSRI's require review of inspections conducted by FDNY and DOB, as well as other building violations, there is no evidence that DHS utilizes this information in evaluating their shelters. Many of the RSRI's indicate that the buildings have FDNY and DOB violations, but nothing is done with that information. DHS can access DOB's Business Information System ("BIS") database, and yet many of the buildings have violations that have been opened for years accruing thousands of dollars in penalties. FDNY's database, FPIMS (Fire Prevention Information Management System) keeps a majority of its inspection history but it is not accessible to the public. Additionally, the shelter buildings don't always have records of the inspections on location. Thus, the DHS RSRI's are ineffective, and violations are missed or ignored.

RECOMMENDATION #4A: DHS should ensure that all buildings within a cluster program are included in DHS inspections at least twice a year.

Agency Response: DHS agrees with this recommendation and will implement it through conducting RSRI's in all buildings within clusters (and has already begun doing so). Since the beginning of 2014, over 1,600 cluster units have been inspected using the RSRI instrument. DHS is also developing a new MTE protocol which will involve two site visits per year at every DHS facility, including all its cluster programs and buildings. Between RSRI's and MTE's all shelter facilities, including all buildings in each cluster program, will be inspected at least annually.

RECOMMENDATION #4B: DHS should reevaluate the RSRI scoring so that the scores are real and not all shelter facilities pass, despite violations and concerns.

Agency Response: DHS agrees with the recommendation that its RSRI program be strengthened. In 2014, DHS re-evaluated the scoring methodology and scoring system for the RSRI. The ranges for each score were modified to improve standards as reflected below.

	Old Score	New Score	Old Score	New Score	Old Score	New Score	Old Score	New Score	Old Score	New Score
	<60	<=70	60-69	71-75	70-79	76-80	80-89	81-90	>90	>90
Old Rating	Unsatisfactory		Needs Improvement		Satisfactory		Very Good		Excellent	
New Rating	non-functional		needs major repair		needs repair		needs minor repair		performs as designed	

RECOMMENDATION #4C: DHS should have written policies requiring all shelters to conform to requirements in Part 900, with the exception of day care and recreation centers if the facility is unable to conform to that requirement because of size and/or construction requirements.

Agency Response: DHS agrees with this recommendation and in furtherance of the same has taken the following steps:

- DHS will review all family shelter contracts to ensure that all relevant Part 900 requirements are included within the scope of services.
- Beginning in March 2015, DHS will be requiring all family shelter providers, regardless of shelter type, develop Operational Plans that will describe, in detail, the physical and programmatic aspects of their shelter and shelter program.
- DHS is in the process of creating a Regulatory Compliance Unit’s within the Legal Affairs division. This new unit will oversee regulatory compliance across all shelters in the DHS portfolio. The hiring and recruitment process to staff this unit has begun.
- DHS will also routinely monitor DOB, HPD and FDNY databases to know whether there are any violations at any shelter sites and will require provider agencies to address and correct any and all outstanding violations.

RECOMMENDATION #4D: Using DHS maintenance staff, DHS should ensure that all shelter “life safety” violations it has previously identified are abated or have repairs in process within the next three months and subsequently DHS should task its own maintenance staff with primary responsibility for correcting all life safety violations in shelters.

Agency Response: DHS agrees with this recommendation. To meet these goals, DHS is already reviewing all RSRI reports, as well as violations in DOB’s violation system and FDNY’s violation reports. DHS is meeting and will be meeting with FDNY on a regular basis as violations go to building owners and landlords and are not available on a publicly viewed system, as is the case with DOB. From the RSRI reports and violations from DOB and FDNY, we will have a list of all life safety issues to be addressed in all shelters. DHS will categorize the life safety issues as those needing immediate repair, medium term repair (via contractor), or needing a long term repair (capital project). Many such issues are already noted in previous RSRI reports and have been in letters to providers and landlords requesting corrective action. DHS will also re-inspect when dangerous life safety issues exist, note if action isn't taken, and follow the process outlined in on pages 30-31.

Moreover, DHS has conducted an analysis and as a result has sought OMB approval to hire the 19 additional staff that it determined is required for its inspections unit within M&R. The additional staff will enhance the Agency’s oversight of its shelter portfolio and ensure appropriate follow-up and follow-through on

corrective action plans, where required. The hiring of these additional staff will help DHS to expedite these reviews.

RECOMMENDATION #4E: DHS should partner with FDNY, DOB, and HPD by creating an interagency working group, monitored by DOI, to ensure that health and safety violations in shelters are identified and corrected.

- FDNY, DOB, and HPD should assign a liaison from each agency to DHS.
- DHS, FDNY, HPD and DOB should agree to have representatives of all these agencies present at DHS site inspections, to ensure a full inspection and that all four agencies share information.
 - Both DOB and HPD are complaint-driven agencies and therefore do not regularly inspect all homeless shelters. To include them in the inspections will ensure that DHS buildings are being regularly inspected for potential hazardous conditions.
 - These inspections should be unannounced.
- FDNY should make its fire code violations available online at least within its own agency, but ideally to be shared with DHS and DOI for shelters.
 - In the interim, any City-issued violation to a private owner for a shelter building should also be sent to DHS and DOI.
- HPD and DOB should indicate in the property profiles in their internal databases whether a property is a DHS shelter.
 - DHS should provide HPD and DOB a list of their shelters.
 - Thereafter, when DOB or HPD receives a complaint regarding a building, the inspector should check BIS to determine whether the building is a shelter. The agency should then contact DHS for DHS to send its own inspector to accompany HPD or DOB when responding to the complaint.
- DOI will monitor and review the progress of the working group.

Agency Response: DHS agrees with this recommendation and with the assistance of DOI is working with each of these agencies to discuss these formal collaborations. DHS monthly coordination meetings with FDNY have resumed. This recommendation will be discussed with both HPD and DOB and request will be made for them to enter into MOU's with DHS by the spring of 2015.

RECOMMENDATION #4F: DHS should immediately create a position of Internal Compliance Monitor and staff it with auditors/inspectors who audit and inspect facilities with outstanding building code and fire code violations.

- Working in conjunction with the liaisons from the respective agencies, the Internal Monitor should obtain lists of open violations and track their progress, i.e. compliance dates, fines, and whether they are in default.
- The Internal Monitor should then examine those buildings with chronic violations and review their performance data, i.e. average length of stay, placement targets, and complaints by clients.
- If those facilities are failing both in maintaining a safe and sanitary facility and in providing adequate social work, the Internal Monitor should perform a financial audit of that provider and report their findings to DOI.

Agency Response: DHS agrees with this recommendation and is creating a new Regulatory Compliance Unit within the Legal Affairs Division. This unit will work closely with the Family Services division and the Maintenance & Repair Unit within the Administration Division to ensure that corrective action plans are submitted and implemented in a timely manner, and outstanding issues are brought to closure. To the extent that corrective actions fail to be implemented or violations go unclosed during the regular review process, this unit will be responsible for addressing such issues of non-compliance and will use legal, financial and other tools available to ensure compliance.

FINDING #5: Even City-owned shelter buildings are not penalized, either civilly or criminally, for unresolved violations cited in DHS shelters.

- Currently there is no incentive for the City to fix violations on City-owned property.

RECOMMENDATION #5A: The City should conduct annual publicly available audits of City-owned shelter care facilities.

- Facilities that do not meet standards should be subject to financial penalties.

Agency Response: DHS agrees with this recommendation, and DHS' Audit Office will lead this work and begin auditing our City-owned shelter facilities beginning in FY 2016. DHS will assess the capital and maintenance needs of its city-owned buildings and develop cost estimates for each building. We will thereafter request funding from OMB to address these needs in the fourth quarter of FY 2015.

DHS is implementing a number of new initiatives that can go far in abating this crisis. DOI supports these initiatives. But more needs to be done. DOI looks forward to reviewing DHS' reform plans and its implementation of the reforms necessary and stands ready to assist in whatever way relevant to this process.

ENDNOTES

¹ A CO verifies that a building has passed a number of inspections as to fire safety, plumbing, electricity, etc., and is suitable for occupation for a stated purpose.

² According to DHS officials, Auburn and Catherine will now be used as a shelter for Adult Families only.

³ DHS' application to use Flatlands as a family shelter despite this expiration was denied in 2009.

⁴ At the time of the DOI inspections, DHS did not perform RSRI on cluster sites.

⁵ See pages 2-3, *infra*.

⁶ With the exception of day care and recreation centers if the facility is unable to conform to that requirement because of size and/or construction requirements.

⁷ DHS Shelter Census, <http://www.nyc.gov/html/dhs/downloads/pdf/dailyreport.pdf>. (as of 2/26/15).

⁸ DHS defines families with children as "families with children younger than 18 years of age, pregnant women, and families with a pregnant woman." NYC Department of Homeless Service, Frequently Asked Questions, <http://www.nyc.gov/html/dhs/html/faq/faq.shtml> (last visited Jan. 22, 2015).

⁹ See Appendix A: a letter from DHS General Counsel Mark Neal to DOI dated 10/10/14 and a subsequent letter dated 1/12/2015, detailing DHS' current reform platform.

¹⁰ Commissioner Peters thanks DHS Commissioner Gilbert Taylor, DOB Commissioner Rick Chandler, FDNY Commissioner Daniel A. Nigro and HPD Commissioner Vicki Been and their staffs for their cooperation with and assistance in this investigation, with a special thanks to DOB inspectors Ross Hoffman and Michael Geraci and FDNY inspector Andrew Dushynskiy.

Commissioner Peters gratefully acknowledges the work of DOI's Office of the Inspector General for DHS, which conducted this investigation, including Special Investigators Daniela Fernandez, Alexander Dillon, Nils Graham and Katerina Kurteva, Assistant Counsel Kristin DiFrancesco, Deputy Counsel Christos Hilar, Assistant Inspector General Bradley Howard, and Deputy Inspectors General John Bellanie, Kim Ryan, and Edward Richards, with assistance from intern Angela Rodriguez and Legal Fellow Geoff Crary, under the supervision of Inspectors General Shelley Solomon, John Tseng, and Milton Yu, and Associate Commissioner Susan Lambiase, with important contributions from Chief of Investigations John Kantor and First Deputy Commissioner Lesley Brovner.

¹¹ Consent Decree, *Callahan v. Carey*, No. 79-42582 (Sup. Ct., N.Y. Cnty. Aug. 27, 1981).

¹² This right is contingent upon an individual meeting eligibility requirements or showing that a physical, mental or social dysfunction prevents housing. *Id.* See Christine Robitscher Ladd, *Note: A Right to Shelter for the Homeless in New York State*, 61 N.Y.U.L. Rev. 272, 281-82 (1986).

¹³ Rights and privileges include the right to laundry, telephone, recreation, and the ability to leave and return to shelter each day and night. Consent Decree, *Callahan*, No. 79-42582.

¹⁴ *Eldredge v. Koch*, 98 A.D.2d 675 (N.Y. App. Div. 1st Dep't, 1983) (expanding the City's duty to provide shelter to homeless women).

¹⁵ *Boston v. City of New York, et al.*, No. 08-402295 (Sup. Ct., N.Y. Cnty, 2008) (expanding the right to shelter to all eligible homeless families with children).

¹⁶ According to DHS officials, a Tier II look-alike functions like a Tier II facility except, unlike a Tier II facility, it is not licensed by the New York State Office of Temporary and Disability Assistance ("OTDA"), usually because it lacks a recreational center and/or daycare facilities onsite.

¹⁷ "[DHS] shall provide case management services to all persons assigned to stay at the department's facilities or the facilities of organizations contracting with the department who are either waiting for the department to determine their eligibility for shelter or are receiving such shelter. Such case management services shall include, but not be limited to, assistance obtaining (a) medical treatment, (b) federal, state and local government documents including, but not limited to, birth certificates, marriage licenses, and housing records, and (c) food, medicine and other necessary

supplies; and shall address issues such as domestic violence, child abuse and mental illness, when needed.” N.Y. Admin. Code § 21-314 (Lexis 2014).

¹⁸ 18 NYCRR § 900.2(c)(2) (LexisNexis 2014).

¹⁹ According to a list of the FWC Tier II shelters and their contract status as provided to DOI by DHS on 11/14/14.

²⁰ The name “hotel” is a term applied to a particular building type – generally, a building that was in prior use as a hotel that DHS converted to shelter use – but may also be used to denote a building with similar facilities. Many of the “hotels” are single residence occupancies (“SRO”s), but some are also residential buildings similar to cluster apartments.

²¹ According to a list of the FWC hotel shelters and their contract status as provided to DOI by DHS on 11/14/14.

²² 18 NYCRR § 352.3(iv)-(viii) (LexisNexis 2014). (a listing of Code requirements for hotels to operate as homeless shelter facilities). For example, hotels run as shelters must maintain and inspect the electrical system; maintain plumbing and plumbing fixtures; maintain and inspect heating, ventilation and air conditioning systems; perform a regular vermin control program; and ensure that entrances, exits, steps and walkways are kept clear of garbage, ice, snow and other hazards.

²³ Cluster sites were formerly known as “scatter sites.” Cluster sites are considered a “shelter substantially similar to a house or an apartment, . . . which includes individual private cooking areas and private bathrooms,” 18 NYCRR § 900.1 (LexisNexis 2014), and are not governed by standards set forth under Part 900. However, the State, through the Office of Temporary and Disability Assistance (“OTDA”), maintains oversight through DHS.

²⁴ According to a list of the FWC cluster programs and their contract status as provided to DOI by DHS on 11/14/14.

²⁵ The Code applies to “any facility providing shelter and services to homeless families which: (1) shelters ten or more homeless families; (2) is operated by a local social services district or receives payment from such district for the provision of shelter and services to homeless families; and (3) is not a hotel or motel, or a facility which provides families with shelter substantially similar to a house or an apartment, and which includes individual private cooking areas and private bathrooms.” 18 NYCRR § 900.1 (LexisNexis 2014).

²⁶ For example, every Tier II family shelter must have an operational plan that contains, among other things, “a certificate of occupancy and building descriptions including type of construction, planned renovations, and room layouts with dimensions” and “fire safety measures and emergency and disaster plan.” 18 NYCRR §§ 900.3(b)(1)(xvii), (xviii) (LexisNexis 2014). The Code also mandates that Tier II family shelters also comply with all applicable state and local laws related to buildings, construction, fire prevention, plumbing, heating and electrical systems, kitchen and food service, sanitation and maintenance and health and safety. 18 NYCRR § 900.5 (a) (LexisNexis 2014). Shelters are also required to keep inspection certificates on premises and available for inspection. *Id.* at (b). While the Code does not mandate a specific inspection schedule, DHS must ensure that its family shelters comply with all City regulations regarding safety, building and fire inspections. *Id.* The Code also requires that Tier II facilities conduct and supervise facility evacuations and periodic evacuation drills. 18 NYCRR § 900.11(a)(7)(i-iii) (LexisNexis 2014). Additionally, Tier II shelters are required to have procedures for admissions and a plan for providing needed care, services and support of children and families, including ensuring that the children are attending school. 18 NYCRR §§ 900.3 (b)(1)(v)-(vi), (vii), (ix), and (x) (LexisNexis 2014). Within ten days of placement into a Tier II facility, families must be provided with a written services plan designed to help the family achieve permanent housing. *Id.* at 900.10 (c)(1)(i). The services plan must be reviewed with the family biweekly and revised as necessary. *Id.* at § (c)(1)(ii). Residents must also be provided with assistance in locating and applying for adequate housing, securing necessary supportive and social services programs and any necessary psychiatric and mental treatment. *Id.* at § (c)(2)(ii)(b). Child care also must be provided, either on or off-site. *Id.* at (c)(5). Congregate shelters for homeless pregnant women must include adequate prenatal and pediatric care. *Id.* at (d). All facilities must also include, at a minimum, a sleeping area, access to three meals a day, adequate supervision and health services. 18 NYCRR § 900.2(c)(2) (LexisNexis 2014).

²⁷ See Appendix A. According to a letter to DOI from DHS dated 1/12/2015, DHS inspectors are scheduled to complete initial RSRI's on 48 cluster sites by January 31, 2015. Upon completion of these inspections, approximately 40% of the cluster units will have been inspected.

²⁸ As noted above, there are no contracted hotel shelters.

²⁹ During the inspections DOI interviewed various clients and shelter staff to obtain the procedures for fixing issues in the building. DOI was informed that clients are to notify their caseworker, the caseworker notifies the building management, management then corrects the issue usually through the superintendent, unless the correction requires an outside vendor.

³⁰ See Appendix B. Tier II Contract: Appendix B, Article XII: Emergencies, Safety and Security, and Facility Access. § 12.02 Safety and Security.

³¹ *Id.* at Article XIII: Environmental Standards § 13.01 Environmental Standards (B).

³² *Id.* at § 13.03: Operation and Maintenance.

³³ *Id.*

³⁴ See Appendix C: Cluster Program Contract: Part 1: Article 3: Base Services, § (N) Building Management (the cluster contractor is responsible for “the preventative, daily, corrective, and emergency maintenance of the Facility and all exterior, interior and structural repairs to the Facility [and] curing all violations and deficiencies issued against the property after the commencement of the Agreement.”)

³⁵ *Id.* at § (K) Residential Units and Facility Supervision.

³⁶ *Id.*

³⁷ *Id.*

³⁸ *Id.* at § (N) Building Management. The Contractor shall also “comply with [DHS]'s violation protocol, a copy of which shall be provided to the Contractor prior to the commencement of the Agreement.” *Id.*

³⁹ According to DHS, the City has not pursued a breach of contract in court.

⁴⁰ See Appendix B: a sample Tier II contract; See Appendix C: a sample cluster program contract.

⁴¹ The City of New York Office of The Comptroller, Internal Control and Accountability Directives, Directive 24 - Agency Purchasing Procedures and Controls (Mar. 14, 2014), http://comptroller.nyc.gov/wp-content/uploads/2014/03/Directive-24_PurchasingProcedures.pdf.

⁴² As per DHS, there are no written agreements for non-contracted sites; rather, the shelter operators simply submit monthly invoices to DHS for payment.

⁴³ Recently, DHS experienced difficulty implementing a rate cut on a non-contracted shelter provider receiving what DHS has described as well above market rates. According to DHS officials, when the agency announced the rate cut, Aguila, the provider for the Bronx Annex cluster, argued that there would be insufficient funding to provide social services to its non-contracted cluster programs, and refused to do so. Then, Aguila agreed that starting October 1, 2014, it would resume social services for the 173 remaining non-contracted cluster units (the others were moved into an Aguila cluster site with a contract). In October, Aguila stated that it still lacked the funding to provide social services under the *per diem* amount. DHS engaged Aguila in a series of meetings to attempt to work those services into the *per diem* amount. Unable to agree, DHS is now finalizing plans to connect the 173 families at the Aguila non-contracted cluster programs with a new social services provider. These families are now being provided social services through Acacia, another NFP provider. Had the rate been set as part of contract negotiations, arguably DHS would have been in a stronger position to set market rates at the outset.

⁴⁴ According to DHS officials, in addition to the formal MTE and RSRI, shelter staff at each contracted and non-contracted shelter site are also required to conduct bi-weekly health and safety inspections of each family unit. Program Administrators (“PA”s) also visit shelter facilities approximately three to four days in a week. Staff at shelters for families with children are also required to conduct weekly health and safety inspections for residences that are occupied by clients with an open Administration for Children’s Services (“ACS”) case, have a child under six months old, or are long-term stayers. (According to the MTEs, long-term stayers are those families that have been in the shelter system for more than nine months.) Family shelter staff must ensure that all deficiencies noted in these inspections are corrected. Shelter providers are also required to prepare independent living plans with clients, to facilitate the clients’ permanent departure from shelter. PAs assigned to a facility review the plans and are supposed to discuss any issues with the caseworkers.

⁴⁵ See Appendix D: a copy of the MTE overview sheet describing each category. The eight categories are: Apartment Fitness Report; Physical Plant Review; Social Services/Program Review & Housing Target Placement Review;

Critical Files Review; Staff Appropriateness and Continuity; Food Service Report (where applicable); Security Plan Report; and Regulatory Compliance/Oversight Audits.

⁴⁶ According to DHS officials, DHS is requesting funding to implement interim inspections between MTEs. If implemented, a DHS inspector will perform a follow-up visit 30 to 60 days after the inspection to determine if the CAP has been completed. Any items that have failed to be corrected will be recorded and a follow-up report will be sent to the shelters. Sites that have scored below Satisfactory (Marginal and Unsatisfactory) will be placed into an enhanced inspection cycle until their score is above satisfactory for two consecutive inspections. To implement this initiative, DHS is looking to create a sub-unit for this purpose.

⁴⁷ According to a DHS official, the Cluster Inspection Unit within Housing Supportive Services (“HSS”) addressed certain HPD, DOB, and Department of Health and Mental Hygiene violations; namely, lead paint violations (unit specific), current vacate orders (unit or building specific), and ongoing comprehensive litigation (building specific) which HPD had commenced against the landlord. If any of these conditions existed, the Cluster Inspection Unit would immediately notify Housing Emergency Referral Operations (“HERO”), tracking database for DHS, so that the unit would be taken offline and the families would be transferred to another unit. At the conclusion of a cluster unit inspection, the inspector would provide a copy of the inspection report to a representative of both the provider and the landlord.

⁴⁸ The RSRI were formerly conducted by the Facility Maintenance and Development (FMD) division.

⁴⁹ See Appendix A. According to DHS officials, DHS expanded the RSRI process to include cluster-based units in order to improve conditions and establish standards of what the conditions at the cluster shelters should be.

⁵⁰ RSRI are conducted through the use of an 18-19 page form requiring answers to 346 questions falling into the prescribed categories.

⁵¹ This category examines whether the facility is free of dirt, debris, marks and stains.

⁵² This category identifies broken or worn items, such as water faucets, window screens and guards, light switches and fixtures, throughout the facility.

⁵³ This category is a review of administrative logs and records that include fire drills, facility violations and inspections required by the FDNY, DOB, New York State and other oversight agencies.

⁵⁴ See Appendix E: a sample RSRI sheet which contains the scoring methodology. Scores are based upon an analysis of the 346 questions, each of which is ranked into one of five scores (excellent, good, satisfactory, needs improvement and less than satisfactory) and into one of three groups (cleanliness, integrity and management).

⁵⁵ See Appendix E. An Unsatisfactory is scored when a building, building component or individual item is non-functional, or in the case of cleanliness, when dirt, debris or graffiti is discovered in all parts of the facility during the inspection for the item being scored.

⁵⁶ The CAP is annexed to the RSRI.

⁵⁷ Failing is a rating of less than 70.

⁵⁸ If the facility is City-owned, the provider is still responsible for daily maintenance. However, capital projects would be handled by the City.

⁵⁹ See *supra* note 1.

⁶⁰ DOI also reviewed contracts, RSRI and MTEs, and received informational orally from DHS officials.

⁶¹ Auburn has since been converted to an adult family facility. According to DHS officials, DHS is in the process of also converting Catherine to an adult family-only facility.

⁶² HPD did not participate in this inspection.

⁶³ “A CO of a building or structure shall certify that such building or structure conforms to the requirements of all laws, rules, regulations and orders applicable to it and shall be in such form as the commissioner shall direct.” NYC Charter §645(b)(3)(d). If planned construction will create a new building, or will result in a change of use, egress, or occupancy for an existing building, a new or amended CO is necessary. A new building cannot be legally occupied

until either a final or a temporary CO has been issued. NYC Buildings, Certificate of Occupancy, http://www.nyc.gov/html/dob/downloads/pdf/co_factsheet.pdf (last visited Jan 22, 2015).

⁶⁴ For example, Tier II facilities typically require stricter fire safety procedures such as sprinkler systems, fire alarm systems, evacuation plans, and fire guards. Hotels have similar fire safety requirements as Tier IIs. Cluster apartments, which are residential buildings, generally do not have these same requirements (depending on the year the building was built and the size of the building).

⁶⁵ Criminal summons may be issued by FDNY for failure to comply with a previously issued violation. The person named on the summons is summoned to appear at NYC Criminal Court.

⁶⁶ “Immediately hazardous violations are those specified as such by the New York City Construction Codes, or those where the violating condition poses a threat that severely affects life, health, safety, property, the public interest, or a significant number of persons so as to warrant immediate corrective action, Immediately hazardous violations shall be denominated as Class 1 violations.” 1 RCNY §102-01(b)(1) (2008).

⁶⁷ See Appendix F: a complete list of city violations issued at each of the 25 buildings inspected.

⁶⁸ The average length of stay for families in clusters is 479 days, compared to 433 days in Tier IIs and 415 days in hotels.

⁶⁹ According to DHS, social services is now being provided by another provider, Acacia.

⁷⁰ Three of the cluster buildings inspected were part of this cluster program.

⁷¹ MTE for Bronx Annex Cluster for the time period of January through June 2013.

⁷² The Bronx Neighborhood Annex program as of 11/17/2014 now comprises only 15 buildings.

⁷³ DOI’s review of the family’s case file revealed that this family had an extensive ACS history.

⁷⁴ Winnie Hu and J. David Goodman, *4-Year-Old’s Death Focuses Attention on Two New York City Agencies*, N.Y. Times (May 1, 2014), http://www.nytimes.com/2014/05/02/nyregion/4-year-olds-death-focuses-attention-on-two-new-york-city-agencies.html?_r=0.

⁷⁵ This cluster program was criticized by DHS in its 2013 MTEs for its continued failure to monitor ACS cases. “ACS tracking forms were not found up to date in the case files, and case notes failed to document follow up by staff with ACS service providers of whether clients were in compliance with ACS mandates. Shelter staff must be trained in understanding their role as mandated reporters and protocols.” MTE for Bronx Annex Cluster for the time period of July 2013 – December 2013.

⁷⁶ See Appendix F for a full description of the violations issued on this location.

⁷⁷ Not only did DHS determine in both 2013 MTEs that the program needs increased extermination for the units, but that a “review of the extermination records show lack of consistent service, . . . specifically Tinton Ave – last record was dated 11/15/12 and most of the forms were unreadable.” MTE for Bronx Annex Cluster for the time period of July 2013 – December 2013.

⁷⁸ According to the 2013 MTE for the period of January through June, DHS stated that the hallways must be repainted and were found to be dirty or marked with graffiti and there was garbage on the lobby floor.

⁷⁹ In the same MTE, the building was cited for not securing the lobby door.

⁸⁰ Also noted in the MTE was the emergency lighting not working, for which FDNY issued a violation at the time of DOI’s inspection.

⁸¹ 18 NYCRR § 900.12 (e)(11) (LexisNexis 2014). Tier II contracts also routinely require that a contractor “provide minimum furnishings for each unit in accordance with §900.12 of the Part 900 Regulations.” See Appendix B at Appendix B, Article XIII, § 13.01 Environmental Standards (A).

⁸² 18 NYCRR § 352.3(g)(4) (LexisNexis 2014) (emphasis added).

⁸³ See Appendix C: Cluster Program Contract: Line Item Budget Form.

⁸⁴ See Appendix G: list of shelters inspected that have large outstanding fines for City-issued violations.

⁸⁵ See Appendix F: a complete list of city violations issued at each of the 25 buildings inspected.

⁸⁶ According to HPD's and DOB's online databases all of these buildings have open violations. The five buildings combined have a total 76 open DOB violations and 387 open HPD violations, with East 174th Street topping the list with 149 open HPD violations. (As of 12/18/14).

⁸⁷ In May 2014 DHS informed DOI that the average per diem rate for a non-contracted shelter (hotel and cluster) was \$92 a night (\$2,760 monthly) which would cover space and minimal social services.

⁸⁸ Renewal contract for Brooklyn Acacia Cluster formerly known as Basic Housing for the period covering July 1, 2012 through June 30, 2013. Currently, for the Acacia cluster, DHS is now paying \$95.59 per night (\$50 per day for rent and \$45.59 per day for social services).

⁸⁹ http://www.trulia.com/real_estate/Bronx-New_York/market-trends; http://www.trulia.com/real_estate/Brooklyn-New_York/market-trends/.

⁹⁰ See Appendix A.

⁹¹ Shelter staff at Mike's House and Mike's House Annex, where this client lived, was aware that DOI would be conducting an inspection.

⁹² According to DHS, allowing for air conditioning is based on the potential of overburdening the electrical grid of the building. DHS permits air conditioning in certain buildings as a reasonable accommodation for the family.

⁹³ See Appendix F: full list of violations.

⁹⁴ According to a list of the FWC hotel shelters and their contract status as provided to DOI by DHS on 11/14/14.

⁹⁵ See Appendix G.

⁹⁶ "The CO shall certify that such a building or structure conforms to the requirements of all laws, rules, regulations and orders applicable to it." NYC Charter § 645(b)(3)(d).

⁹⁷ An LNO may be issued if no CO is available (prior to 1938 DOB did not typically require a CO), or if the building has a different use than that listed on the CO. A LNO may be issued if the proposed/actual use belongs to the same Use Group (UG) as defined by Zoning Resolution and the same Occupancy Group (OG) as defined by the 2008 Building Code and the occupancy load and egress is substantially unchanged. A LNO cannot be issued for a change in a UG and/or OG, which would require the filing of an Alteration Type 1 (ALT-1) application and a new CO. NYC Buildings, Letter of No Objection or Letter of Verification Application, http://www.nyc.gov/html/dob/downloads/pdf/lno_lov_form.pdf (last visited Jan. 22, 2015); See also NYC Admin. Code §28-118.3.2.

⁹⁸ DOI and DOB contacted the Department of Health and Mental Hygiene ("DOHMH") to inquire whether this daycare had a proper license. According DOHMH, this type of daycare is not considered a child care service. Since the Code requires shelters to provide services to residents, including watching their children while residents seek housing, education or other services, the shelters do not need a permit to provide that service and are not inspected or regulated by the DOHMH. It is the determination of OTDA and DHS that these children are being "watched in their homes."

⁹⁹ All of the buildings with CO issues are City-owned property. There are no financial penalties for City-issued violations on City-owned buildings. As per *City Agency Violations Resolutions* power point presentation obtained from DOB, City agencies are never issued a criminal summons and are exempt from Environmental Control Board hearings.

¹⁰⁰ Regent's scores for the two inspections conducted in 2013 were a 74 and a 71.

¹⁰¹ See Appendix H: list of Life Safety Hazards discovered at DHS RSRI inspections with corresponding FDNY and DOB violations where applicable.

¹⁰² In 2011, a fire actually erupted on the ninth floor in this very building, injuring twenty-one people, including five firefighters. CBS News, *Several People Injured in Early Morning Fire on Upper West Side*, (Apr. 15, 2011 1:49 PM), <http://newyork.cbslocal.com/2011/04/15/several-people-injured-in-early-morning-fire-on-upper-west-side>.

¹⁰³ Hatch Mott McDonald, *Facility Condition Assessment Report* (May 14, 2012).

¹⁰⁴ RSRI for Regent Family Residence for 5/14/14.

¹⁰⁵ According to DHS officials the initial bid cost for the stair work was \$515,000 and there was \$250,000 amendment for additional work. The amendment work has been completed and DHS is awaiting the final cost from the contractor so that the amendment can go to the ACCO's office.

¹⁰⁶ At the time of DOI's inspection, DHS did not conduct RSRI's on cluster sites. Also, DOI was informed by DHS that although Corona is a Tier II, it was improperly categorized as a cluster and an RSRI was not performed as required.

¹⁰⁷ At the time DOI began its review in April 2014, Mike's House had received a score of 69 on its 7/24/2013 inspection. However, on its latest RSRI conducted on 7/11/14, it received a score of 76.

¹⁰⁸ See Appendix E. "Needs Improvement" is a condition where a building, building component or individual item needs major repair in order to function.

¹⁰⁹ See *supra* endnote 54.

¹¹⁰ See Appendix H.

¹¹¹ See Appendix B: a sample of a Tier II contract; See Appendix C: a sample cluster program contract.

¹¹² See Appendix A.

¹¹³ "The Contractor shall provide unarmed guard services in accordance with its security plan. They shall at all times conduct themselves in a professional manner, and shall receive training to work with and provide security to residents of the Program." See Appendix C, Cluster Contract: Article 3: Base Services: § (L) Security.

¹¹⁴ 18 NYCRR §900.11(a)(3).

¹¹⁵ *Id.* at (b)(1).

¹¹⁶ See Appendix C: Cluster Contract: Article 3: Base Services, § (D) Ongoing Case Management and Recreation.

¹¹⁷ See Appendix G: chart of buildings with open judgments for outstanding violations.

APPENDICES

Appendix A: Letters from DHS to DOI re improvements



Gilbert Taylor
Commissioner

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October 10, 2014

Susan Lambiase
Associate Commissioner
NYC Department of Investigation
80 Maiden Lane, 17th Floor
New York, New York 10038

Dear Ms. Lambiase:

As discussed at our October 3, 2014 meeting, I offer the following overview of the Department of Homeless Services' ("DHS" or the "Agency") reform efforts, led by Commissioner Gilbert Taylor, to improve the delivery of homeless services and essential shelter since the beginning of the new administration.

DHS is committed to preventing homelessness whenever possible and to providing short-term, emergency shelter for individuals and families who have no other housing options available to them. As New York City is the only right to shelter jurisdiction in the country, DHS administers "on demand" shelter programs.

In January 2014, shortly after joining DHS, Commissioner Taylor began examining the Agency's work. Commissioner Taylor quickly identified the need to assess its shelter stock, provider performance, and service delivery models. Specifically, the Commissioner assessed the systems in place for bringing on shelter capacity, the quality and type of shelter units the Agency brought into its portfolio, the processes and evaluation tools used for addressing shelter conditions; as well as the established expectations for addressing incidents impacting homeless clients and/or conditions in shelters.

This letter details many of the specific measures that DHS has taken over the past several months to bring the Agency in line with the new administration's vision for this work.

These efforts include:

- improving shelter conditions;
- reducing the agency's reliance on cluster capacity (including reducing rate for the same);
- only bringing on shelters pursuant to a procurement and contract;
- bringing non-contracted capacity to contract as opposed to billing; and
- addressing incidents in our family shelters to improve the client experience.

Improving Shelter Conditions and Reducing the Agency's Reliance on Cluster Units

Historically, the Agency's Facilities, Maintenance and Development ("FMD") division was the lead for shelter maintenance and repair and long-term capital projects. This division was also responsible for bringing on new capacity in the system. At the beginning of the administration it was immediately assessed and determined that the Agency needed to have a more focused approach to conducting routine maintenance of its shelters, both to improve conditions and to establish standards of what the conditions should be. With this in mind, the Maintenance and Repair ("M&R") unit from FMD was repositioned into the Division of Administration under the leadership of a newly appointed Deputy Commissioner who has a strong record of managing facilities maintenance in New York City government.

Shifting the M&R function to Administration allowed DHS to consolidate functions and to improve oversight of conditions in shelter. Moreover, additional resources were given to M&R, including 2 new inspectors (for a total of 6) dedicated to physical plant inspections. In FY 14, the Agency also expanded the scope of the Routine Site Review Inspection ("RSRI"), a detailed inspection tool with 40 key points that assessed internal, external and structural conditions of DHS shelters. In the beginning of this year, DHS amended the RSRI to highlight safety concerns with a stronger emphasis on compliance with fire safety, lead paint hazard assessment, as well as mechanical and facility-based systems requirements. The RSRI was amended so that the conditions identified under those categories would require immediate correction and written confirmation of the same from the affected shelter within one week. DHS also expanded its inspection process to include cluster-based units.

Currently, M&R performs RSRI reviews for each shelter twice a year. Where RSRI results demonstrate the need for further action, providers must develop and submit a Corrective Action Plan (CAP) to DHS staff. The DHS Family Services Division and staff in the M&R unit have begun monitoring CAP implementation more closely. Program administrators and program analysts in the Family Services Division are continuously in communication with the providers/owners of shelter facilities to ensure that necessary repairs are completed. Moreover, RSRI's are tied to the providers' annual VENDEX score constituting 13% of the overall VENDEX rating. M&R is scheduled to complete RSRI reviews on the entire cluster portfolio by January 31, 2015.

In addition to the RSRI, bi-annually, Family Services staff completes the Monitoring Tool Evaluation (MTE) to assess the performance of each contracted and non-contracted shelter facility, including cluster units. The MTE evaluates housekeeping, safety factors, social services/program services, housing placements, and includes a verification of unit occupancy.

To further improve its oversight of shelter conditions through the inspection process DHS will submit a new needs request to the Mayor's Office of Management & Budget ("OMB") requesting funding for 21 additional inspectors to enable the Agency to perform RSRI inspections on all of DHS' cluster capacity. The inspectors will also conduct re-inspections to ensure that CAP requirements are being addressed in a timely manner.

In addition to our focus on routine maintenance and repairs, the Agency is also focused on long-term improvements through its capital program. DHS secured approximately \$28M in FY14 and FY15 capital funding for shelter renovations, upgrades and improvements. The \$28M is earmarked for specific projects including:



**Department of
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- Sewer line replacements
- Roof replacements
- Water tank replacements, elevator upgrade and creation of a new diversion center
- Roof and exterior restoration
- Bathroom renovations
- CCTV installation

In July 2014, DHS implemented tailored rate cuts to specific cluster providers in the family shelter system toward the end of reducing and right sizing the rates across the entire cluster portfolio. At this time, DHS is committed to using stand-alone Tier II shelters with robust social services for the Families with Children who are in our system. Since July 2014, DHS has opened 9 new stand-alone family shelters for a total of 405 additional units. Aguila, Inc. is one cluster provider of particular note whose inventory of apartments we have begun to closely inspect. In July and August of 2014, DHS conducted assessments of 433 Aguila cluster units in 21 buildings. In August of 2014, DHS decided to relocate shelter clients out of 41 Aguila cluster units due to substandard conditions. We actively moved families into permanent housing and re-sheltered some families into more appropriate settings.

Committing to bringing on new Shelters pursuant to a procurement and contract

On July 1, 2014 the division of Facility Maintenance and Development (FMD) was disbanded and the new division of Capacity Planning & Development (“CPD”) was created to have the primary responsibility for bringing on new shelter capacity for the Agency. CPD is only bringing on capacity through the City’s procurement processes, resulting in formalized contractual relationships between providers and DHS. Having contracted capacity will enable DHS to better set expectations for facility conditions and the delivery of social service programming at these locations. This will also enable us to hold providers accountable for outcomes related to their work with clients in shelter.

DHS is committed to acquiring new capacity through the City’s procurement process, which results in formalized contractual relationships. This allows the Agency to better establish expectations for facility conditions and social services programming; and to hold providers accountable. Moreover, DHS and City Hall have developed an aggressive work plan to bring all non-contracted cluster capacity to contract in 2015.

Regrettably DHS currently has a significant number of non-contracted units for Adult Families and Families with Children in the Agency’s portfolio. The Agency has begun assessing the suitability of all non-contracted units for continued shelter use. That assessment will determine which units will be brought to contract. Unsuitable units will be removed from the portfolio through an appropriate and well-managed close-down plan.

Non-Contracted Capacity already brought to Contract

Since January 2014, DHS has brought on contracted capacity totaling 1,005 units for Families with Children and Adult Families. The Agency recently agreed to proceed to contract with 225 cluster units within the Aguila portfolio that are appropriate for continued shelter use. It is estimated that bringing the remainder of all non-contracted units to contract will cost somewhere between \$28.3 million and \$38.3 million.



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Homeless Services**

Incidents in Shelter

DHS uses a three-tier priority system to categorize the urgency of incidents throughout the system. Priority One Incidents are the most serious and urgent. Priority One incidents include:

- Homicide, suicide, or death on site
- Attempted homicide, attempted suicide, assault resulting in life-threatening injury, or accident resulting in life-threatening injury (including drug overdose)
- Use of a firearm
- Rape, attempted rape, or sexual assault
- Arrest for alleged child abuse or emergency transport of child for medical treatment due to suspected child abuse
- Fire, disaster, or other environmental concerns that involve a life-threatening injury or the evacuation of an entire site as directed by emergency personnel or FDNY response.
- Riot, bomb threat, hostage take/abduction, or missing children
- Unscheduled on-site presence of the press or elected officials
- Assault or threatening behavior that results in life-threatening injury or accident resulting in life-threatening injury (including overdose)
- Arrest of DHS staff on site
- Heating, water, electrical failure, or other environmental issue (i.e. asbestos, lead, radon), that is expected to last more than 4 hours

DHS and the provider agency staff must call the DHS Program Administrator within 30 minutes of becoming aware of a Priority One incident. The Program Administrator works with the DHS Operations Desk to alert all senior level and executive level staff of the incident. The incident is entered into the CARES reporting system within 24 hours of it taking place.

DHS has in place a multi-year \$41M contract for additional security services for our shelters. In addition, DHS Peace Officers will be assigned to our directly run sites - Flatlands Family Residence and the Jamaica Family Shelter. The DHS Police Task Force will also make unannounced visits to certain facilities as necessary. Last, DHS will continue to survey, inspect and quality assess our provider agencies on the security measures that they have in place at their sites to ensure the safety and well-being of staff and clients.

Next Steps and Looking Forward

As detailed above, DHS has taken a number of very significant steps to address many concerns within the shelter system at this time. The Agency has increased its focus and attention on the various parts of our work and has added some additional resources needed to improve conditions across the system. DHS is committed to fulfilling our mandate to provide shelter in NYC with greater transparency and accountability in every way. We believe that the steps that we have taken will strengthen our work and improve outcomes for our clients. We look forward to continuing our

NYC
Department of
Homeless Services

discussions with you to further improve our system, and to best meet the emergency needs of the thousands of New Yorkers who we serve.

Sincerely,



Mark L. Neal

Copy: Gilbert Taylor



Gilbert Taylor
Commissioner

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REVISED/January 22, 2015

January 12, 2015

Susan Lambiase
Associate Commissioner
NYC Department of Investigation
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New York, New York 10038

Dear Ms. Lambiase:

As a follow-up to my letter dated October 3, 2014, I offer the following update on the Department of Homeless Services' ("DHS" or the "Agency") reform efforts, led by Commissioner Gilbert Taylor, to improve the delivery of homeless services and essential shelter since the beginning of the new administration.

These efforts include:

- improving shelter conditions;
- bringing on shelters pursuant to a procurement and contract; and
- addressing incidents in our family shelters to improve the client experience.

As you are aware, DHS is presently working on a number of initiatives toward improving our shelters and the lives of those in our care. Since October, we continue to make progress on our efforts.

Improving Shelter As you know, the Agency eliminated its Facilities, Maintenance and Development ("FMD") division. The Maintenance & Repair (M&R) unit was moved into the Administration division to consolidate functions and to improve oversight of conditions in shelter.

M&R's inspectors perform Routine Site Review Inspections ("RSRIs") for each shelter in the DHS shelter system twice a year, and are scheduled to complete initial RSRIs on the 48 cluster sites by January 31, 2015. These 48 sites were identified based on size and known deficiencies. Upon completion of these inspections, approximately 40% of the cluster units will have been inspected. Moreover, providers are now responsible for submitting responses to reviews to DHS within 30 calendar days; shortening the response time by just over 1 week. The previous practice allowed providers up to 30 business days. Additionally, DHS staff is currently working with FDNY through regular meetings to review fire safety violations. Staff continues to work diligently to inspect Agency facilities and to ensure that



providers address necessary maintenance, health and safety concerns that are found during inspections.

In addition, the Agency recently hired two new M&R inspectors, and is looking to hire another two, which will raise the inspector headcount to 10. And, to further improve its oversight of shelter conditions through the inspection process, DHS will submit a new needs request to the Mayor's Office of Management & Budget ("OMB") requesting funding for 19 additional staff for the inspections unit. This will enable the Agency to perform RSRI's on all of DHS' cluster capacity. The inspectors will also conduct re-inspections when necessary to ensure that any corrective action plans ("CAPs") are being addressed in a timely manner. Of the 19 staff, 11 are inspector lines with the balance to support budget analysis, reporting and violations tracking. We are submitting this for the January Plan.

RSRI Inspections from 10/10/14 to Present			
Bldg. Type	Inspections	CAP's Rvcd.	Re-Insp.
Adult	22	3	3
Family	33	8	19
Cluster	30	1	7
Total	85	12	29

Bringing on New Shelters Pursuant to Registered Contracts

On July 1, 2014, DHS disbanded the FMD division and created the new division of Capacity Planning & Development ("CPD") to have the primary responsibility for bringing on new shelter capacity for the Agency. CPD is only bringing on capacity through the City's emergency or standard procurement processes, as defined in the City's Procurement Policy Board ("PPB") Rules. This results in formalized contractual relationships between providers and DHS, and enables the Agency to better set expectations for facility conditions and the delivery of social service programming at these locations. This will also enable us to hold providers accountable for outcomes related to their work with clients in shelter. Since January 2014, DHS has brought on contracted capacity totaling 1,005 units for Families with Children and Adult Families.

Non-Contracted Capacity already brought to Contract

In addition to bringing all new capacity on pursuant to registered contracts, DHS is also committed to entering into registered contracts for its current non-contracted shelter capacity. In pursuit of this goal, the Agency recently agreed to proceed to contract with 225 cluster units within the Aguila portfolio that are appropriate for continued shelter use. It is estimated that bringing the remainder of all non-contracted units to contract will cost somewhere between \$28.3 million and \$38.3 million. DHS aims to have all non-contracted capacity going through the procurement process by June 30, 2015.

Incidents in Shelter

DHS uses a three-tier priority system to categorize the urgency of incidents throughout the system. Priority One Incidents are the most serious and urgent. DOI was added to the distribution list.

Next Steps and Looking Forward

As detailed above, DHS has taken a number of very significant steps to address many concerns within the shelter system. The Agency has increased its focus and attention on the various parts of our work and has added some additional resources needed to improve conditions across the system. We look forward to continuing our discussions with you to further improve our system, and to best meet the emergency needs of the thousands of New Yorkers who we serve. Some examples are as follows:

- Shelter Evaluation System

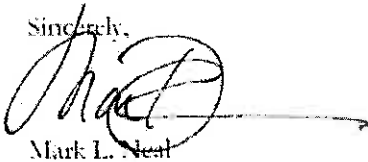
DHS is planning to implement a new system to better evaluate shelter operators based three (3) domains: Compliance, Quality and Outcomes. As part of the evaluation system, RSRI's will be used to score and rank providers. The evaluation will be used to identify those providers who need technical assistance to improve services, or in the event that technical assistance does not work, terminate contracts.

- Model of Shelter Practice

DHS proposes a four-stage model of practice to improve services to clients as well as to have uniform quality services and standards across the DHS system. With a uniform system, the evaluation of providers (as discussed above) can occur. The system will include a more rigorous use of the CARES electronic case management system coupled with a modified version of Critical Time Intervention (Services) and Rapid Rehousing. To tie the stages together, DHS will use Motivational Interviewing to make a cohesive model of practice as well as to make the culture at DHS more client-oriented.

DHS is committed to fulfilling our mandate to provide shelter in NYC with greater transparency and accountability. We believe that the steps that we have taken will strengthen our work and improve outcomes for our clients.

Sincerely,



Mark L. Neal

Copy: Gilbert Taylor

Appendix B: Tier II Contract (excerpt)

applicant's three (3) most recent prior employers, if applicable. The Contractor shall use its best efforts to obtain a response to such inquiries prior to placing employees on the payroll.

D. The Contractor shall require all prospective employees to complete an employment application. Such application shall include, but not be limited to, inquiries regarding prior criminal convictions, if any, the evaluation of which shall be in accordance with Article 23-A of the New York State Correction Law. The Contractor shall maintain documentation indicating compliance with this subsection D of Section 11.01 of Appendix B.

E. The Contractor shall submit to the Department a list of its key employees in accordance with the requirements of this Agreement, including but not limited to Article VI— Personnel Practices and Records. In addition to the information required to be provided under Article VI, the Contractor shall submit home telephone numbers and a full job description, including education and prior employment experience of all such key employees.

F. The Contractor shall have the final right of approval over the selection of the Director of the Facility and the Facility's Director of Social Services, which approval shall not be unreasonably withheld. If at any time the Department is of the opinion that either of these Directors is not performing satisfactorily, it shall notify the Contractor and the Director shall not work at the Facility.

Section 11.02 Supervision. The Contractor shall ensure that Staff's supervision of the Facility and its Clients complies with all applicable provisions of this Agreement, Department Policies and Part 900 Regulations.

Section 11.03 Monitoring and Evaluations of the Contractor. The Department shall monitor and evaluate the performance of the Contractor under this Agreement at such times and in such manner as the Department reasonably deems appropriate. If an independent program evaluation of the Contractor is performed, the Contractor shall provide the Department with a copy of such evaluation within ten (10) days after receipt by the Contractor.

ARTICLE XII — EMERGENCIES, SAFETY AND SECURITY, AND FACILITY ACCESS

Section 12.01 Emergencies and Other Incidents. The Contractor shall handle, report and document emergencies and other incidents in accordance with applicable provisions of this Agreement, Department Policies, including the Department's Criteria for Reporting Incidents, and Part 900 Regulations.

Section 12.02 Safety and Security. Staff shall implement safety and security procedures in accordance with other applicable provisions of this Agreement, Department Policies, and Part 900 Regulations, including § 900.11 and § 900.12 of those Regulations.

Section 12.03 Facility Access. Applicable Law requires the Department and its shelter providers to protect the confidentiality of those who apply for and receive shelter or other public assistance benefits. Accordingly, the Department established and the Contractor shall comply with the Department's Facility Access Procedure in order to maintain the confidentiality of Clients, and to ensure that the resources within the Department's family shelter system are used solely to further the Department's core mission of providing temporary emergency shelter and housing placement assistance to homeless families.

ARTICLE XIII — ENVIRONMENTAL STANDARDS

Section 13.01 Environmental Standards. The Contractor shall ensure that the Facility is in compliance with the environmental standards set forth in all applicable provisions of this Agreement, Department Policies, and Part 900 Regulations, including §900.5, §900.11 and §900.12 of those Regulations.

A. An appropriate unit shall be provided to each Family referred to the Facility. The Contractor shall provide minimum furnishings for each unit in accordance with § 900.12 of the Part 900 Regulations.

B. Staff shall conduct health and safety inspections of all Family units bi-weekly, except Staff shall conduct weekly inspections of the units of Families with newborns and/ or open ACS cases. Staff shall maintain documentation indicating their compliance with this subsection B of Section 13.01 of Appendix B, including findings and corrective action taken, subject to inspection by the Department.

Section 13.02. Use of Space. Space in the Facility shall be used exclusively for the purposes set forth in this Agreement.

Section 13.03 Operation and Maintenance. The Contractor shall operate and maintain the Facility in accordance with all applicable provisions of this Agreement, Department Policies, Part 900 Regulations, including § 900.12 of those Regulations, and all other applicable Laws.

A. Hiring of Superintendent/Maintenance Staff. The Contractor shall hire a qualified superintendent and maintenance staff for the Facility who have a satisfactory knowledge of building maintenance and meet the Department's experience requirements. The Department reserves the right to approve the candidate selected by the Contractor for the Superintendent position. The Contractor shall submit to the Department for review a copy of the selected candidate's resume. The Department shall notify the Contractor if the proposed candidate for Superintendent is acceptable within two (2) weeks of the submission. In the event the Department does not notify the Contractor within such two (2) week period that the proposed candidate is not acceptable, the proposed candidate shall be deemed approved by the Department to fill the Superintendent position.

B. Property Management Plan. The Contractor, not later than thirty (30) days after the execution of this Agreement, shall develop and submit to the Department for its written approval a draft Property Management Plan ("Plan"). The Plan shall outline the Contractor's strategy for handling emergency repairs, set forth a schedule for providing preventive maintenance, and describe how the Contractor shall meet its responsibilities and obligations described in this Section 13.03 of Appendix B. The Plan shall include procedures for inspecting and documenting all areas of the Facility on a regular basis. The Contractor, not later than thirty (30) days from the execution of this Agreement, shall also develop and submit to the Department for its written approval, an auditable system for recording and tracking all maintenance and repair functions. Upon approval from the Department, but not later than sixty (60) days from the execution of this Agreement, the Plan shall be deemed to be in full force and effect. The Plan shall serve as the guideline for the Contractor's maintenance of the Facility. Any changes to the Plan must conform to all requirements as set forth in this subsection B of Section 13.03 of Appendix B, including resubmission and approval of the Plan. Invoices related to the maintenance and repair of the Facility will not be processed without an approved Plan.

C. Maintenance/Repair Obligations.

1. The Contractor shall be responsible for the preventative, daily, corrective, interior, exterior, structural and emergency maintenance and repair of the Facility. The Contractor's obligations in this regard include, but are not limited to: the maintenance of all mechanical systems (including HVAC, boiler, hot water, emergency generator, elevator and fire safety) and the interior and exterior building components, including general plumbing, carpentry, electric, window screens, window glass, non-capital masonry, tile repair, door alarms, locks, grounds, equipment, and furnishings.
2. The Contractor shall only be responsible for repairs necessitated by client vandalism to the extent the vandalism was the result of the Contractor's negligent supervision of the Clients.
3. The Contractor shall be responsible for curing all violations and deficiencies issued against the building in which the Facility is located. The Contractor shall immediately notify the Department of any such violations and provide the Department with a corrective action plan for curing non-capital violations, including time frames for curing these violations, and written notice once these violations have been cured.
4. The Contractor shall consult with, and receive written approval from the Department before initiating any structural changes, including renovations and room reconfigurations, divisions or change in use.



Appendix C: Cluster Contract (excerpt)

- physical examinations, laboratory and tuberculin tests, inoculations and other appropriate treatment that can be requested either by the medical personnel performing the preliminary examination of the family, it should be noted in the agreement. Contractor shall not be responsible for the costs of such treatment or services.
2. The procedure for referring families for a complete medical history, physical exam and Brief Psychological Assessment within two (2) business days of arrival at the Facility.
 3. If a new client has recently (i.e., within the past month), received a full medical history, physical exam and Brief Psychiatric Assessment at a Department of Homeless Services single or adult shelter, they shall not need to be done again, unless otherwise indicated. However, the client must be referred to the medical provider for a full review of the findings in the aforementioned reports, within five (5) business days, arranging for ongoing monitoring or care of the conditions described.
 4. For clients already residing at the Facility, a medical history, physical exam and Brief Psychiatric Assessment, or a review of a these reports obtained in the past month, will be completed within the first twelve (12) weeks of operation.
 5. The procedure for referring families for the provision of additional screenings, physical examinations, laboratory and tuberculin tests, inoculations and other appropriate treatment when requested either by the medical personnel performing the preliminary health examination, or by the family.
 6. The procedure for alerting the Department immediately of communicable disease outbreaks, such as chicken pox, tuberculosis, etc, and responding in a timely an appropriate fashion as specified in Department protocols and Department of Health and Mental Hygiene regulations.
 7. The procedure for referral or transfer to an appropriate medical facility or to a shelter designed to accommodate their conditions (including written evidence of an established relationship), for family members who exhibit symptoms of a generalized systemic communicable disease, or a readily communicable local infection, either at the time of admission, or during their stay at the shelter, if such individuals cannot be properly isolated and quarantined in the facility.
 8. Arrangements for medications to be refrigerated, as necessary, and for facilities that store medical supplies, the arrangements for safekeeping such supplies.
 9. The proposed system for maintaining a family's health records indicating:
 - i. that a preliminary health examination has been performed and the results thereof for each family member;
 - ii. any special medical needs or conditions of the family members;
 - iii. the names and phone numbers of medical doctors to contact should an emergency arise concerning these conditions;
 - iv. dates of child immunizations.

K. RESIDENTIAL UNITS AND FACILITY SUPERVISION

An appropriate unit shall be provided to each family referred to the Facility upon intake. The minimum furnishings to be provided by the Contractor shall include one (1) bed per person, a lamp, bureau and table and two chairs. In order to assure a safe, comfortable environment for the clients, the Contractor shall provide initial housekeeping supplies for the resident's use while the units are occupied and maintain the Facility in a good state of repair and sanitation and in conformance with applicable State and City Laws, regulations and directions. The Contractor shall also comply with all applicable City and State regulations pertaining to the operation of this type of Facility. The contractor shall maintain the cleanliness of the entire Facility by cleaning public areas periodically (a schedule must be posted) and

residential units upon vacancy. Space in the Facility shall be used exclusively for the purposes set forth in this Agreement and for providing other services to the residents. A unit may be converted to a permanent apartment for a client provided the Contractor replaces the unit with a unit of similar size and location, with prior approval from the Department.

The Contractor will supervise the Facility by:

1. Conducting and supervising Facility evacuation procedures and holding periodic evacuation drills as follows:
 - a. the Facility must have a written plan detailing the procedures to be followed in caring for residents in the event of an emergency or disaster; all employees of the Program must be instructed about the emergency and disaster plan and of their responsibilities under such plan;
 - b. evacuation procedures outlining the method and manner in which residents and staff are to evacuate the Facility in the event of fire and other emergency must be conspicuously posted on each floor of the Facility.
2. Surveillance of the grounds, Facility, and activities of the residents to maintain the Facility in a safe and sanitary condition;
3. Instituting fire safety measures and arranging for fire safety training for Program staff and residents; fire drills must be held with staff and residents on a monthly basis, and a record of such drills must be maintained.

L. SECURITY

The Contractor shall provide unarmed guard services in accordance with its security plan, which is part of the Operational Plan and approved by the Department. Security guards shall be licensed by the State of New York. They shall at all times conduct themselves in a professional manner, and shall receive training to work with and provide security to residents of the Program. The Contractor may lock the Facility to control access and egress during specific nighttime hours. The Contractor must make arrangements allowing residents to receive visitors. The Contractor may set reasonable visiting hours and may limit visitor access to designated areas of the Facility. Such hours and location must be posted in a location accessible to residents and visitors. The Facility must have current fire certification posted at appropriate locations in the building.

M. REPORTING

1. The Contractor shall make monthly reports to the Department concerning the delivery of ongoing case management, including counseling and housing assistance services, health care, recreational services, security, operations and maintenance.
2. The Contractor shall call every day into the Department's designated number to specify a daily census noting families or persons that leave the Program and ones that arrive. The Contractor shall also provide the Department with a list of vacant units.
3. If an independent program evaluation of the Contractor is performed, the Contractor

shall provide the Department with a copy of such evaluation within ten (10) days after receipt by the Contractor.

4. The Contractor shall provide such fiscal reports as required by the Department in the form and frequency required.

5. The Contractor shall provide any other reports that the Department may reasonably request.

N. BUILDING MANAGEMENT

1. The Contractor (or the Landlord of the Facility) shall be responsible for the preventative, daily, corrective, and emergency maintenance of the Facility and all exterior, interior and structural repairs to the Facility. The Contractor's obligations hereunder include, but are not limited to: the maintenance of all mechanical systems (including HVAC, boiler, hot water, emergency generator, elevator, and fire safety) and the maintenance of the interior and exterior building components (including general plumbing, carpentry, electric, window screens, window glass, non-capital masonry, tile repair, door alarms, locks, grounds, equipment, and furnishings). The Contractor is responsible for all repairs, major or minor, that are the result of the Contractor's negligence or the result of vandalism by the Contractor's staff or clients. The Contractor shall only be responsible for repairs necessitated by client vandalism to the extent funds are available in its budget for this purpose and the vandalism was not the result of the Contractor's negligent supervision of the clients. The Contractor shall consult with and receive written approval from the Department before initiating any structural changes, including renovations and room reconfigurations.

a. It shall be the responsibility of the Contractor (or of the Landlord of the Facility) to ensure that the Facility is in compliance with all applicable Federal, State, and Local Laws governing the operation of the building. The Contractor shall be responsible for curing all violations and deficiencies issued against the property after the commencement of the Agreement. The Contractor shall immediately notify the Department if it becomes aware of any violations issued against the Facility. The Contractor shall comply with the Department's violation protocol, a copy of which shall be provided to the Contractor prior to the commencement of this Agreement.

b. In the event any maintenance, repair or improvement is to be performed by means of a sub-contract for which the Department approved cost exceeds \$25,000, the Contractor shall be responsible for soliciting a minimum of five (5) written bids using a competitive sealed bid process and securing at least three bids. If the approved cost estimate is between \$5,001 and \$24,999, the Contractor shall be responsible for securing a minimum of five (5) facsimile bids. If the approved cost estimate is \$5,000 or less the Contractor shall be responsible for securing at least three (3) telephone bids. The Department shall provide the Contractor with a written procedure for obtaining Department approval for the expenditure of these funds. The Contractor shall be

responsible for ensuring that all subcontractors perform in a workmanlike fashion.

- c. Prior to the execution of any sub-contracts, the Contractor shall submit the name of the contractor, a copy of the contract, including the scope of work and identify the source of budget funds, for each proposed sub-contract to the Department, with the Contractor's written request for approval. The Department shall notify the Contractor if the proposed sub-contract is acceptable within two (2) weeks of the submission of the sub-contract and such other information as reasonably required by the Department. In the event the Department does not notify the Contractor within such two (2) week period that the sub-contract is or is not acceptable, the sub-contract shall be deemed approved by the Department. Such sub-contractors shall be required to (a) insure the Department and the City of New York in the same manner and to the same extent as the Contractor is required by Article 2.1 of Part II of this Agreement, and (b) post performance and payment bonds in the form to be prescribed by the Department.
 - d. The Contractor shall hire a qualified superintendent and maintenance staff for the Facility who have satisfactory knowledge of building maintenance and meet the Department's experience requirements. The Contractor shall submit to the Department for review copies of the resumes of the superintendent and the maintenance staff. The Department may disapprove any maintenance staff that does not meet the Department's stated minimum qualifications.
 - e. The Contractor, not later than thirty (30) days after the execution of this Agreement, shall develop and submit to the Department for its written approval a draft Property Management Plan ("The Plan"). The Plan shall outline the Contractor's strategy for handling emergency repairs, set forth a schedule for providing preventive maintenance, and describe how the Contractor shall meet its responsibilities and obligations described in sub-paragraph 1 (a) above. The plan shall include procedures for inspecting and documenting all areas of the shelter on a regular basis. The Contractor, not later than thirty (30) days from the execution of this Agreement, shall also develop and submit to the Department for its written approval, an auditable system for recording and tracking all maintenance and repair functions. Upon approval from the Department, but not later than sixty (60) days from the execution of this Agreement, the Plan shall be deemed to be in full force and effect.
 - f. The Plan shall serve as the guideline for the Contractor's maintenance of the Facility. The Contractor's compliance with The Plan shall be a factor in evaluating the Contractor's performance under this Agreement.
2. In the event a replacement reserve account is created, the Contractor shall use the replacement reserve account to fund capital items. The Department's written approval will be required prior to the use of replacement account reserve funds.

BRONX NEIGHBORHOOD BASED CLUSTER PROGRAM - 228 UNITS
AQILA INCORPORATED
200 W. 125th Street, New York, NY 10032

Category	Line Item	Cost per Unit	Number of Units	Total Cost	
Office Furniture	Desk	\$ 400	40	\$ 16,000	
	Chair (Desk)	\$ 150	40	\$ 6,000	
	Chair (Client / Task)	\$ 125	100	\$ 12,500	
	Wardrobes	\$ 12	40	\$ 480	
	File Cabinets (4 Drawer, Letter)	\$ 450	30	\$ 13,500	
	Storage Cabinets	\$ 200	18	\$ 3,600	
	Folding Tables	\$ 125	8	\$ 1,000	
	Office Safe	\$ 425	1	\$ 425	
	Modular Office Partitions	\$ 20,000	1	\$ 20,000	
	Modular Partition Installation	\$ 5,000	1	\$ 5,000	
Office Equipment	Personal Computer w/Monitor	\$ 1,000	37	\$ 37,000	
	Printers	\$ 400	12	\$ 4,800	
	Digital Document Management System	\$ 5,000	1	\$ 5,000	
	Tabletop Copier	\$ 350	6	\$ 2,100	
	Fax Machines	\$ 200	10	\$ 2,000	
	Pager System	\$ 70	10	\$ 700	
	Telephone System	\$ 45,000	1	\$ 45,000	
	Client Tracking System (Hardware, Software, Installation, Training)	\$ 75,000	1	\$ 75,000	
	SUB TOTAL OFFICE EQUIPMENT				\$ 231,185

Category	Line Item	Cost per Unit	Number of Units	Total Cost
Breakfast Room	Folding Tables	\$ 128	2	\$ 256
	Chairs	\$ 128	12	\$ 1,536
	Storage Cabinets	\$ 300	2	\$ 600
	Refrigerator/Freezer (Large)	\$ 1,200	1	\$ 1,200
	Refrigerator/Freezer (Medium)	\$ 800	6	\$ 4,800
	Microwave Ovens	\$ 180	7	\$ 1,260
	Water Cooler	\$ 250	7	\$ 1,750
	Air Filtration Device	\$ 200	7	\$ 1,400
Office Supplies	Pens/Pencils (Dozen)	\$ 12	50	\$ 600
	Assorted Writing Pads (Package)	\$ 15	30	\$ 450
	Printer/Cartridge Paper (Carton)	\$ 40	30	\$ 1,200
	Assorted File Folders (Box)	\$ 20	30	\$ 600
	Binders	\$ 2	120	\$ 240
	Desk Organizers	\$ 30	30	\$ 900
	Wall Mounted File Organizers	\$ 30	30	\$ 900
	Letter Tray Sets	\$ 10	50	\$ 500
	Calendars	\$ 15	30	\$ 450
	Bulletin Boards	\$ 75	30	\$ 2,250
	Slaphes	\$ 15	50	\$ 750
	Tap Dispensers	\$ 10	50	\$ 500
	Hand Calculators	\$ 10	20	\$ 200
	Post It Pads (Package)	\$ 5	50	\$ 250
	Staples (Box)	\$ 5	100	\$ 500
	Assorted Envelopes (Box)	\$ 10	50	\$ 500
	Tape	\$ 5	100	\$ 500
	Binder Clips (Box)	\$ 5	50	\$ 250
	Assorted Paper Clips (Box)	\$ 3	50	\$ 150
	Assorted Rubber Bands (Box)	\$ 5	100	\$ 500
Computer Diskettes (Package)	\$ 25	8	\$ 200	
First Aid Kit	\$ 75	8	\$ 600	
SUB TOTAL OFFICE SUPPLIES				\$ 27,840

Linens	Floor Sheet	\$ 4	750	\$ 3,000
	Fitted Sheet	\$ 4	750	\$ 3,000
	Blanket	\$ 4	750	\$ 3,000
	Pillow	\$ 3	750	\$ 2,250
	Pillowcase	\$ 1	750	\$ 750
	Towel	\$ 1	750	\$ 750
Client Furniture	Futon Sofa	\$ 335	104	\$ 34,840
	Bunkbed (Includer Mattress)	\$ 370	208	\$ 76,960
	Crib	\$ 165	104	\$ 17,160
	Dresser	\$ 175	208	\$ 36,400
	Chair	\$ 180	104	\$ 18,720
Client Supplies	Household Kits (Plates, Utensils, etc)	\$ 80	104	\$ 8,320
SUB TOTAL CLIENT SUPPLIES/FURNITURE				\$ 224,910

SUB TOTAL - SECURITY				\$ 223,785
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TOTAL PS & DTIPS				\$ 978,881
ADMIN OVERHEAD				\$ 74,586
TOTAL START-UP				\$ 853,467
				FINAL

Appendix D: Sample MTE Sheet

**Bronx Neighborhood Annex (HB66) Monitoring Tool Report
Corrective Action Response Form**

Instructions: For each section pertaining to the monitoring tool report, please indicate your corrective action response. Your response must include date(s) indicating when the required corrections will be completed. Please submit any back up documentation as an attachment to your corrective action response.

Inspection Period: FY14 (July – Dec.)
Dates of Inspection: Oct. 9, 10, 16, 24, 28 and 30-31st of 2013

Section 1. Apartment Fitness Report

Provider Response:

Section 2. Physical Plant Review

Provider Response:

Section 3. Social Services/Program Review

Provider Response:

Section 4. Critical Files Review

Provider Response:

Section 4A. Invoice Comparison to Facility Source Document Checklist

Not applicable. No corrective action response is required.

Section 4B. Pass Control Checklist

Section 5. Staff Appropriateness and Continuity

**Bronx Neighborhood Annex (HB66) Monitoring Tool Report
Corrective Action Response Form**

Instructions: For each section pertaining to the monitoring tool report, please indicate your corrective action response. Your response must include date(s) indicating when the required corrections will be completed. Please submit any back up documentation as an attachment to your corrective action response.

Inspection Period: FY14 (July – Dec.)
Dates of Inspection: Oct. 9, 10, 16, 24, 28 and 30-31st of 2013

Section 6. Food Service Report

No deficiencies found. No corrective action required.

Section 7. Security Plan Report

Provider Response:

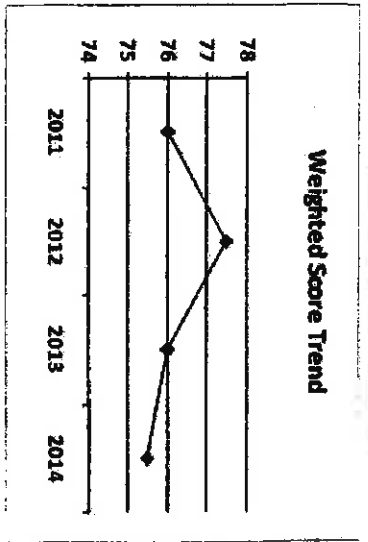
Section 8. Regulatory Compliance/Oversite Audits

Provider Response:

Appendix E: Sample RSRI scoring methodology sheet

Facility: [REDACTED]

Inspection Date: [REDACTED]



Category Definitions:

Cleanliness: looks to see if the facility is free of dirt, debris, marks and stains. When looking at floors, it is being inspected for dirt, wax build-up and garbage. Walls and ceilings would include graffiti and stains from a variety of encounters; including water, food residue and foot prints. Windows would be checked for soot and general household dirt accumulations. In addition, kitchens are inspected for grease build-up.

Integrity: Identifies broken or worn items throughout the facility. Various items are inspected to determine if they are operational and/or missing. Examples of this would include water faucets, bathroom doors and partitions, door closures, window screens and guards, light switches and fixtures, and shaker items.

Management: reviews administrative logs and records that include fire drills, facility violations, budgets, headcount, recordkeeping related to inventory supplies and work order tickets, and various facility inspections required by the FDNY, Department of Buildings, New York State and other oversight agencies.

Weighted Score: places emphasis on the various categories. Cleanliness is weighted 80%, Integrity at 30% and Management at 10%. These values are assigned with the understanding that if a facility is clean and in a good state of repair, it is understood that the management factors are in place.

Condition Factor: is a comparison of scores throughout the facility looking at the extreme highs and lows (e.g. unsatisfactory and excellent). By comparing the extremes, it takes into consideration the comfort level observed while walking through the facility, such that a better feel for the surroundings receives better scores and vice versa. A score of 50% is considered average.

Scoring Methodology:

Scoring is based on an analysis of 346 questions. These questions are ranked into one of five scores (excellent, good, satisfactory, marginal and unsatisfactory) and categorized into one of three groups (cleanliness, integrity and management). Similar to a college GPA, scores are given points starting at an excellent score receiving a 4 and unsatisfactory a 0. Questions that are marked not applicable are ignored from the scoring system. After all the scores are entered into the database, the result is calculated by adding all the points and dividing by the total number of questions found to be applicable for each category. To determine score for each question, the following is a definition for the scores:

Excellent: is a condition where a building, building component or individual item is very or greatly improved. In the case of cleanliness, no dirt, debris or graffiti is discovered during the inspection for the item being scored. Score = 100.

Very Good: is a condition where a building, building component or individual item appears as it is designed. In the case of cleanliness, minor dirt, debris or graffiti is discovered in parts of the facility during the inspection for the item being scored. Score = 75.

Satisfactory: is a condition where a building, building component or individual item performs as it is designed, but may need minor repair to make it 100% operational. In the case of cleanliness, some dirt, debris or graffiti is discovered in several areas during the inspection for the item being scored. Score = 50.

Marginal Improvement: is a condition where a building, building component or individual item needs minor repair in order to function. In the case of cleanliness, dirt, debris or graffiti is discovered throughout the facility during the inspection for the item being scored. Score = 25.

Unsatisfactory: is a condition where a building, building component or individual item is non-functional. In the case of cleanliness, dirt, debris or graffiti is discovered in all parts the facility during the inspection for the item being scored. Score = 0.

	Cleanliness	Integrity	Management	Weighted Score	Condition Factor
Facility Score	80	75	62	77	57%
Facility Average (21*)	78	76	74	77	61%
Shaler System Average	81	75	75	78	62%
Berger Corp.	80	76	72	78	60%

* Amount of inspections conducted. Averages last updated 7/28/2014

Appendix F: Violations issued to all shelters inspected

TIER IIs

Agency	Violation Code	Description
DOB	27-369, BC 1020.2	Failure to provide unobstructed exit passage way note: @ 1st fl, near recreation room "east exit" has storage of old car seats, in exit vestibule, causing an obstruction of exit passageway. Storage of rolling bins, pallets, and misc. storage in corridor.
DOB	28-301.1	Failure to maintain bldg. in code complaint manner: note; (1) hard wired smoke detector loose / not secured to junction box - location outside of room 426. (2) fl #3, stair #1, emergency exit light defective backup panel
DOB	28-302.1	Failure to maintain bldg. walls or appurtenances. Note: (1) cracked windows/ broken/ glass- locations: next to Rm #200, &, 3rd fl southeast corner. (2) loose / rotten metal/trim around large court yard window
DOB	28-301.1	Failure to maintain bldg. in code complaint manner: (1) 4" x 4" square holes in ceiling of public halls location: near room # 313, 317 (2) water damage sheetrock ceiling section approx. 3' x 2', location 1st fl public halls
FDNY	FC 1027.3	Failure to maintain the means of egress free of impediments/obstructions
FDNY	FC 901.5	Failure to provide a letter of approval issued by the Fire Department for the retro fitted interior fire alarm system
FDNY	FC 404.2	Submit a revised fire safety and evacuation plan as required to the Bureau of Fire Prevention.
FDNY	FC 805.1.3	Failure to provide proven proof affidavit for flame resistant decorations in violation of FC § 805.1.3
FDNY	FC 105.4.1	Failure to provide letter of approval for the installation and operation of new emergency generator located in the basement in violation of FC§105.4.1.
FDNY	FC 604.3.2	Failure to provide written records of maintenance and testing of emergency generator in violation of FC§604.3.2
FDNY	FC 901.5	Failure to provide a letter of approval for the new or retrofitted installation of Fire Alarm System, in violation of FC§901.5
FDNY	BC§ 1006.3 (1)(2)(3)(4)(5)	Failure to maintain/repair emergency lighting in violation of BC§ 1006.3 (1)(2)(3)(4)(5)
FDNY	FC 906	Failure to maintain / recharge /servicing tags fire extinguisher in violation of FC§906
FDNY	FC 901.6.3	Failure to provide a certificate of fitness holder for the supervision of fire alarm systems and other required systems in violation of FC§901.6.3
FDNY	VC 5: Signs Postings, Notices and Instructions	Arrange so that all stairwell exit doors open by a one-motion means of egress and are self-closing as required by code.

Agency	Violation Code	Description
FDNY	NFPA 25	Maintain records of inspections. Tests and other maintenance on the sprinkler system in accordance with NFPA 25. (National Fire Protection Association: Standard for the Inspection, Testing, and Maintenance of Water-Based Fire Protection Systems)
FDNY	VC 5: Signs, Postings, Notices and Instructions	Arrange so that exterior exit doors located on the north and south sides of the building are maintained in proper working order by keeping same unobstructed, openable by one-motion means of egress and self closing.
FDNY	FC 901.6	Failed to remove obstruction from the sprinkler piping heads as per 901.6 of the fire code.
FDNY	VC 12: Fire Protection Systems	Seal sprinkler control valves open with approved seals
FDNY	VC 12: Fire Protection Systems	Provide and Post sign outside building at each Siamese connection indicating "sprinklers throughout entire building."

Agency	Violation Code	Description
DOB	28-301-1	Failure to maintain building: at 8th floor elevator electrical room. Observed severe spalling of mortar. & also found evidence of smoking inside panel room. Remedy: repair defects forthwith & maintain bldg.
DOB	28-117.1	Operation of a place of assembly without a PA permit
DOB	EC 110.2(A)	Unapproved/ unsafe/unsuitable electrical equipment or wiring in use.
DOB	28-105.1	Work without a permit: Noted: at 8th floor elevator electrical room, found new plywood/sheetrock partition approx 10'x 8' with inadequate fire rating installed. Also observed aluminum glass structures installed
FDNY	FC 1027.2	Failure to maintain means of egress free of obstruction and readily accessible at all times, in violation of FC §1027.2
FDNY	FC 1027.2 FC 703.2 FC 1968 BC 27-369	Failure to maintain required rated doors in proper order, in violation of FC 1027.2, FC 703.2, FC 1968 and BC 27-369
FDNY	FC 1027.1 FC 703.2	Failure to maintain required fire rated doors in proper operation order in violation of FC 1027.1 and FC 703.2
FDNY	FC 1027.1 FC 1968 BC 27-371(j)	Failure to maintain exit doors operable from stairwell side on each floor, except the ground floor, in stairwell C and D in violation of FC 1027.1 and 1968 BC 27-371(j)
FDNY	FC 906.2.1.2	Failure to maintain a record of an annual service of portable fire extinguishers by the authorized company, in violation of FC 906.2.1.2
FDNY	FC 901.6 RS 17-2	Failure to provide and maintain an approved type of sign near the sprinkler control valves on the 1st and 2nd Floor, stairwell B to indicate the part of the Building controlled by such valves, in violation of FC 901.6 and RS 17-2 (RS - National reference standards for fire alarms, detection, and extinguishing equipment)
FDNY	FC 1027.1 1 RCNY 27-01	Failure to post and maintain an approved type of sign identifying stairwell A on the 5th and the 2nd floors and stairwell be on the 7th, 5th and 3rd floors, in violation of FC1027.1 and 1 RCNY 27-01
FDNY	FC 703.2	Failure to maintain a required fire rated door in stairwell D on the 3rd floor in proper order, in violation of FC 703.2
FDNY	FC 401.6.6	Failure to provide a Fire Safety Director and sufficient amount of Deputy Fire Safety Directors holding a certificate of fitness for these premises in violation of FC 401.6.6

Agency	Violation Code	Description
DOB	28-118.3.2	Occupancy contrary to that which is allowed by the Certificate of Occupancy: according to CO, basement as accessory use and now occupied as storage and utility rooms.
DOB	28-301.1	Failure to maintain building in code compliant manner. 1) Missing smoke/CO detectors in bedrooms, 2) electrical panels are missing directories in apts and halls, 3) apt doors missing peep holes and security chains, 4) hole in junction box at 2nd floor hall, 5) hole in wall under window at apt 305, 6) gaps in walls where pipes penetrate wall under sinks
DOB	28-301.1	Failure to maintain building in code compliant manner: No fire stopping per BC 712.3; 27-345. Defects noted: 1) fire doors are missing at public hallway removing fire separation, 2) interior walls at 2nd floor don't have fire rating 3) structural steel column is not fire rated at storage in basement, 4) kick/stop of fire door at public fire stair provide/maintain fire stopping.
FDNY	FC 313 1968 BC 27-396.3 1968 BC 27-391	Failed to provide smoking signs in violation of FC 313. Failed to provide posted egress chart sleeping signs in violation of 1968 BC §27-396.3 and 1968 BC §27-391
FDNY	BC 1006.3 (1)(2)(3)(4)(5)	Failure to maintain repair emergency lighting in violation of BC § 1006.3 (1)(2)(3)(4)(5)
FDNY	SP-1	Provide Sprinkler protection in the restroom on the "Penthouse" level.
FDNY	SP-2	Arrange so that all stairwell exit doors open with a one-motion means of egress (approved type panic device) and are self-closing and latching as required by code.

Agency	Violation Code	Description
DOB	28-301.1	Failure to maintain. Noted: approx. 85% of fire extinguishers expired throughout all floors. Remedy: maintain all extinguishers by approved FDNY vendor.
DOB	28-118.2	New bldg. occupied without a valid CO NB 155-88 not signed-off now occupied as family shelter all 3 floors, LNO # 4522 denied 10/28/2009, bldg. occupied with no CO/LNO. Remedy: obtain a valid CO.
DOB	28-301.1	Failure to maintain: illegal hardware. Noted at front door magnets/slide bolts, also hardware noted 2nd fl gym front door, 1st fl Southside corridor door, door stop. Also throughout illegal door stops placed on stairwell doors.
DOB	28-301.1	Failure to maintain - failure to label mechanical rooms at basement, boiler room and sprinkler room; Remedy: label doors
DOB	28-105.1	Work without permit. Illegal work noted: based on dept. of bldg. records, a total of 80 dwelling units now converted to 98 dwelling units. Remedy: obtain permit/restore to prior legal condition.
DOB	28-301.1	Failure to maintain fire stopping at 1st floor electrical room, basement gas meter room, electrical panel room pipe penetrations, also 2nd fl gym; remedy: provide fire stopping.
DOB	28-301.1	Failure to maintain - ventilation in multiple apartment bathrooms defective, also ventilation into interior rooms not being maintained. Exhaust fan 24, 27 and 28 not operational at time of inspection
DOB	BC 1020.2	Failure to maintain exit passageway. Noted: at 1st floor stair E storage of 5 gallon buckets, also at 3rd floor corridor north side fan in place. Remedy: remove obstructions.
DOB	28-117.1	Operation of a place of assembly without a current certificate of operation. Noted at 2nd floor meeting room approx. 108 seats on place. Remedy: discontinue operation, obtain proper p.a. permit.
DOB	28-301.1	Failure to maintain - illegal storage of combustible material inside gas meter room; also improper storage of multiple refrigerators stores at rear playground area. Remedy: remove illegal storage.
DOB	28-301.1	Failure to maintain defective door at 1st floor stair E door not self-closing.
DOB	28-302.1	Failure to maintain - evident signs of water penetration into room 110 & 3rd floor north wing. Remedy: seal penetrations
DOB	28-301.1	Failure to maintain - noted no ventilation dampers in place or operational in boiler room.
DOB	28-301.1	Failure to maintain - illegal storage of contractor box chained to sprinkler line in basement
FDNY	FC 906.2.1.2	Failure to maintain a record of annual servicing of portable fire extinguishers by the authorized company in violation of FC 906.2.1.2
FDNY	FC 703.2	Failure to maintain the required fire rated doors in proper working order in violation of FC 703.2

Agency	Violation Code	Description
FDNY	FC 901.6	Failure to maintain the sprinkler system in proper working order, in violation of FC 901.6
FDNY	FC 1027.1	Failure to post and maintain an approved type of sign indicating a floor number within each stairwell on each floor as well as identification of the elevator bank in violation of FC 1027.1
FDNY	FC 408.9.3	Failure to post and maintain a fire safety notice on each dwelling unit doors, in violation of FC408.9.3
FDNY	FC 607.5	Failure to maintain records of a monthly operational test of the elevator equipped with firemen's service, in violation of FC 607.5
FDNY	3 RCNY 907-01	Failure to provide and maintain a fire alarm log book, in violation of 3 RCNY 907-01

Agency	Violation Code	Description
DOB	28-105.1	Work without permit: illegal work noted at basement by installation of 6 gas dryers; no record of permits for gas lines
DOB	28-105.1	Work without permit: illegal work noted on 2nd floor by reducing to number of apartments from 31 units to 30, No record of permits indicating change. Also penthouse from 2 units to 5 units; application disapproved
DOB	28-301.1	Failure to maintain. Noted: incorrect labeling of floor levels contrary to CO
DOB	28-301.1	Failure to provide fire stopping at electrical room in basement, pipe penetrations through wall
DOB	28-118.3.2	Occupying contrary to Dept. records. Noted: basement level/store converted to offices
DOB	28-301.1	Failure to maintain noted basement level gas meter room not up to building code: missing fire stopping, fire rating not to code, exposed proof lighting, sensors, FAI
DOB	28-301.1	Failure to maintain building, notes excessive storage inside electrical panel room with equipment, plants
DOB	28-118.3.2	Occupying contrary to Dept. records, noted penthouse to be occupied as 2 units now converted to 5 units, also 2nd floor converted from 31 units to 30
DOB	28-302.1	Failure to maintain exterior. Noted step cracks atop parapet level court yard/throughout, also exhaust (new) on roof are next to residential windows
DOB	EC 110.2 (A)	Unapproved, unsafe, unsuitable equipment apparatus, materials, devices, appliances, or wiring is in use. Emergency wall packs and emergency exit lights do not work throughout entire building. Misc. floors they do not work, the lights are defective. Lights do not illuminate when power is switched off
DOB	28-301.1	Failure to maintain building in code complying manner: ground floor in boiler room at front of boiler on right hand side water leaking from inside the boiler to outside the boiler
DOB	28-105.1	Working without a permit work noted, at ground floor water drainage, gas lines ran to gas dryers and washing machines with no permits filed with DOB
DOB	PC 107.3 (plumbing code) 27-921 (A)	Failure to have a new or altered plumbing system inspected or tested. As per DOB records there is no recorded information which shows any inspections or tests for a laundry room
DOB	BC 903.6	Sprinkler system not properly painted from floors 3 through top. Sprinkler trunk line is not painted red and not in the state of readiness. Also in boiler room sprinkler line from fire dept. connection to check valve is not painted red

Agency	Violation Code	Description
DOB	BC 903 NFPA 13 Ch.8: Standard for the Installation of Sprinkler Systems	Sprinkler installation not in accordance with code. At ground floor outside elevator there is no sprinkler coverage
DOB	NFPA 20: Standard for the Installation of Stationary Fire Pumps for Fire Protection	Required fire pump not installed. Building has a combination sprinkler /stand pipe system installed. Under application # 102855509 the building is proposed 90'. At the fire service in the basement pressure shows about 70lbs proposed 6 stories. At top of riser there is a three valve manifold (32 1/2 hose valves) Postings for fire pump are up. With the loss of pressure to the roof and the rest of the sprinkler/stand pipe system due to friction loss a fire pump is missing
DOB	EC-Misc.	Miscellaneous violation of the electrical code technical standards. Provide proper/adequate grounding for main electrical service water meter is not properly jumped for electrical service in accordance with the national electrical code standards. Missing/improper (Article 250.53)
DOB	EC-Misc.	Miscellaneous violation of the electrical code technical standards. Service grounding conductor has not been installed properly. 1600 AMP service switch feeding electric to building is insufficient on grounding approx. 1600 AMP MDD is grounded with approx. 10 AWG size wire. Improper sizing-refer to NEC Chart (Article 250.24C)
DOB	EC 110.2 (A)	Unapproved, unsafe, unsuitable equipment apparatus, materials, devices, appliances, or wiring is in use. All objections throughout all floors and rooms. Noted: knockouts not closed in panel boxes, boiler room, electrical room 110.12 (A)-Junction boxes not closed throughout (314.25) Outlet boxes not secured/ Junction boxes (314.23) Locknuts missing or loose (300.11) Electrical room. Boiler room
DOB	EC-Misc.	Miscellaneous violation of the electrical code technical standards. Approx.: 40 linear feet of sidewalk shed is not properly illuminated. No lights or outlets on shed. Shed permit pulled, but no lights on shed, shed is dark and unsafe. NYC Amendments (local law 49/2006) must be illuminated.
DOB	EC-Misc.	Miscellaneous violation of the electrical code technical standards. Not suitable for the purpose. Intended electrical room used as storage. Vacuums, floors, construction debris stored in main electrical. Remove-must be cleared
FDNY	FC 907.17	Submit evidence to the Bureau of Fire Prevention, High Rise Unit that the modified class J fire alarm system has been issued a letter of approval from the fire alarm inspection unit of the Bureau of Fire Prevention.
FDNY	FC 315.2	Failure to maintain a main electrical room free of combustible materials, in violation of FC 315.2

Agency	Violation Code	Description
FDNY	FC 404.5 3 RCNY 404-01	Failure to prepare and submit to the fire department an acceptable fire safety and evacuation plan, in violation of FC 404.5 and 3 RCNY 404-01 Note: multiple personnel changes in existing plan
FDNY	FC 401.6.5.1	Provide fire safety director and sufficient deputy fire safety directors holding certificate of fitness for these premises
FDNY	FC 901.6	Failure to maintain the fire alarm and voice communication system in proper working order, in violation of FC 901.6.
FDNY	FC 901.6 1968 BC 27-975	Failure to provide and maintain a means of activation fire alarm tones throughout the building on a specific floor manually from the fire alarm control panel, in violation of FC 901.6 and 1968 BC 27-975
FDNY	NFPA 72: National Fire Alarm and Signaling Code FC 907.20	Failure to provide and maintain on the premises a detail report of inspection testing and maintenance of the fire alarm and voice communication system in accordance with NFPA 72, in violation of FC 907.20
FDNY	NFPA 25: Standard for the Inspection, Testing, and Maintenance of Water-Based Fire Protection Systems FC 903.5 FC 905.12	Failure to provide and maintain on the premises a detail report of inspection testing and maintenance of the combination sprinkler and standpipe system in accordance with NFPA 25, in violation of FC 903.5 and 905.12
FDNY	FC 907.20	Failure to provide and maintain on the premises a report of a monthly operational test of the central office trip switch, in violation of FC 907.20
FDNY	FC 607.5	Failure to provide and maintain on the premises a report of a monthly operational test of elevators equipped with fire fighter service in violation of FC 607.5
FDNY	FC 901.6	Failure to maintain sprinkler system in proper order, in violation of FC 901.6
FDNY	FC 703.2	Failure to maintain required fire doors normally in closed position, in violation of FC 703.2
FDNY	FC 1027.1 1968 BC 27-381	Failure to maintain emergency light fixtures in proper working order, in violation of FC 1027.1 and 1968 BC 27-381
FDNY	FC 901.63	Failure to provide a person holding a certificate of fitness for inspection, testing, and maintenance of the sprinkler system in violation of FC 901.63

Agency	Violation Code	Description
FDNY	FC 1027.1 1 RCNY 27-01	Failure to post and maintain an approved type of sign in a conspicuous place on the 2nd floor at or near the passenger elevator landing containing a diagram showing the location where it is posted and the location and letter identification of all stairwells on the floors, in violation of FC 1027.1 and 1 RCNY 27-01
FDNY	FC 906.2.1.2	Failure to provide and maintain on the premises a report of an annual maintenance and servicing of a portable fire extinguisher located on the 3rd floor next to stairway A by the authorized company, in violation of FC 906.2.1.2

Agency	Violation Code	Description
DOB	28.105.1	Work without permit: illegal work noted by the removal of gas lines from units from 6th floor to the 2nd floor. Creating offices throughout floors: 6, 5, 4, 3, and 2
DOB	28.118.3.2	Occupancy contrary to Dept. records by converting floors: 3, 4, 5, and 6 into offices from hotel units
DOB	28.118.3.2	Occupancy contrary to Dept. records by converting 2nd floor from hotel/apt to daycare with multiple rooms set up with children and staff
DOB	27.766	Failure to provide fresh air in gas meter room, as per RS 16/P 155.4 and TPPN 106 1995
DOB	28.302.1	Failure to maintain exterior noted water penetration into stairwell "A" upper floors and bulkhead
DOB	BC 1020.2	Failure to maintain exit passageway in cellar, noted excessive debris scattered throughout
DOB	27-391 BC 1019.1.7	Failure to provide stair identification missing at stairways in basement and 1st floor
DOB	28.301.1	Failure to maintain FPSC mechanical doors in cellar, noted multiple doors split and not functioning properly
DOB	28.301.1	Failure to maintain building. Noted: at stair A - severely corroded stair steps and supports entire stairwell, severe deflection noted on multiple steps
DOB	28.301.1	Failure to maintain. Noted: elevator #2 defective at time of inspection
DOB	28.301.1	Failure to provide fire stopping at entire cellar area (mech) rooms, 2nd floor stair A 1 x 1 hole, also room 210 4x4 at section in closet cutout
DOB	EC 110.2(A)	Unapproved/unsafe/unsuitable electrical equipment or wiring in use. Emergency lighting as wall packs throughout entire building are defective.
DOB	EC 110.2(A)	Unapproved/unsafe/unsuitable electrical equipment, materials, devices appliances wiring in use. Armored cables not secured in basement (320.30) outlet boxes not covered/broken throughout all floors/apts.
DOB	EC-MISC	Miscellaneous violation of the electrical code technical standards. Water meter jumping is missing or improper. Not jumped with appropriate size cable. (NEC 250.53). Remedy: Comply with electrical code.
DOB	EC-MISC	Miscellaneous violation of the electrical code technical standards. Not suitable for the purpose intended electrical room used as storage. Paint cans, vacuums, fire extinguishers, other misc. items. Must remove.
DOB	EC-MISC	Miscellaneous violation of the electrical code technical standards. Service grounding conductor has not been installed properly. Grounding is not there/ missing improper on water main. (Article 250).

Agency	Violation Code	Description
DOB	27/28/BC-MISC BC Q105 (Appendix Q: Modified National Standards for Automatic Sprinkler, Standpipe and Fire Alarm Systems)	Miscellaneous violation: Failure to provide drip valve between Fire Dept. connection & check valve. In cellar at ceiling, check valve that was installed is missing a ball drip. There is a hose valve that was installed.
DOB	BC 903 NFPA 13 Chapter 8.	Sprinkler installation not in accordance with code. At ground floor in area in front of elevators there is no sprinkler heads for fire coverage
DOB	127-3018(B)	Electrical work without permit. At time of inspection, no app on file for new fire pump being installed on the roof. New electrical feeders from MDP panel in cellar ran to roof in EMT throughout building. (Complaint assigned to building marshals office refer. Partial stop work order.)
FDNY	FC 1027.1 FC 1027.2	Failure to maintain means of egress in proper order, in violation of FC 1027.1 and FC 1027.2
FDNY	FC 901.6	Failure to maintain the Fire Alarm and Voice communication system in proper working order, in violation of FC 901.6
FDNY	FC 901.6	Failure to maintain the combination sprinkler and standpipe system in proper working order, in violation of FC 901.6
FDNY	FC 313.2	Failure to maintain the premises free of any portable fueled equipment, in violation of FC 313.2
FDNY	FC 1027.1 1968 BC 27-371(J)	Failure to maintain re-entry capabilities on each floor at all times in violation of FC 1027.1 and 1968 BC 27-371(j)
FDNY	FC 1027.3.5	Failure to maintain elevator vestibules on each floor from the 2nd to 6th free of any combustible materials, in violation of FC 1027.3.5
FDNY	1968 BC 27-954	Failure to maintain storage rooms without approved type of fire protection system free of combustible materials, in violation of 1968 BC 27-954
FDNY	FC 907.17	Failure to provide and maintain on the premises a letter of approval from the Fire Alarm Inspection Unit of FDNY for installed Fire Alarm and Voice communication system, in violation of FC 907.17
FDNY	FC 401.6	Failure to prepare and submit to Fire Department an acceptable Fire Safety and evacuation plan for these premises, in violation of FC 401.6
FDNY	FC 401.6.6	Failure to provide a Fire Safety Director and sufficient Deputy Fire Safety Director holding a certificate of fitness for these premises in violation of FC 401.6.6
FDNY	3 RCNY 901-04	Failure to provide an approved method of supervising the conduct of the fire watch, such as a watchman's clock and key stations of similar, in violation of 3 RCNY 901-04

Agency	Violation Code	Description
FDNY	1 RCNY 28-02	Failure to maintain combination smoke and carbon monoxide alarms in proper working order, in violation of 1 RCNY 28-02
FDNY	FC 703.1	Failure to maintain required fire-rated barriers in proper order, in violation of FC 703.1
FDNY	FC 703.2	Failure to maintain required fire doors in proper order, in violation of FC 703.2
FDNY	FC 1027.1 1 RCNY 27-01	Failure to post and maintain an approved type of sign identifying each elevator bank on each floor in violation of FC 1027.1 and 1 RCNY 27-01
FDNY	FC 1027.1 1 RCNY 27.01	Failure to post and maintain an approved type of sign in a conspicuous place on each floor near the elevator bank containing a diagram showing the location where it is posted and the location and letter identification of all exits on the floor in violation of FC 1027.1 and 1 RCNY 27.01
FDNY	FC 1027.1	Failure to maintain provided emergency lighting in proper working order, in violation of FC 1027.1
FDNY	FC 607.3	Failure to provide six(6) standard city-wide elevator keys (2642) at the Fire alarm control panel to be readily accessible to authorized persons in an emergency but not available to the public, in violation of FC 607.3
FDNY	FC 408.8	Failure to maintain an approved type of sign on the inside of every door opening onto a public corridor giving access from sleeping room and such sign shall contain a diagram showing the location where it is posted and the letter identifying of all exit stairwells on the floor. The diagram shall indicate the member of door opening onto the public corridor which must be passed to reach exit stair, in violation of FC 408.8
FDNY	3 RCNY 907-01(d)	Failure to provide and maintain a smoke detector maintenance log book, in violation of 3 RCNY 907-01(d)
FDNY	3 RCNY 907-01(d) 3 RCNY 404-01(s)	Failure to maintain the combination fire alarm and fire safety plan log book in proper order, in violation of 3 RCNY 907-01(d) and 3 RCNY 404-01(s)
FDNY	FC 607.5	Failure to maintain on the premises a record of a monthly operational test of all elevator banks and elevator cars equipped with firefighter service, in violation of FC 607.5
FDNY	NFPA 72 FC 907.20.5	Failure to maintain at the premises a detail report of testing and maintenance of the fire alarm and voice communication system by the authorized company in accordance with NFPA 72, in violation of FC 907.20.5
FDNY	NFPA 25 FC 903.5 FC 905.12	Failure to provide and maintain on the premises a detail report of testing and maintenance of the combination sprinkler and stand pipe system by the authorized company in accordance with NFPA 25, in violation of FC 903.5 and FC 905.12

Tier II

**Regent Family Residence
New York**

Inspection Date: 6/4/14

Agency	Violation Code	Description
FDNY	FC 906.2.1.2	Failure to provide and maintain on the premises a report of an annual maintenance and servicing of the portable fire extinguisher located in the elevator machine room on the roof, in violation of FC 906.2.1.2
FDNY	1968 BC 27-292.9(e)	Failure to provide portable smoke alarms pursuant to ADA requirements, in violation of 1968 BC 27-292.9 (e)

Agency	Violation Code	Description
DOB	28-105.1	Work without permit work. Noted: in cellar at the floor there was a trap that was replaced with no permit.
DOB	28-301.1	Failure to maintain building in code complaint manner re: in cellar there is the use of fernco couplings being used on 3" drain.
DOB	28-301.1	Failure to maintain building in code complaint manner at basement. 4 dumbwaiter shafts that are out of service not sealed as per department of buildings rules and regulations (directive 3 of 1974).
DOB	28-301.1	Failure to maintain building in code compliant manner at East side yard exterior concrete stairs missing handrail(s).
FDNY	FC 1027.2	Failure to maintain means of egress free of obstruction and readily accessible at all times in violation of FC 1027.2. Note: Electromagnetic locks are installed at exit discharge door from Merriam Ave side and gate door at 169th street side. Pad lock is installed on the window guard in manager office on the 1st floor. Remedy: Remove all illegal locks from means of egress.
FDNY	FC 906.2	Failure to provide on the premises a record of an annual maintenance of the portable fire extinguishers by the authorized person/company in violation of FC 906.2. Remedy: Provide and maintain such records for all portable fire extinguishers installed within each dwelling unit.
FDNY	1 RCNY 28-01 1 RCNY 28-02	Failure to provide an approved type of carbon monoxide and smoke alarm within 15 feet of all sleeping rooms within dwelling unit #1H in violation of 1 RCNY 28-01 and 1 RCNY 28-02. Remedy: Provide and maintain such alarms.
FDNY	FC 703.2	Failure to maintain required fire door in proper order in violation of FC 703.2. Note: Reattaching mechanism is missing from the required fire door to recycle room on the first floor. Remedy: Repair the door.
FDNY	FC 408.93	Failure to post a fire safety notice on each dwelling unit door throughout the building in violation of 2008 FC 408.93. Remedy: Post and maintain a fire safety notice on each dwelling unit door throughout the building from the occupied side of the door.
HPD	27-2043.1	Install the missing or repair/replace the defective window guard(s) throughout the public areas in accordance with the specifications of the New York City health code section 24 RCNY Chapter 12. At public hall.
HPD	27-2045	Repair or replace the smoke detector missing located at APT 1H, 3rd story, 1st apartment from South at West.
HPD	27-2046.1	Repair or replace the carbon monoxide detecting device(s). Missing located at APT 1H, 3rd story, 1st apartment from South at West.
HPD	27-2026	Properly repair the source and abate the evidence of a water leak from the ceiling in the bathroom located at APT 1N, 3rd Story, 1st apartment from North at East.
HPD	27-2005	Repair the broken or defective plastered surfaces and paint in a uniform color at ceiling in the bathroom located at APT 1N, 3rd story, 1st apartment from North at East.

Agency	Violation Code	Description
HPD	27-2005	Repair the broken or defective plastered surfaces and paint in uniform color walls and ceiling in the bathroom located at APT 1O, 2nd story, 2nd apartment from North at East.
HPD	27-2026	Properly repair the source and abate the evidence of a water leak from the ceiling in the bathroom located at APT 1O, 2nd story, 2nd apartment from North at East.
HPD	27-2018	Abate the nuisance consisting of mice in the entire apartment located at APT 2N, 4th story, 1st apartment from North at East.
HPD	27-2043.1	Install the missing or repair/replace the defective window guard(s) in accordance with the specifications of the New York City health code section 24 RCNY Chapter 12. In the entire apartment located at APT 4O, 6th story, 2nd apartment from North to East.

Agency	Violation Code	Description
DOB	28-301.1	Failure to maintain noted exit door # 8 stuck shut. Also corridor doors not closing properly when released illegal door stops on FPSC doors. Remedy: Comply with code.
DOB	28-118.3	Altered building occupied without a valid certificate of occupancy as per 28-118.3.1, 28-118.3.2, TCO# 400047141 expired 9/7/1994. Building fully occupied at the time of inspection. Remedy: Obtain valid code.
DOB	28-105.1	Work without permit. Illegal work noted at cellar level elevator. Machine room sub-divided to create storage room. Remedy: Obtain Permit.
DOB	28-301.1	Failure to maintain noted east side corridor ventilation system not operational at time of inspection. Remedy: Repair/replace system.
DOB	BC 1016.2	Failure to provide unobstructed exit passageway noted at 1st floor main entry large desk in place obstructing passage flow to exit doors. Remedy: Remove desk.
DOB	BC 903.6	Sprinkler system is not properly painted. Failure to paint dedicated sprinkler piping. During physical inspection I observed that there are sections of the dedicated overhead sprinkler main supply line not painted. Remedy: Paint dedicated sprinkler piping.
DOB	28-301.1	Use or installation of plumbing material which do not comply with RS-16. During physical inspection I observed a section of black iron pipe connected to the brass domestic water line in the boiler room. Black iron pipes are not allowed on the domestic water line due to piping ceiling corroded and contaminates the water supply. Remedy: Remove non-complying material or equipment.
DOB	28-301.1	Failure to provide a automatic sprinkler system where required. During physical inspection I observed that there are no sprinklers provided for the supply room on the 1st floor containing flammable products and also no covering around H.V.A.C. ducts in the boiler room. The ducts are approximately 4 ft. x 4 in most areas. Remedy: Provide a system of automatic sprinklers where required.
DOB	EC 110.2 (A)	Unapproved, unsafe, unsuitable electrical equipment materials, devices, appliances or wiring in use. Noted: Throughout all floors, halls, hallways, corridors, stairwells and closets exit lights, wall packs, emergency lighting do not illuminate when power is lost. Lights must illuminate when power is lost, (Nec Article 700.16-emergency illumination). Remedy: Comply with electrical code.
DOB	EC 110.25	Electrical closet not dedicated to electrical distribution only. Noted: At time of inspection in electrical service room used as storage room. Also, misc materials are being stored in front or around electrical equipment (Noted: this electrical room is for UPS Liebert System) Remedy: Comply with electrical code.
FDNY	27.975	Failure to provide and maintain two-way voice communication capability between the fire command station and the elevators as required in violation of 27.975 administrative code.
FDNY	FC 315.2.3	Discontinue illegal storage of combustibile materials in the elevator machine room and remove make shift wall in violation of FC 315.2.3.

Agency	Violation Code	Description
FDNY	FC 102.7	Make arrangements to remove obstructions which are impeding means of egress on the 1st floor main entrance and the hallways/corridors in the basement in violation of FC 102.7
FDNY	SP-1 (1)	Failure to provide fire stopping in through penetrations in fire rated walls throughout the building.
FDNY	FC 907.20.5	Failure to properly maintain the defective smoke detector located in the engineers shop in violation of FC 907.20.5
FDNY	SP-1 (3)	Failure to provide a sufficient amount of fire safety coordinators each holding a certificate of fitness for these premises.
FDNY	FC 607.5	Failure to conduct a monthly operational test of elevators equipped with firemen's service in violation of FC 607.5.
FDNY	FC 404.6	Failure to prepare and submit an accepted fire safety and evacuation plan for the premises in violation of FC 404.6. Remedy: Obtain a letter of acceptance for your fire safety and evacuation plan for a shelter with an interior fire alarm system with one (1) way voice communication from the emergency planning and preparedness group.
HPD	<i>Note: HPD does not issue violations on City-owned property. The inspectors provided a write-up of what would have been written.</i>	APT 101-Roaches and defective wall outlets. APT 205-Mice and roaches. APT 211-Mice, roaches and obstruction at the kitchen sink. APT 303-Defective flush pipe at water closet bowl. APT 017-Mold at bathroom ceiling and walls; defective smoke alarm and carbon monoxide detector. APT 108-Roaches. APT 102-Roaches. APT 230-Roaches; defective smoke alarm and carbon monoxide detector. APT 229-Roaches. APT 113-Roaches. APT 221-Roaches. APT 225-Defective smoke alarm and carbon monoxide detector.

Agency	Violation Code	Description
DOB	B239 28-301.1	Failure to provide fire stopping above electrical box basement level electrical room. Remedy: Provide fire stopping.
DOB	B1D2 EC110.2	Unapproved, unsafe, unsuitable, electrical equipment, apparatus, materials, devices or wiring in use. Noted: In all electrical rooms in "A&B" open panel boxes, panels are open, splices boxes, junction boxes throughout various open electrical panels and closets. Remedy: Comply with electrical code.
DOB	B1D5 EC 240.3	Failure to provide adequate circuit overcurrent protection device per table. Noted: At basement level electrical closet on meter bank on back wall #10 electrical wire # too thin is fused on a 100 (one hundred) Amp breaker. Hazard/fire can occur; wire could burn taking all other cables. Remedy: Provide adequate protection.
DOB	B1D3 EC 110.25	Electrical closet designated not to electrical distribution equipment only. Noted: At time of inspection electrical service room also showed storage. Misc. materials are being stored in the same room. Construction, debris and other materials.
FDNY	FC 315.2.3	Discontinue illegal storage of combustible materials located in the electrical switch gear room located in building 1 & 2 in violation of FC 315.2.3.
FDNY	FC 313.3	Discontinue the storage handling and use of portable fueled equipment (snow blower) which is located in the basement of bldg. #2 in violation of FC 313.3.
HPD	27-2045	Repair or replace the smoke detector defective in the entire apartment located at APT 28, 2nd story, 3rd apartment from south at west.
HPD	27-2005	Properly repair the broken or defective handle oven door in the kitchenette located at APT 29, 2nd story, 4th apartment from south at west.
HPD	27-2037,2038	Provide a safe and adequate supply of electric service to the fixtures outlet north wall in the 3rd room from east located at APT 37, 3rd story, 1st apartment from south at west.
HPD	27-2018	Abate the nuisance consisting of roaches in the entire apartment located at APT 40, 3rd story, 4th apartment from south at west.
HPD	27-2045	Repair or replace the smoke detector defective in the entire apartment located at APT 40, 3rd story, 4th apartment from south at west.
HPD	27-2045	Repair or replace the smoke detector defective in the entire apartment located at APT 44, 3rd story, 3rd apartment from north at east.
HPD	27-2045	Repair or replace the smoke detector defective in the entire apartment located at APT 48, 4th story, 3rd apartment from north at east.
HPD	27-2018	Abate the nuisance consisting of roaches in the entire apartment located at APT 50, 4th story, 5th apartment from north at east.
HPD	27-2026	Repair the broken or defective connection waste pipe at sink in the kitchenette located at APT 50, 4th story, 5th apartment from north at east.
HPD	27-2005	309 M/D law abate the nuisance consisting of scalding hot water 150 degrees in the entire apartment located at APT 53, 3rd story, 3rd apartment from south at west.

Tier II

Corona Family Residence
Queens

Inspection Date: 8/20/2014

Agency	Violation Code	Description
HPD	27-2018	Abate the nuisance consisting of roaches in the entire apartment located at APT 53, 3rd story, 3rd apartment from south at west.

Agency	Violation Code	Description
DOB	28-118.3.2	Occupancy contrary to department records noted family shelter in place throughout. No record of conversion with DOB. Remedy: Obtain valid C of O.
DOB	28-301.1	Failure to maintain fire stopping at 1st floor electrical closet in day care around pipe penetration. Remedy: Seal pipe penetration.
DOB	1019.1.7, 27-393	Failure to provide stair identification signage throughout staircase doors, floor and stair ID missing. Remedy: Label staircases.
DOB	28-105.1	Work without permit: illegal work noted at unit D203 new full height partition built in front of damaged molded walls. Remedy: Obtain permit, remove defective walls, provide tenant safety plan.
DOB	110.2 (A)	Unapproved, unsafe, unsuitable, electrical equipment, materials, devices, appliances or wiring is in use. Noted: throughout all levels, floors, corridors, stairways and exit signs wall packs emergency lighting does not illuminate.
DOB	110.2 (A)	Unapproved, unsafe, unsuitable, electrical equipment, materials, devices, appliances or wiring is in use. Noted: All levels electrical closets, hallways corridors, room throughout open splice boxes throughout open junction boxes, open 1900 boxes, wire mold must be closed.
DOB	28-501.1	Failure to maintain building code compliant manual. During physical inspections I observed the following: 11 showers in use throughout the premises without enclosures. Floor drains not installed in service pump room on the D & E side. Three (3) gas lines on roof units not property supported. Remedy: Repair and/or replace.
DOB	28-301.1	Use or installation of plumbing materials or equipment which do not comply with RS-16. During physical inspection I observed 1 gas fired dryer installed with flexible connectors. Solid piping must be used when there are 2 or more dryers or in commercial areas. Remedy: Remove non-complying material or equipment.
DOB	28-301.1	Failure to provide a system of automatic sprinklers where required. During physical inspection I observed that additional coverage is required at the back of dryers in the 1st floor laundry room. Sprinklers are installed in the laundry room but not close to the dryers locations. Remedy: Provide a system of automatic sprinklers where required.
DOB	EC 110.2 (A)	Unapproved, unsafe, unsuitable electrical equipment, materials, devices, appliances or wiring in use. Noted: All levels electrical closets, hallways, corridors, room throughout. Open splice boxes throughout open junction boxes, open 1900 boxes. All boxes, wire mold must be closed. Remedy: Comply with electrical code.
DOB	EC 110.2 (A)	Unapproved, unsafe, unsuitable electrical equipment, materials, devices, appliances or wiring in use. Noted: Throughout all levels, floors, corridors, stairways, exit signs, wall packs emergency lighting does not illuminate when power is lost. Must illuminate when needed for emergency purposes. (Nec article 700.16 emergency illumination). Remedy: Comply with electrical code.
FDNY	FC 907.20.5	Restore the fire alarm and voice communication system back to proper working order in violation of FC 907.20.5. Note: Upon activation of a manual pull station signal went to central station as a trouble.
FDNY	FC 901.6	Failure to provide approved type caps for the sprinkler fire department connections in violation of FC 901.6.

Agency	Violation Code	Description
FDNY	BC 1019.1.1	Failure to provide that all stair doors be self-closing and have re-latching capability in violation of BC 1019.1.1.
FDNY	FC 404.4	Prepare and submit to the fire department an accepted fire safety and evacuation plan for the premises in violation of FC 404.4. Remedy: Obtain a letter of acceptance for your fire safety and evacuation plan for an interior fire alarm system for a shelter from the emergency planning.
FDNY	FC 901.17	Submit evidence to the bureau of fire prevention, high rise unit, that interior fire alarm system has been issued a letter of approval from the fire alarm inspection unit of the bureau of fire prevention in violation of FC 901.17.
FDNY	FC 907.17	Make arrangements that the above letter of approval is kept on file at the subject premises for review by the fire department at any time.
FDNY	FC 1027	Make arrangements to remove the illegal electric lock on the exit door on the 1st floor near the security booth in violation of FC 1027.
FDNY	BC 1019.1.7	Failure to post a sign identifying each stairwell and inside stairwell must have a sign identifying the number of the floor in violation of BC 1019.1.7.
HPD	27-2026, 2027	Properly repair the source and abate the evidence of a water leak at ceiling in the bathroom located at APT A106, 1st story.
HPD	27-2005	Properly repair the broken or defective plastered surfaces and paint in a uniform color ceiling and west wall in the bathroom located at APT A106, 1st story.
HPD	27-2005	Properly secure the loose radiator cover in the 2nd room from the east located at APT B102, 1st story.
HPD	27-2005	Properly repair the broken or defective plastered surfaces and paint in a uniform color east wall in the 3rd room from east located at APT B103, 1st story.
HPD	27-2005	Refit entrance door in the bathroom located at APT B103, 1st story.
HPD	27-2026	Repair the flushing apparatus and maintain same so as to flush effectively the water closet in the bathroom located at APT D304, 4th story, 4th apartment from north at east.
HPD	27-2045	Repair or replace smoke detector missing in the entire apartment located at APT D304, 4th story, 4th apartment from north at east.
HPD	27-2046.1, 2046.2	Provide an approved and operational carbon monoxide detecting device, installed in accordance with applicable law and rules. In the entire apartment located at APT D304, 4th story, 4th apartment from north at east.
HPD	27-2018	Abate the nuisance consisting of mice in the entire apartment located at APT D304, 4th story, 4th apartment from north at east.
HPD	27-2005	Properly repair the broken or defective electrical outlet at south wall located at APT D304, 4th story, 4th apartment from north at east.
HPD	27-2005	Properly repair the broken or defective washbasin base cabinet in the bathroom located at APT D304, 4th story, 4th apartment from north at east.
HPD	27-2026	Remove all obstructions and repair all defects in bathtub in the bathroom located at APT D304, 4th story, 4th apartment from north at east.
HPD	27-2013	Paint with light colored paint, to the satisfaction of this department, walls and ceilings in the entire apartment located at APT E102, 1st story.
HPD	27-2005	Properly repair the broken or defective door knob in the bathroom located at APT E104, 1st story.

Tier II

Help 1 of New York
Brooklyn

Inspection Date: 8/19/2014

Agency	Violation Code	Description
HPD	27-2005	Replace with new the broken or defective upper sash window glass at east wall in the 1st room from east located at APT E104, 1st story.

Agency	Violation Code	Description
DOB	28-301.1	Failure to maintain: Defective fire doors not closing properly at cellar level. Remedy: Repair/replace doors.
DOB	28-301.1	Failure to maintain building in code complaint manner. During physical inspection I observed the following: Gas sprinkler and domestic main supply lines not properly supported in the cellar, 21 missing leader from the bulk head, three (3) fire pump rooms not vented. Sections of the vertical stand pipe are not painted red. Remedy: Repair and/or replace.
FDNY	E366978	Failure to comply with VO # E366978 to submit an accepted fire safety and evacuation plan for the premises.
FDNY	FC 404.6 FC 404.01	Failure to prepare and submit a fire safety and evacuation plan for the premises acceptable to the fire department in violation of FC 404.6 and 404.01. Remedy: Submit to the fire department fire safety and evacuation plan to the emergency planning and preparedness group. Note: Disapproved 4-30-09.
FDNY	FC 315.2.3	Discontinue illegal storage of combustible materials in the main electrical switch gear room in violation of FC 315.2.3.
FDNY	FC 1027	Failure to remove obstructions from hallways/corridors on the basement level which are impeding means of egress in violation of FC/1027.
FDNY	FC 401.6.5.2	Failure to provide a sufficient amount of deputy fire safety directors each holding a certificate of fitness for these premises in violation of FC 401.6.5.2.
FDNY	27-975	Failure to provide two-way voice communication capability between the elevators and the fire command station as required in violation of administrative code 27-975.
FDNY	BC 1026.3	Failure to post an approved type sign on each floor identifying each elevator back a diagram showing each stairway on that floor and must read "In case of fire do not use stairs unless otherwise instructed" in violation of BC 1026.3.
FDNY	1RCNY 27-01	Failure to post an approved type sign on the occupancy side of each stairwell on each floor identifying stairwells in violation of 1 RCNY 27-01.
FDNY	3 RCNY 907.01	Failure to provide and maintain on the premises a fire alarm logbook in violation of 3 RCNY 907.01.
FDNY	3 RCNY 404.01	Failure to provide and maintain on the premises a fire safety plan logbook as per 3 RCNY 404.01
FDNY	3 RCNY 907.01	Failure to provide and maintain on the premises a smoke detector logbook as per 3 RCNY 907.01.
FDNY	VC 5: Posting of Permits and Record Keeping	Failure to provide and maintain a detailed record of inspection, testing and maintenance of the fire alarm system.
FDNY	3 RCNY 907.01	Failure to provide records of the semi-annual cleaning and testing of the smoke detector in violation of 3 RCNY 907.01.
FDNY	FC 907.2	Failure to provide records of the monthly central station trip test in violation of FC 907.2.

Agency	Violation Code	Description
FDNY	FC 909.2	Failure to provide records of inspection testing and maintenance of the post fire purge system in violation of FC 909.2.
FDNY	FC 1019.1.1	Failure to provide that all fire rated doors be self closing and have re-latching capability in violation of FC 1019.1.1.
FDNY	BC 101.1	Failure to properly maintain all emergency exit lighting throughout the building in violation of BC 101.1.
FDNY	BC 27-375	Failure to provide and maintain a warden phone or warden jack in the elevator machine room in violation of 1968 BC 27-375. Remedy: Provide and maintain a warden phone or jack in the elevator machine room.
FDNY	FC 901.7	Failure to provide and maintain a fire guard for building impairment for the subjected premises for every 50,000 sq feet or part thereof in violation of FC 901.7. Remedy: Provide and maintain a certified fireguard that has an acceptable means of communication with the emergency service .
HPD	27-2018	Abate the nuisance consisting of mice in the room located at B-room 323, 3rd story, 23rd bedroom from north at east.
HPD	27-2018	Abate the nuisance consisting of mice in the entire apartment located at apartment 327, 3rd story, 27th apartment north at east.
HPD	28-2018	Abate the nuisance consisting of roaches in the room located at B-room 508, 5th story.
HPD	27-2005	Repair the broken or defective plastered surfaces and paint in a uniform color ceiling in the kitchenette located at B-room 508, 5th story, 8th B-room from north at east.
HPD	27-2026	Remove all obstructions and repair all defects in waste line at sink in the kitchenette located at APT 606, 6th story.

HOTELS

Hotel

**Julio's Family Place
Bronx**

Inspection Date: 6/5/14

Agency	Violation Code	Description
DOB	28-302.1	Failure to maintain building exterior. Noted spalling chimney cap, brick stack, parapet mortar joints missing. Also hollow space stucco finish at 156st side.
DOB	28-301.1	Failure to maintain building. Noted: rear steal staircase with severe rotted stair tread supports and landing/floor/basement
DOB	28-118.3.2	Occupancy contrary to Dept records. 1st floor to be occupied as apartments now converted to 1 office on 1st floor
DOB	27.766	Failure to provide FAI into gas meter room, went sealed closed at time of inspection
DOB	28-301.1	Failure to provide fire stopping at cellar level. Ceiling holes throughout exposing structural members
DOB	28-301.1	Failure to maintain building in code compliant manner maintenance of plumbing equipment. Inside gas meter room there is no air vent to open air. The existing vent is broken and switch does not open vent for continuous fresh air
DOB	28-105.1	Work without permit. Noted: in cellar water hot and cold drainage, gas lines ran to a sink, toilet, lavatory, stacked washer and dryer with no permits
DOB	PC 107.3, 27-921 (a)	Failure to have new or altered plumbing system tested. As per DOB records there is no recorded information which shows any inspections or tests for any fixtures or appliances on the cellar, washer, dryer, sink, toilet, lavatory.

Hotel

Mike's House
Bronx

Inspection Date: 6/5/14

Agency	Violation Code	Description
DOB	28-301.1	Failure to maintain building. Noted: at apt 5C sloping of floor with floor joist. Damage or bearing wall issue. Approx. 4" inch slope water
DOB	28-301.1	Failure to provide fire stopping at cellar ceiling and pipe penetration in walls
DOB	28-118.3.2	Occupancy contrary to Dept. records. Alt 244-38 stating (4) apartments at floor now converted to (3) apartments and (1) office
DOB	28-105.1	Work noted: work without permit. In cellar water & drainage lines ran to a kitchen sink, wash machine, toilet, shower stall & future connection for a lavatory basin. Remedy: Obtain permit or restore to prior legal condition.
DOB	PC 107.3 (plumbing code) 27.921(a)	Failure to have new or altered plumbing system tested or insp. As per DOB records there is no info which states that there is any ins or tests for any plumbing fixtures in the cellar. Remedy: perform test & inspec.
DOB	28-302.1	Failure to maintain exterior. Noted: metal staircase leading to cellar severely corroded with large holes and deflection when walked on
FDNY	1 RCNY 28-02	Failure to maintain the combination smoke and carbon monoxide alarm in dwelling unit #5C in proper order, in violation of 1 RCNY 28-02
FDNY	FC 1027.1	Failure to maintain emergency lighting in proper order, in violation of FC 1027.1

Agency	Violation Code	Description
DOB	28-301.1	Failure to maintain fire proof self-closing doors. Noted at bulkhead door unable to fully open and getting stuck
DOB	28-105.1	Work without permit: illegal work noted at cellar with the installation of a stand up shower
DOB	28-301.1	Failure to maintain building interior. Noted: loose stair treads, multiple throughout. Also plaster damage at 5th floor wall corridor
DOB	28-302.1	Failure to maintain exterior. Noted: water penetration through bulkhead. Also façade with spalling decorative stone around window/cornice, with cracks and corners of parapet
DOB	PC 107.3 (plumbing code) 27.921(a)	Failure to have new or altered plumbing system insp & tested. As per DOB records there is no recorded info which shows any insp or tests for 2 gas fire & water heaters. Remedy: Perform test & insp.
DOB	FGC 404 (fuel gas code)	Piping and/or equipment installed improperly. In cellar flue pipe for both water heaters is installed incorrectly. (1) The flue run to the chimney from both water heaters is too far for regular top diverters. (2) The size needs to be increased two sizes
DOB	28-105.1	Work without permit. Noted: in cellar 2 gas fired water heaters installed with gas, hot, & cold water lines sent to both gas fired water heaters. Remedy: Obtain permit or restore to prior legal condition.
DOB	28-301.1	Failure to maintain fire stopping at cellar throughout ceiling and walls, pipe penetration
FDNY	FC 906.2.1	Failure to maintain the portable fire extinguishers on the 4th and 3rd floor in proper working order, in violation of FC 906.2.1
FDNY	1 RCNY 428-02	Failure to maintain required smoke alarm and carbon monoxide alarm within 15 ft from sleeping room, in violation of 1 RCNY 428-02
FDNY	FC 1027.1	Failure to maintain emergency lighting in proper order, in violation of FC 1027.1

Agency	Violation Code	Description
DOB	EC-110.2(A)	Unapproved, unsafe, unsuitable electrical equipment, material defective wiring is in use. Noted: Throughout all floors, emergency lighting wall packs. Exit lights do not work. They do not illuminate when power is lost. Remedy: Comply with company code.
DOB	BC Q105	Failure to provide ball drip valve between Siamese & check valve. In cellar the ball drip that has been installed is size of 1/2. Ball drip needs to be 3/4. As per NYC Bldg. Code appendix Q 48.2.2 (i).
DOB	BC 903.6	Failure to paint dedicated sprinkler piping/valves in accordance with local laws 58, 63, 64 of 209 in cellar piping leading to Siamese FDNY connection is not painted red. Remedy: Paint dedicated sprinkler piping.
FDNY	FC 404.6 3 RCNY 404-01 (C)(2)(A)	Failure to prepare and submit to the fire department an acceptable fire safety and evacuation plan for your premises in violation of FC 404.6 and 3 RCNY 404-01 (C)(2)(A) (Summons issued for failure to comply with previously issued violation).
FDNY	1968 BC 27-353.1 (A)	Discontinue storage of combustibile materials in the linen closet or provide approved type of fire protection system. Note: Linen storage room of 1st floor and throughout building if necessary. (1968 BC 27-353.1 (A))
FDNY	FC 901.5	Restore fire alarm system to the proper working order. Note: Upon activation manual control office trip test was not transmitted as per dispatcher #387 (state wide) FC 901.5 (Summons issued for failure to comply with previously issued violation)
FDNY	FC 401.6.5.2	Provide fire safety director and sufficient deputy fire safety director holding certificate of fitness for these premises. (FC 401.6.5.2). (Summons issued for failure to comply with previously issued violation)
FDNY	FC 901.4 BC 27-975	Failure to provide a dedicated means of communication between the elevator and the fire alarm control panel in violation of FC 901.4 and 1968 BC 27-975. Remedy: Provide and maintain an approved type of dedicated means of communication.
FDNY	FC 901.6 NFPA 72	Failure to provide the fire alarm control panel a manual control capability of the transmission and audible reproduction of evacuation tone signal and alert tone signals on a selective and all-call basis in violation of FC 901.6 and NFPA 72. Remedy: Provide and maintain such manual control capability.
FDNY	3 RCNY 404-01(s)	Failure to maintain the fire safety plan log book in proper order, in violation of 3 RCNY 404-01(s). Remedy: Maintain such log book by providing appropriate entries in each section of the book.

Agency	Violation Code	Description
FDNY	FC 907.20	Failure to provide a detailed report of inspection testing and maintenance of the fire alarm and voice communication system in violation of FC 907.20. Note: The system was tested by DGA on 7/7/14 but there is no appropriate report provided. Remedy: Provide and maintain on the premises a detailed report of inspection, testing and maintenance in accordance with NFPA 72-2002.
FDNY	NFPA 25-2002 FC 903.5	Failure to provide and maintain a report on the premises, a detailed report of testing and maintenance of the sprinkler system in accordance with NFPA 25-2002 in violation of FC 903.5. Remedy: Provide and maintain such report. Note: The report of a visual inspection is provided for all state sprinkler and JEM fire only.
FDNY	FC 906.2	Failure to maintain a portable fire extinguisher located on the 2nd floor next to the elevator lobby in proper order in violation of FC 906.2. Note: A pressure gage is damaged. Remedy: Repair or replace the fire extinguisher.
FDNY	3 RCNY 907-01	Failure to maintain a smoke detector maintained of book in proper order in violation of 3 RCNY 907-01. Remedy: Maintain such log book by providing an appropriate entries.
FDNY	FC 907.20	Failure to provide a record of monthly operational test of the central office trip switch in violation of FC 907.20. Remedy: Provide such test or remove the switch by the authorized person and submit a proof of removal of such switch.
FDNY	FC 607.2	Failure to post and maintain an approved type of sign at designated level identifying the elevator car by a numerical or combination of numerical and alphabetical identification in violation of FC 607.2. Remedy: Post and maintain such sign at the approved floor.
FDNY	FC 504.48	Failure to provide an approved type of sign identifying the transmitting antennas in violation of FC 504.48. Remedy: Provide an approved type of sign at least 3 inches in size that reads TRANSMITTER at or near the antenna.
FDNY	FC 901.6	Failure to maintain a carbon monoxide alarm in proper working order in violation of FC 901.6. Remedy: Battery in carbon monoxide alarm located within dwellings Unit #306 removed; replace or repair such alarm.
FDNY	FC 901.6	Failure to maintain a sprinkler system in proper working order in violation of FC 901.6. Remedy: Remove paint from OS & 4 control valves stem located in the cellar of the building.
FDNY	FC 703.1	Failure to maintain a required fire-resistance rating construction for fire carrier in proper order in violation of FC 703.1. Note: Holes in the fire barrier wall of the electrical room in the cellar. Remedy: Repair the wall by providing an approved type of fire stopping.
FDNY	FC 901.6	Failure to maintain the sprinkler system in proper working order in violation of FC 901.6. Remedy: Replace painted sprinkler head caps located in storage rooms on the 4th, 3rd, and 2nd floors.

Hotel

**Ping Hotel
New York**

Inspection Date: 7/8/14

Agency	Violation Code	Description
FDNY	FC 1027.2	Failure to maintain an emergency lighting in proper order in violation of FC 1027.2. Remedy: Repair emergency lighting throughout the building.
HPD	27-2005	Fire escape defective. Replace with new at fire escape 4th story

Agency	Violation Code	Description
DOB	EC-110.2 (A)	Unapproved, unsafe, unsuitable electrical equipment materials devices, appliances wiring in use. Noted: Throughout all the building all floors. Defective wall emergency lighting /exit lights throughout. When power is lost, lights do not illuminate for safe exiting (Must illuminate when power is lost or needed) Noted: Basement open junction boxes, splices, and panel covers. Remedy: comply with electrical code
DOB	EC-110.2 (A)	Unapproved, unsafe, unsuitable electrical equipment materials devices, appliances wiring in use. Noted: At basement level, disconnect switches for each apartment were "cut into" main electrical service switch. UL approval needed for all service switches and disconnects. Must show cut sheets for all approved equipment and devices. Possible metal and metal contact inside possible (debris in front of electrical service.) Remedy: Comply with electrical code.
DOB	28-301.1	Failure to maintain bldg in code compliant manner: Noted water damage evident throughout entire at all levels-interior hallways flrs uneven & buckling at all levels. Cracks evident at window in Apt. 713, cracks evident at entire 204, 304, 404, 504, and 604 line as well as 314.
DOB	28-302.1	Failure to maintain bldg walls: Noted loose missing masonry brick at parapet level & wall near fire escape. Cracked masonry evident at chimney & cracks evident at exposure (3) rear wall throughout all levels. Have licensed professional engineer evaluate exterior wall.
DOB	28-118.3	Altered/changed bldg occupied without a valid certificate of occupancy: Noted temp C of O #102334877-T-I has expired June 17, 2003 and was never renewed or C of O obtained at time of insp entire bldg at all levels are occupied and is operational
DOB	BC 903 NFPA 13 Ch. 8	Sprinkler installation not in accordance with code. In all rooms there is inadequate sprinkler coverage. All sprinkler heads are obstructed by light fixture and 1 sprinkler head does not cover whole room
DOB	28-301.1	Failure to maintain building in code compliant manner re: installation of plumbing equipment. In cellar gas dryers are connected using domestic gas flexes. Needs to be connected w/ ridged pipe.
DOB	BC 1020.2	Failure to provide unobstructed exit passageway. Noted excessive debris evident at interior apts of 503 and 101. Debris blocking front doors & windows; debris consist of personal & household items.

Agency	Violation Code	Description
FDNY	FC 907.15	The protective fire alarm signaling system in this occupancy is currently not being monitored by an FDNY approved central station signaling company in violation of FC 907.15. Remedy: 1. Within the period stipulated on the order you must connect the protective fire alarm spangling system with a central station company that has applied for and received approval from FDNY to retransmit class 3 fire alarm signals within city of NY. 2. A TB60 application from FDNY approved central station company for a class 3 box and terminal assignment will demonstrate compliance. (Summons issued for failure to comply with previously issued violation)
FDNY	FC 901.5	Submit evidence to the bureau of fire prevention Hi-Rise unit that fire alarm system has been issued a letter of approval. This letter of approval to be issued by the fire alarm inspection unit of the bureau of fire prevention. (Summons issued for failure to comply with previously issued violation)
FDNY	FC 901.6	Failure to maintain the fire alarm system in proper working order, in violation of FC 901.6. Note: Multiple alarm signal at the fire alarm control panel. Remedy: Restore and maintain the system in proper working order.
FDNY	FC 901.7	Failure to provide fireguard for buildings impairment for the subjected premises for 50,000 sq. ft. or part thereof in violation of FC 901.7. Remedy: Provide and maintain sufficient fire guards holding certificate of fitness until the violation is complied with.
FDNY	2008 FC 408.9.3	Failure to post and maintain a fire safety notice on each dwelling unit door and common areas in violation of 2008 FC 408.9.3. Remedy post and maintain such notice.
FDNY	2008 FC 408.9.1	Failure to distribute a fire safety guides to building occupants in violation of 2008 FC 408.9.1. Remedy: Provide and distribute such fire safety guides.
FDNY	FC 901.6.3	Failure to provide a person holding a certificate of fitness for these premises to supervise a fire alarm system in violation of FC 901.6.3. Remedy: Provide and maintain a person holding 395 certificate of fitness for these premises.
FDNY	FC 906.1	Failure to provide sufficient amount of portable fire extinguishers on each floor in violation of FC 906.1. Remedy: Provide and maintain sufficient portable fire extinguishers on each floor.
FDNY	FC 907.2	Failure to provide and maintain on the premises a report of inspection, testing, and maintenance of the fire alarm system in accordance with NFPA 72, in violation of FC 907.20. Remedy: Provide and maintain such reports.
FDNY	FC 901.6 1 RCNY 28-01, 28-02	Failure to maintain combination smoke and carbon monoxide alarm in proper working order in violation of FC 901.6 and 1 RCNY 28-01 and 28-02. Remedy: Maintain such alarms in proper working order throughout the premises.

Agency	Violation Code	Description
FDNY	FC 703.1	Failure to maintain required fire resistance barrier wall in proper order in violation of FC 703.1. Note: Fire barrier wall in the boiler room with large hole above the door. Remedy: Repair the required fire barrier wall.
FDNY	FC 901.6	Failure to maintain the sprinkler system in proper order in violation of FC 901.6. Note: Most of the sprinkler heads in interior stairwells and elevator lobby on each floor are loaded. Remedy: Clean or replace loaded sprinkler heads as needed and replace painted sprinkler heads located on the 7th floor next to dwelling unit #703 and on the 3rd floor next to dwelling unit #302.
FDNY	FC 1027.1 1 RCNY 15-10	Failure to maintain fire escapes free of rust in violation of FC 1027.1 and 1 RCNY 15-10. Remedy: Scrape and paint with two (2) coats of paint all fire escapes.
FDNY	FC 1027.2 1968 BC 27-381	Failure to maintain emergency lights throughout the building in proper working order in violation of FC 1027.2 and 1968 BC 27-381. Note: Emergency light fixtures in 6th floor and 5th floor. Remedy: Replace or repair emergency light fixtures and maintain them in proper working order.
FDNY	FC 901.6 1 RCNY 28-01, 28-02	Failure to provide and maintain a smoke and carbon monoxide within each dwelling unit in violation of FC 901.6 and 1 RCNY 28-01 and 28-02. Note: Smoke and carbon monoxide alarm is missing in dwelling unit #215. Remedy: Provide and maintain such alarms within each dwelling unit.
HPD	27-2005	Abate nuisance consisting of collier (excessive clutter) type apt throughout in the entire apartment located at APT 101, 1st story, 1st apartment from South at West
HPD	27-2005	Properly repair with similar material broken vinyl tiles at public hall, 4th story
HPD	27-2005	Replace with new, the broken or defective metal base cabinet at sink in the kitchen located at APT 207, 2nd story, 2nd apartment from North at East
HPD	27-2005	Properly repair with similar material the broken or defective vinyl tiles floor in the 1st room from north located at APT 314, 3rd story, 4th apartment from North at East
HPD	27-2005	Abate the nuisance consisting of air condition unit in the 1st room from north located at APT 215, 2nd story, 1st apartment from East at South
HPD	27-2005	Properly repair with similar material the broken or defective vinyl tiles floor in the 1st room from north located at APT 504, 5th story, 1st apartment from West at North
HPD	27-2005	Repair the broken or defective plastered surfaces and paint in a uniform color ceiling in the bathroom located at APT 605, 6th story, 1st apartment from South at West

Hotel

**Frant Hotel
New York**

Inspection Date: 7/8/2014

Agency	Violation Code	Description
HPD	27-2005	Trace and repair the source and abate the nuisance consisting of mold. At ceiling in APT. 710 approx. 16 sq. ft. in the 1st room from North located at APT PH, 7th story, 3rd apartment from South at West

Agency	Violation Code	Description
DOB	28-302.1	Failure to maintain bldg. walls. Noted at parapet level masonry brick, mortar is cracked & missing. Also cracks evident at exposure (4) wall at right side of bldg. above windows & mid section at exposure (1 and 2) along parapet level. Have a licensed PE evaluate structure.
DOB	28-105.1	Work without a permit. Noted at right side yard the installation of metal & glass enclosure approx. 16' x 4' x 20' high. Extension is now being used for storage. No stability or details provided. Remedy: Obtain permits.
DOB	28-301.1	Failure to maintain bldg. in code compliant manner Re: installation of plumbing equipment. In cellar a large gas dryer is connected with a gas flex which should be ridged piping. Also a shut off valve was not seen or visible at the dryer location.
DOB	28-301.1	Failure to maintain bldg. in code compliant manner Re: At roof two 4" stack vent were cut down and not at their proper height which is 7'. Remedy: Extend stack to 7'.
DOB	28-301.1	Failure to maintain building in code compliant manner. Lack of automatic sprinkler system where required. Throughout the building all the rooms the sprinkler heads are obstructed from light fixture and coverage of 1 head does not cover entire room. Garbage rooms on all floors have no sprinkler heads
DOB	BC 903.5 NFPA 13 CH. 15.	Insufficient sources of water supply for sprinkler system. In cellar there is 2 1/2 fire service entering the bldg., the most 2 1/2 will cover up to 30 sprinkler heads. Piping is too small.
DOB	BC 1020.2	Failure to provide unobstructed exit passageways noted @ interior apts 611, 509, 512, 511, 515, 516, 503, 505, 405, 411, 416, 316, 311, 210 & other locations throughout - fire escape windows are blocked with furniture and household items (cribs and beds). Also debris observed on fire escape.
FDNY	FC 901.6	Failure to maintain modified class J fire alarm system in proper working order in violation on FC 901.6. Note: Upon activation of a manual pull station on the 1st floor the signal was retransmitted as a trouble. Smoke detector in the elevator machine room removed. Remedy: Restore and maintain modified class J fire alarm system in proper working order. (Summons issued)
FDNY	FC 401.7	Failure to provide and maintain a fire guard for building impairment for the subjected premises in violation of FC 401.7. Remedy: Provide a person holding F01 certificate of fitness a fire guard for building impairment responsible to notify an emergency service (FDNY) upon activation of the fire alarm unit item #1 is complied with. (Summons issued)

Agency	Violation Code	Description
FDNY	FC 404.6 3 RCNY 404.01	Failure to prepare and submit to the fire department an acceptable fire safety and evacuation plan for these premises in violation of FC 404.6 and 3 RCNY 404.01. Remedy: Prepare and submit to the emergency planning and preparedness group or the fire department the acceptable fire safety and evacuation plan for these premises. (Summons issued)
FDNY	FC 401.6.2.1	Provide and train a fire brigade for these premises consisting of qualified building service employees. (Summons issued)
FDNY	FC 901.4 BC 27-975	Failure to provide a dedicated means of communication between the elevator car and the fire alarm control panel, in violation of FC 901.4 and 1968 BC 27-975. Remedy: Provide and maintain a dedicated two-way means of communication system between the elevator car and the fire alarm control panel.
FDNY	FC 901.6 NFPA 72	Failure to provide at the fire alarm control panel a manual control capability of the transmission audible reproduction of evacuation tone signal and alert tone signals on selective and all-call basis, in violation of FC 901.6 and NFPA 72. Remedy: Provide and maintain such control.
FDNY	3 RCNY 907-01	Failure to maintain a fire alarm log book, in violation of 3 RCNY 907-01. Remedy: Maintain such log book providing an appropriate entries in all sections.
FDNY	3 RCNY 404-01	Failure to maintain the fire safety plan log book in proper order in violation of 3 RCNY 404-01(s). Remedy: Maintain such log book by providing an appropriate entries in each section.
FDNY	FC 903.5 NFPA25-2002	Failure to provide and maintain on the premises a detail report of testing and maintenance of the sprinkler system in accordance with NFPA 25-2002 in violation of FC 903.5. Note: a monthly visual inspection of the system performed monthly. Remedy: Provide and maintain such reports.
FDNY	FC 607.4	Failure to provide and maintain on the premises a report of a monthly operational test of the elevator car equipped with firemen's service in violation of FC 607.4. Remedy: Provide and maintain such reports.
FDNY	FC 907.20	Failure to provide a record of a monthly operational test of the central office trip switch in violation of FC 907.20. Remedy: Provide and maintain such report.
FDNY	FC 1027.2 1 RCNY 27-01	Failure to provide and maintain an approved type of sign identifying the elevator bank on each floor in violation of FC 1027.2 and 1 RCNY 27-01. Remedy: Post and maintain sign.
FDNY	FC 1027.2	Failure to maintain means of egress free of obstruction and readily accessible at all times in violation of FC 1027.2. Note: Access to fire escape in most of dwelling units is obstructed. Remedy: Provide and maintain means of egress free of any obstructions.

Agency	Violation Code	Description
FDNY	FC 1027.2 1 RCNY 10-15	Failure to maintain fire escapes free of rust in violation of FC 1027.2 and 1 RCNY 15-10. Remedy: Scrape and paint with two (2) coats of paint all fire escapes.
FDNY	FC 1027.1 BC 27-381	Failure to maintain emergency lighting throughout the building in proper working order in violation of FC 1027.1 and 1968 BC 27-381.
FDNY	FC 703.2	Failure to maintain required fire doors in proper order in violation of FC 703.2. Remedy: Maintain all doors leading to the boiler room normally in closed position.
FDNY	FC 1027.1 1 RCNY 27-01 BC 27-393	Failure to post approved type of signs identifying each stairwell by an alphabetical letter in violation of FC 1027.1, 1 RCNY 27-01 and 1968 BC 27-393. Remedy: Post and maintain an approved type of signs on both sides of each door leading into stairwell.
FDNY	FC 1027.1	Failure to properly install exit sign on the 4th floor in violation of FC 1027.1 and 1968 BC 27-383. Note: Exit sign installed above the door leading into recycle room. Remedy: Remove such sign.
FDNY	FC 901.6	Failure to maintain the smoke detector located in elevator lobby at roof level in proper order in violation of FC 901.6. Remedy: Provide and maintain such detector to be properly attached.
FDNY	FC 703.2	Failure to maintain fire doors in proper order in violation of FC 703.2. Remedy: Provide a re-attaching mechanism on each exit door provide missing exit door on the 2nd and the 1st floor.
FDNY	FC 703.1	Failure to maintain the required fire resistance rating of ceiling floor assembly in the laundry room in the cellar in proper order in violation of FC 703.1. Remedy: Repair the ceiling in the laundry room in the cellar.
FDNY	FC 406.2	Failure to perform fire drills with all occupants of the homeless shelter on the monthly basis in violation of 2008 FC 406.2. Remedy: Perform drills with all occupants and maintain a records of such in the fire safety plan log book.
FDNY	FC 607.2	Failure to post and maintain an approved type of sign at designated level identifying each elevator car by the numerical or combination of numerical and alphabetical identification in violation of FC 607.2. Remedy: Provide and maintain an approved type of sign minimum of 3 inch height adjacent to or on every elevator entrance on the 1st floor.
HPD	27-2005	Repair the broken or defective plastered surfaces and paint in a uniform color ceiling in the 1st room from North located at APT 506, 5th story, 2nd apartment from South at West.
HPD	27-2046.1	Repair or replace the carbon monoxide detecting device(s). Missing in the entire apartment located at APT 512 , 5th story, 1st apartment from North at East.
HPD	27-2005 309 M/D Law	ADM code & 309 M/D Law abate the nuisance consisting of bed blocking egress to fire escape APT 611 in the entire apartment located at APT PH, 6th story, 2nd apartment from West at North.

Hotel

**Lincoln Atlantic Motor Inn
Queens**

**Inspection Date:
8/20/2014**

Agency	Violation Code	Description
DOB	28.105.1	Work without permit. Illegal steel beams and Q deck at cellar level, no permit for steel. Remedy: Obtain permit
DOB	28-301.1	Failure to maintain. Noted steel in the cellar boiler room not fireproofed, Also pipe penetrations through steel web. Remedy: Provide drawing of new steel and Q deck with engineers report for pipe penetration through web.
DOB	28-301.1	Failure to maintain bldg. Noted storage in bulkhead with bathroom cabinet stair "A." Also noted business sign at front property missing front cover exposing lighting fixture within. Remedy: Make safe.
DOB	EC 110.2 (A)	Unapproved, unsafe, unsuitable, electrical equipment materials, devices, appliance, or wiring is in use. Noted: All levels throughout hallways, stairwells, rooms, exit signs, wall packs, emergency lighting does not illuminate when power is lost. (Nec Article 700.6 Emergency Illuminate)
DOB	EC 110.2 (A)	Unapproved, unsafe, unsuitable, electrical equipment materials, devices or wiring is in use. Noted: All levels throughout building, open splice boxes, junction boxes, & covers are missing. Open to the public shock hazard. All boxes must be covered and secured.
DOB	28-301.1	Use or installation of plumbing materials or equipment which do not comply with RS-16. During physical inspection I observed 2 dryers installed in the 1st floor laundry room with flexible gas connectors. Solid piping must be used when there are 2 or more dryers installed. (Summons issued for failure to comply with prior violation order).
FDNY	FC 901.6	Failure to maintain the modified class J-1 fire alarm and voice communication system in proper working order in violation of FC 901.6. Note: The 2 way voice communication system is out of service. Remedy: Restore the modified class J-1 fire alarm and voice communication system in proper working order. (Summons issued)
FDNY	FC 901.7	Failure to provide and maintain the fireguard for building impairment for the subject premises for every 50,000 sq. feet or part of until VO# E356087 is complied with in violation of FC 901.7. Remedy: Provide and maintain a certified fire guard for impairment that has an acceptable method of communication with emergency service and a record of inspections shall be maintained on the premises instructions found in the F-01 guide for fire guard for building impairment. (Summons issued)
FDNY	FC 607.0	Failure to maintain phase I emergency recall and phase II emergency in-service operation to be kept in proper working order at all times in violation of FC 607.1
FDNY	FC 1027	Make arrangements to remove all obstruction which are impeding means of egress in stair "A" on the 1st floor and the roof in violation of FC 1027.

Hotel

**Lincoln Atlantic Motor Inn
Queens**

**Inspection Date:
8/20/2014**

Agency	Violation Code	Description
FDNY	27-975	Failure to maintain two-way voice communication capability between the fire command station and the elevators as required in violation of 27-975 of the administrative code.
FDNY	FC 703.1	Failure to provide fire stopping in through penetration of fire rated walls in violation of FC 703.1
FDNY	FC 605.31	Failure to provide an approved type sign on each electrical closet door in violation of FC 605.31.

Agency	Violation Code	Description
DOB	B239 28-301.1	Failure to provide fire stopping 2nd floor mechanical room pipe penetrations. Also, 1st floor sprinkler room open penetrations. Remedy: Seal holes.
DOB	B226 28-301.1	Failure to maintain, illegal hardware at 1 floor staircase key cylinder in place also key cylinder on exit doors from day care. Remedy: Remove illegal hardware.
DOB	B235 BC 1019.1.7 27-393	Failure to provide stair identification signage throughout staircases not labeled or numbered at the time of inspection. Remedy: Comply with code.
DOB	B202 28-301.1	Failure to maintain noted storage of misc. debris equipment inside mechanical rooms. Remedy: Remove storage.
DOB	B266 28-301.1	Use or installation of plumbing materials or equipment which do not comply with 25-1. During physical inspection I observed flexible gas connectors connected on 2 dryers in the 1st floor staff laundry room. Also noted gym caps and Fernco couplings installed on the exposed waste line in the basement. Gas piping must be solid when there are 2 or more dryers installed. Fernco couplings and gym caps are not allowed on waste lines. Remedy: Remove non-complying material or equipment.
DOB	B202 28-301.1	Failure to maintain building in code compliance manner. During physical inspection I observed sewer lines cleanouts and traps left uncapped in the basement storage area. There are also washing machines in use without vacuum breakers installed in the 1st floor staff laundry room. Cages must also be provided on low and reachable sprinklers on the 1st floor and basement. Remedy: Repair and/or replace.
DOB	B102 EC-110.2 (A)	Unapproved, unsafe, unsuitable electrical equipment materials, devices, appliances or wiring in use. Noted: Throughout all levels, floors, mechanical rooms, closets, open electrical boxes throughout open splice boxes. All boxes must be closed. Remedy: Comply with electrical code.
DOB	B102, EC-110.2 (A)	Unapproved, unsafe, unsuitable electrical equipment, apparatus, materials, devices or wiring in use. Noted: Throughout all floors, levels, stairwells and hallways emergency lighting emergency exit sign. Wall perks do not illuminate when de-energized. Remedy: Comply with electrical code (Nec Article 700.16 Emergency illumination)
DOB	B311 EC-MISC	Misc violations of the national electrical technical standards (Nec 110.25). Noted: At all electrical closets surge is not provided on main entrance door. Main door must be labeled (Amendment 110.25). Remedy: Provide proper signage for electrical rooms.
FDNY	3 RCNY 901-04	Failure to prepare and submit to the fire department an acceptable fire safety and evacuation plan for these premises in violation of 3 RCNY 901-04. Remedy: Prepare and submit to the fire department emergency planning and preparedness group the acceptable fire safety and evacuation plan for homeless shelter.

Agency	Violation Code	Description
HPD	27-2018	Abate the nuisance consisting of roaches in the entire apartment located at APT 143, 1st story, 2nd apartment from north at east.
HPD	300 M/D	Law file plans and application and legalize the following alteration or restore to the legal condition existing prior to the making of said alteration drop ceiling in the 1st room from east located at APT 143, 1st story, 2nd apartment from north at east.
HPD	27-2018	Abate the nuisance consisting of roaches in the entire apartment located at APT 243, 2nd story, 4th apartment from south at west.
HPD	27-2043.1	HMC install the missing or repair/replace the defective window guard (s) in accordance with specifications of the New York City health code section 24 RCNY chapter 12. WG to install= 0; WG to replace=0; WG to repair=1 in the entire apartment located at APT 246, 2nd story, 6th apartment from north at east.
HPD	27-2018	Abate the nuisance consisting of roaches in the entire apartment located at APT 247, 2nd story.

Hotel

Kingston Family Residence
Queens

Inspection Date: 8/19/2014

Agency	Violation Code	Description
DOB	28-105.1	Work without permit; Illegal work noted at cellar with the installation of steel beam reinforcement throughout; shoring in place under main entrance.
DOB	28-301.1	Failure to maintain building; noted structural steel throughout cellar not fire proofed
DOB	28-105.1	Work without permit; illegal work noted at cellar level with the erection of 2 bathrooms, sink and toilet, no permit on file
DOB	BC-1021.2; 27-375(i)1(g)	Failure to provide the required two hour fire-resistant rating at staircase enclosure and dividing wall; J1 occupancy group shall be of masonry or an equivalent material having at least a two hour rating
DOB	ZR 32-00	Illegal use in a Commercial District (C8-2), Noted Apartment Hotel Class 'A' apartments with permanent housing, converted from transient hotel rooms, converted from (use Group 5) to (use Group 2)
DOB	27-363(6)(2)	Failure to provide to required travel distance. Required in a J-1 Occupancy Group for exits serving spaces classified in other occupancies, in no event shall such distance be less than 30 feet or one third the maximum travel distance, whichever is greater. In Occupancy Group G or J-2 less than 30 feet from each other permitted.
DOB	28-118.3.2	Occupancy contrary to that allowed by the CO #301534524, noted transient hotel rooms converted to permanent housing Class 'A' apartment building. Used as family shelter with over 2 years of tenant living.
DOB	28-105.1	Work without a permit. During physical inspection I observed 1 lavatory, 2 toilets and related waste hot/cold water lines installed in the cellar without permit. #301534524 shows only 1 lavatory in the cellar. Remedy: Obtain permit.
FDNY	FC 401.652	Failure to comply with violation order E3544. I personally observed the defendant fail to provide fire safety directions for these premises as required. FC 401.652.
FDNY	FC 401.6.5.2	Failure to provide a fire safety director and sufficient deputy fire safety directors holding a certificate of fitness for these premises in violation of FC 401.6.5.2. Note: The premises are protected by the modified J fire alarm and voice communication system. Remedy: Provide sufficient amount of people holding a certificate of fitness for these premises as a fire safety director.
FDNY	E357446	Failure to comply with VO# E357446 to provide a letter of approval for the fire alarm system.
FDNY	FC 907.17	Submit evidence to the bureau of fire prevention, high rise unit that modified class J fire alarm and voice communication system has been issued a letter of approval from the fire alarm inspection unit of the bureau of fire prevention as per FC 907.17. Make arrangement for the above letter of approval to be kept on file at the subject premises for review by the fire department at any time.
FDNY	FC 506.2.1	Failure to maintain the firefighter service key switches are operable by a fire department standard key (#1620) in violation of FC 506.2.1.

Agency	Violation Code	Description
FDNY	FC 901.6	Failure to replace missing sprinkler head located in the storage room in the basement in violation of FC 901.6.
FDNY	27-975	Failure to provide two-way voice communication capability between the fire command station and the elevators as required in violation of administrative code 27-975.
FDNY	27-975	Failure to provide means to test fire alarm tones as required in violation of 27-975 of the administrative code.
FDNY	FC 907.20.5	Restore the fire alarm and voice communication system back to proper working order in violation of FC 907.20.5. Note: Upon activation of a pull station panel does not indicate what floors are in alarm.
FDNY	FC 315.2.3	Discontinue illegal storage of combustibile materials in the electrical switch gear room in violation FC 315.2.3.
FDNY	BC 1019.1.1	Failure to provide that stair doors be self-closing and have re-latching capability, BC 1019.1.1.
FDNY	VC 14: Fired Rated Doors and Windows	Failure to provide fire proofing in through penetration located in the basement.
FDNY	FC 607.5	Failure to conduct monthly operational test of elevators equipped with firemen's service and maintain a record of such in violation of FC 607.5.
FDNY	FC 907.20.5	Failure to repair defective smoke detector located in apartment "4I" in violation of FC 907.20.5.
FDNY	BC 1026.2	Failure to post an approved sign on every floor reading "in case of fire use stairs unless otherwise instructed and sign must identify the elevator back in violation of BC 1026.3

CLUSTERS

Agency	Violation Code	Description
DOB	EC 110.2(A)	Unapproved, unsafe, unsuitable electrical equipment, defective wiring in use. At basement level, open live junction boxes, open splices throughout all of area, outlet boxes (314.25). Armored cables not socked throughout (320.30). Open panel covers in basement electrical room live and exposed fuses, cables, wires open for shock hazard. Also noted electrical room used as storage, sheetrock, plants other debris noted (must be cleared). Remedy: comply with electrical code.
DOB	EC 110.2(A)	Unapproved, unsafe, unsuitable electrical equipment, defective wiring in use. Throughout entire, all floors, all hallways passages, emergency wall packs, exit lighting is defective. When power is lost lights do not illuminate properly. Defective, missing lights, cracked, loose, hanging 1x4 ceiling lights on hallway area, hanging covers not supported electrical tape holding them.
DOB	28-105.1	Work without permit work. Noted: in cellar water drainage gas lines ran to a 3 piece bathroom (tub, lavatory, toilet, kitchen sink and gas stove) in supers apartment. All work done with no permit. Photos taken. Obtain permit to restore to prior legal condition.
DOB	BC 1020.2	Failure to provide unobstructed exit passageway. Noted: Roof bulkhead exit door keyed locked without panic device totally obstructing exit to roof (2 fire escape access points on roof).
DOB	28-302.1	Failure to maintain building wall(s) or appurtenances at east side yard north elevation of south east wing brick façade cracked vertically with deteriorated/missing mortar joints. At east and south yard passage ways concrete ceilings cracked/spalling with exposed rusted steel reinforcement.
DOB	28-210.1 28-202.1	Residence altered for occupancy as a dwelling for more than the legally approved number of families. Premises altered from 35 families to 36 families. Building records (HPD I Card Reg # 201704) indicates 1 class "A" apt in cellar/basement, 6 class "A" apts on 1st story and 7 class "A" apts. Floors 2-5 additional class "A" apt observed in cellar increasing apt count from 35 to 36 families (3pc bath, full kitchen, and bedrooms in each apt).
FDNY	FC 906.2	Failure to maintain a record of an annual maintenance of all portable fire extinguishers by the authorized company in violation of FC 906.2.
FDNY	FC 1027.2	Failure to maintain means of egress free of obstruction and readily accessible in violation of FC 1027.2. Note: Electromagnetic door locks installed on the final exit door at the second floor requiring a double action to operate the door access to proof required a key. Remedy: Remove illegal electromagnetic door lock from the final exit door, remove illegal lock from the roof door.
FDNY	FC 1027.2 1 RCNY 15-10	Failure to maintain fire escapes free of rust in violation of FC 1027.2 and 1 RCNY 15-10. Remedy: Scrape and paint with two coats of paint all fire escape. Repair the fire escape on the north side of the roof.

Agency	Violation Code	Description
FDNY	FC 901.4 1 RCNY 28-02	Failure to provide an approved type of carbon monoxide alarm within 15 feet to any sleeping room in violation of FC 901.4 and 1 RCNY 28-02. Note: Dwelling unit #E3. Remedy: Provide and maintain an approved type of carbon monoxide alarms as needed.
FDNY	FC 901.6 1 RCNY 28-01,02	Failure to maintain installed smoke alarms, carbon monoxide alarms and combination of smoke and carbon monoxide alarms in proper working order in violation of FC 901.6 and 1 RCNY 28-01 and 28-02. Note: Dwelling units # E3, E4, E1, D5. Remedy: repair or replace defective alarms as needed throughout the building.
FDNY	FC 1027.2	Failure to maintain a company light fixture on the 1st floor and the 4th floor in proper working order in violation of FC 1027.2. Remedy: Replace or repair defective light fixtures as needed.
FDNY	2008 FC 408.9.1	Failure to distribute a fire safety guides to building occupants in violation of 2008 FC 408.9.1. Remedy: Distribute fire safety guides to all building occupants.
FDNY	2008 FC 408.9.3	Failure to post a fire safety notice on each dwelling unit door throughout the buildings in violation of 2008 FC 408.9.3. Remedy: Post and maintain a fire safety notice on each dwelling unit door throughout the building from the occupancy side of the door.
HPD	27-2005	Remove the illegal fastening consisting of a electromagnetic lock set at entrance door to building.
HPD	27-2005	Replace with new the missing hand rail at west wall in vestibule leading to 1st sty.
HPD	27-2005	Properly repair with similar material the broken or defective ceramic floor tile in the kitchen located at APT A1, 1st story , 1st apartment from north to east.
HPD	27-2043.1	Install the missing or repair/replace the defective window guard(s) in accordance with the specifications of the New York City health code section 24 RCNY Chapter 12. In the entire apartment located at APT A1, 1st story , 1st apartment from the North to East.
HPD	27-2018	Abate the nuisance consisting of roaches in the entire apartment located at APT A1, 1st story , 1st apartment from North at East.
HPD	27-2018	Abate the nuisance consisting of mice in the entire apartment located at APT A1, 1st story , 1st apartment at North at East
HPD	27-2013	Paint with light colored paint to the satisfaction of this department walls an ceiling in the 2nd room from east located at APT B7, 2nd story , apartment at North.
HPD	27-2026	Properly repair the source and abate the evidence of a water leak from the ceiling at North wall in the 2nd room from East located at APT B7, 2nd story , apartment at North.
HPD	27-2043.1	Install the missing or repair/replace the defective window guard(s) in accordance with the specifications of the New York City health code section 24 RCNY Chapter 12. One way screws needed in the entire apartment located at APT B7, 2nd story, apartment at North.

Agency	Violation Code	Description
HPD	27-2018	Abate the nuisance consisting of roaches in the entire apartment located at APT C6, 3rd story , 3rd apartment from South at West.
HPD	27-2018	Abate the nuisance consisting of mice in the entire apartment located at APT C6, 3rd story , 3rd apartment from South at West.
HPD	27-2018	Abate the nuisance consisting of mice in the entire apartment located at APT C7, 3rd story , apartment at North.
HPD	27-2018	Abate the nuisance consisting of roaches in the entire apartment located at APT C7, 3rd story , apartment at North.
HPD	27-2018	Abate the nuisance consisting of mice located at APT D1, 4th story , 1st apartment from North at East.
HPD	27-2018	Abate the nuisance consisting of roaches located at APT D1, 4th story , 1st apartment from North at East.
HPD	27-2005	Properly repair with similar material the broken or defective wood floor at the radiator in the 3rd room from East at North located at APT D1, 4th story , 1st apartment from North at East.
HPD	27-2005	Remove all illegal fastening consisting of a key operated padlock installed on door, impeding egress to fire escape in the 1st room from east at north located at APT D1, 4th story , 1st apartment from North at East.
HPD	27-2005	Properly repair with similar material the broken or defective wood floor in the kitchen located at APT D5, 4th story, 2nd apartment from South at West.
HPD	27-2005	Trace and repair the source and abate the nuisance consisting of mold on the North wall and West wall in the bathroom located at APT D5, 4th story , 2nd apartment from South at West.
HPD	27-2018	Abate the nuisance consisting of mice in the entire apartment located at APT D5, 4th story , 2nd apartment from South at West.
HPD	27-2018	Abate the nuisance consisting of roaches in the entire apartment located at APT D5, 4th story , 2nd apartment from South at West.
HPD	27-2005	Properly repair the broken or defective ceiling light fixture in the 2nd room from north at west located at APT D5, 4th story , 2nd apartment from South at West.
HPD	27-2005	Properly repair with similar material the broken or defective vinyl floor tile in the kitchen located at APT D5, 4th story , 2nd apartment from South at West.
HPD	27-2005	Properly repair with similar material the broken or defective vinyl floor tile in the 2nd room from north at east located at APT D5, 4th story , 2nd apartment from South at West.
HPD	27-2005	Properly repair with similar material the broken or defective wood floor in the 2nd room from north at east located at APT D5, 4th story , 2nd apartment from South at West.
HPD	27-2018	Abate the nuisance consisting of mice in the entire apartment located at APT E1, 5th story , 1st apartment from North at East.

Agency	Violation Code	Description
HPD	27-2018	Abate the nuisance consisting of roaches in the entire apartment located at APT E1, 5th story , 1st apartment from North at East.
HPD	27-2005	Repair the broken or defective plastered surfaces and paint in a uniform color ceiling in the kitchen located at APT E1, 5th story , 1st apartment from North at East.
HPD	27-2005	Repair the broken or defective plastered surfaces and paint in a uniform color ceiling in the foyer located at APT E1, 5th story , 1st apartment from North at East.
HPD	27-2045	Repair or replace the smoke detector missing located at APT E3, 5th story , 3rd apartment from North at East.
HPD	27-2005	Trace and repair the source and abate the nuisance consisting of mold at the West wall and ceiling in the bathroom located at APT E3, 5th story , 3rd apartment from North at East.
HPD	27-2046.1	Repair or replace the carbon monoxide detecting device(s) missing located at APT E3, 5th story , 3rd apartment from North at East.
HPD	27-2018	Abate the nuisance consisting of mice in the entire apartment located at APT E3, 5th story , 3rd apartment from North at East.
HPD	27-2018	Abate the nuisance consisting of roaches in the entire apartment located at APT E3, 5th story , 3rd apartment from North at East.
HPD	27-2005	Remove the illegal fastening consisting of a key operated lockset at door impeding egress to fire escape in the 3rd room from north at east located at APT E3, 5th story, 3rd apartment from North at East.
HPD	27-2013	Paint with light colored paint to the satisfaction of this department walls an ceiling in the bathroom located at APT E3, 5th story , 3rd apartment from North at East.
HPD	27-2018	Abate the nuisance consisting of mice in the entire apartment located at APT E4, 5th story , 1st apartment from South at West.
HPD	27-2045	Repair or replace the smoke detector that is broken located at APT E4, 5th story , 1st apartment from South at West.
HPD	27-2005	Replace with new the broken or defective lower sash glass pane window in the kitchen located at APT E4, 5th story , 1st apartment from south at west.
HPD	27-2005	Replace with new the missing marble floor saddle in the entrance located at APT E4, 5th story , 1st apartment from south at west.
HPD	27-2046.1	Repair or replace the carbon monoxide detecting devices that is broken located at APT E4, 5th story , 1st apartment from South at West.

Cluster**Bronx Neighborhood
Annex
Lafayette Avenue, BX****Inspection Date: 7/9/14**

Agency	Violation Code	Description
DOB	EC110.2A	Unapproved unsafe, unsuitable electrical equipment apparatus materials or defective wiring is in use. Throughout the entire building/all floors defective wall pack emergency lighting does not work. When power button depressed, emergency light does not illuminate. Remedy: Comply with electrical code.
DOB	EC-MISC	Misc. violations of the electrical code technical standards. At basement level, open junction boxes throughout entire basement. Exposed live cables throughout. Exposed spliced cables throughout. All boxes must be closed. All splices must follow electrical code standards and regulations. Remedy: Comply with electrical code.
DOB	EC-MISC	Misc violations of the electrical technical standards. Electrical room/area is being used as storage. Misc debris is not front of all electrical meters and switches. Work space not provided for electrical equipment in basement (110.26). Remedy: Comply with electrical code.
DOB	28-301.1	Failure to maintain building in code complaint manner re: maintenance of plumbing material, water leaking at base at tank. In cellar with photos taken observation has been made. 1. At the base of gas-riser for the G line there is an open gas connection that is not capped off. 2. Main gas run-in the center of the cellar is beginning to rust.3. A 3/4 gas branch line off of main gas run is connected with a bus hinge should be a compiling. Remedy: Remove non complying material.
DOB	28-301.1	Failure to maintain building in code complaint manner. Noted: At roof Masonry brick chimney dislodged bricks, loose mortar joints, cracked bricks. At parapet adjacent to chimney missing coping. Remedy: Repair and/or replace defects noted.
DOB	28-302.1	Failure to maintain building wall(s) or appurtenances. Noted: At rear yard retaining wall approx 15 feet long x 9 feet high cracked bulging. Make safe immediately. Remedy: Maintain retaining wall: Provide structural stability report from a licensed P.E. for conditions.
DOB	28-301.1	Failure to maintain building in code-compliant manner. Dumbwaiter shaft(s) that are out of service not sealed as per department of buildings rules & regulations (directive 3 of 1964). At basement 2 shafts not sealed at ceiling. Make safe immediately. Remedy: Seal shafts in a code compliant manner.
FDNY	2008 FC 408.9.1	Failure to distribute a fire safety guide to building occupants in violation of 2008 FC 408.9.1. Remedy Distribute a fire safety guide to building occupants.
FDNY	2008 FC 408.9.3	Failure to post a fire safety notice on each dwelling unit door throughout the building in violation of 2008 FC 408.9.3. Remedy: Post and maintain fire safety notice on each dwelling unit door.

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Annex

Lafayette Avenue, BX

Agency	Violation Code	Description
FDNY	FC 1027.2	Failure to maintain means free of obstruction and readily accessible at all times, in violation of FC 1027.2. Note: Electromagnetic door locks installed on the exit door at the ground floor such requirement double action operation to open the door. Remedy: Remove illegal electromagnetic door lock from the final exit door.
FDNY	FC 906.2.1	Failure to maintain a record of annual maintenance of all portable fire extinguishers by the authorized person in violation of FC 906.2.1. Remedy: Provide such records for each fire extinguisher.
FDNY	FC 901.6 1 RCNY 28-01, 28-02	Failure to maintain smoke alarms, carbon monoxide alarms and combination of smoke and carbon monoxide alarms in proper working order in violation of FC 901.6 and 1 RCNY 28-01 and 28-02. Note: Most of alarms throughout the buildings are out of service.
FDNY	FC 703.2	Failure to maintain required fire doors in proper order in violation of FC 703.2. Note: The doors to the boiler room is too small with large gap on the top. Door to one of the apartment in the basement is missing. Remedy: Replace defective and missing doors.
FDNY	FC 703.1	Failure to maintain required fire walls in proper order in violation of FC 703.1. Note: Holes in fire wall separating the boiler room and the apartment in the basement. Remedy: Provide and maintain an approved type of fire-stopping system to close the holes.
FDNY	FC 1027.1 1968 BC 27-382	Failure to maintain an emergency light fixtures in proper working order, in violation of FC 1027.1 and 1968 BC 27-382. Remedy: Repair or replace defective emergency light fixtures throughout the building.
HPD	27-2010, 2011, 2012	Remove the accumulation of refuse and/or rubbish and maintain in a clean condition the east yard
HPD	27-2043.1	Install the missing or repair/replace the defective window guard(s) throughout the public areas in accordance with the specifications of the NY City Health code section 24 RCNY chapter 12. At public hall.
HPD	27-2005	Fire escape defective. Properly secure shoe at drop ladder northeast fire escape in front of building.
HPD	27-2005	Provide (in the event of a power outage) a heavy duty key operated lock and latch set, 1st story
HPD	27-2005, 2007	Remove all illegal fastening consisting of a electromagnetic lock set at entrance door to building, 1st story
HPD	27-2005	Properly repair with similar material the broken or defective vinyl floor tile in the 1st room from north at west located at APT 1E, 2nd story, 3rd apartment from North at East.
HPD	27-2043.1	Install the missing or repair/replace the defective window guard(s) in accordance with the specifications of the New York City health code section 24 RCNY Chapter 12. In the entire apartment located at APT 1E, 2nd story, 3rd apartment from the North at East.

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Agency	Violation Code	Description
HPD	27-2026	Repair the flushing apparatus and maintain same so as to flush effectively the water closet bowl in the bathroom located APT 1E, 2nd story, 3rd apartment from North at East
HPD	27-2005	Properly repair with similar material the broken or defective vinyl floor tile in the 3rd room from the North at West located at APT 1E, 2nd story, 3rd apartment from North at East.
HPD	27-2045	Repair or replace the smoke detector that is broken located at APT 1E, 2nd story, 3rd apartment from North at East.
HPD	27-2005	Properly repair with similar material the broken or defective vinyl floor tile in the kitchen located at APT 1E, 2nd story, 3rd apartment from North at East.
HPD	27-2005	Properly repair with similar material the broken or defective wood floor in the kitchen located at APT 1E, 2nd story, 3rd apartment from North at East.
HPD	27-2005	Properly repair with similar material the broken or defective wood floor in the 1st room from North at West located at APT 1E, 2nd story, 3rd apartment from the North at East.
HPD	27-2018	Abate the nuisance consisting of roaches in the entire apartment located at APT 1E, 2nd Story, 3rd apartment from North at East.
HPD	27-2005	Properly repair with similar material the broken or defective vinyl floor tile in the 2nd room from the North at West located at APT 1E, 2nd story. 3rd apartment from the north at East.
HPD	27-2018	Abate the nuisance consisting of mice in the entire apartment located at APT 1E, 2nd Story, 3rd apartment from North at East.
HPD	27-2043	Install the missing or repair/replace the defective window guard(s) in accordance with the specifications of the New York City health code section 24 RCNY Chapter 12. In the entire apartment located at APT 1E, 2nd story, 3rd apartment from the North at East.
HPD	27-2005	Properly repair with similar material the broken or defective wood floor in the 3rd room from North at West located at APT 1E, 2nd story, 3rd apartment from the North at East.
HPD	27-2005	Properly repair with similar material the broken or defective wood floor in the 2nd room from North at West located at APT 1E, 2nd story, 3rd apartment from the North at East.
HPD	27-2026	Reset, so as to secure a proper and tight connection, the wear closet bowl in the bathroom located at APT 1E, 2nd story, 3rd apartment from the North at East.
HPD	27-2005	Properly repair with similar material the broken or defective ceramic floor tile in the bathroom located at APT 1E, 2nd story, 3rd apartment from the North at East.
HPD	27-2005	Properly repair with similar material the broken or defective vinyl floor covering in the private hallway located at APT 2B, 3rd story, apartment at North.

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Agency	Violation Code	Description
HPD	27-2005	Replace with new the broken or defective entrance door in the 4th room from the east located at APT 2B, 3rd story, apartment at North.
HPD	27-2005	Properly repair with similar material the broken or defective splintered wood floor in the private hallway located at APT 2B, 3rd story, apartment at North.
HPD	27-2018	Abate the nuisance consisting of mice in the entire apartment located at APT 2D, 3rd Story, 2nd apartment from North at East.
HPD	27-2018	Abate the nuisance consisting of roaches in the entire apartment located at APT 2D, 3rd Story, 2nd apartment from North at East.
HPD	27-2045	Repair or replace the smoke detector that is broken located at APT 2D, 3rd story, 2nd apartment from the North at East.
HPD	27-2046.1	Repair or replace the carbon monoxide detecting device(s) that is broken located at APT 2D, 3rd story, 2nd apartment from the North at East.
HPD	27-2043.1	Install the missing or repair/replace the defective window guard(s) in accordance with the specifications of the New York City health code section 24 RCNY Chapter 12. In the entire apartment located at APT 2D, 3rd story, 2nd apartment from the North at East.
HPD	27-2018	Abate the nuisance consisting of roaches in the entire apartment located at APT 3B, 4th story apartment at North.
HPD	27-2018	Abate the nuisance consisting of mice in the entire apartment located at APT 3B, 4th story, apartment at North.
HPD	27-2005	Properly repair with similar material the broken or defective concrete and ceramic tile floor in the bathroom located at apt. 3B, 4th story, apartment at north.
HPD	27-2026, 2027	Properly repair the source and abate the evidence of a water leak at ceiling in the bathroom located at APT. 3B, 4th Story, apartment at North.
HPD	27-2005	Repair the broken or defective plastered surfaces and paint in a uniform color all walls and ceilings in the entire apartment located at APT 2B, 4th story, apartment at North.
HPD	27-2005	Trace and repair the source and abate the nuisance consisting of mold. At west wall in bathroom located at APT 3B, 4th story, apartment at North.
HPD	27-2043.1	Install the missing or repair/replace the defective window guard(s) in accordance with the specifications of the New York City health code section 24 RCNY Chapter 12. In the entire apartment located at APT 3F, 3rd story, 1st apartment from the East at South.
HPD	27-2018	Abate the nuisance consisting of mice in the entire apartment located at APT 3F, 3rd story, 1st apartment from East at South.
HPD	27-2018	Abate the nuisance consisting of roaches in the entire apartment located at APT 3F, 3rd story, 1st apartment from East at South.

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Inspection Date: 7/9/14

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Lafayette Avenue, BX

Agency	Violation Code	Description
HPD	27-2005	Replace with new the broken or defective entrance wood door in the 1st room from the East located at APT 3F, 3rd story, 1st apartment from East at South.
HPD	27-2046.1	Repair or replace the carbon monoxide detecting device(s). Missing located at APT 4B, 5th story, 1st apartment from West at North.
HPD	27-2018	Abate the nuisance consisting of roaches in the entire apartment located at APT 4B, 5th Story, 1st apartment from West at North.
HPD	27-2005	Properly repair with similar material the broken or defective vinyl floor covering in the kitchen located at apt. 4B, 5th story, 1st apartment from west at north.
HPD	27-2008	Abate the nuisance consisting of mice in the entire apartment located at APT 4B, 5th Story, 1st apartment from West at North.
HPD	27-2045	Repair or replace the smoke detector that is missing located at APT 4B, 5th story, 1st apartment from the West at North.
HPD	27-2005	Properly repair with similar material the broken or defective splintered wood floor at radiator in the 1st room from East located at APT 4B, 5th story, 1st apartment from west at north.
HPD	27-2005	Properly repair with similar material the broken or defective wood floor in the kitchen located at APT 4B, 5th story, 1st apartment from west at north.
HPD	27-2043.1	Install the missing or repair/replace the defective window guard(s) in accordance with the specifications of the New York City health code section 24 RCNY Chapter 12. In the entire apartment located at APT 4G, 5th story, 1st apartment from the South at West.
HPD	27-2018	Abate the nuisance consisting of roaches in the entire apartment located at APT 4G, 5th story, 1st apartment from South at West.
HPD	27-2018	Abate the nuisance consisting of mice in the entire apartment located at APT 4G, 5th story, 1st apartment from South at West.
HPD	27-2005	Properly repair the broken or defective improperly counterbalanced lower sash window in the kitchen located at APT 4G, 5th story, 1st apartment from South at West.
HPD	27-2005	Properly repair with similar material the broken or defective wood floor in the 3rd room from East at South located at apt. 4G, 5th story, 1st apartment from South at West.
HPD	27-2005	Properly repair with similar material the broken or defective vinyl floor tile in the 3rd room from East at South located at apt. 4G, 5th story, 1st apartment from South at West.

Agency	Violation Code	Description
DOB	1016.2	Failure to provide unobstructed exit passageway at first floor at case of staircase "A" landing noted shopping cart, garbage bags. Remedy: Remove obstructions.
DOB	28-301.1	Failure to maintain building noted spalling concrete cellar ceiling exposing reinforcement, also staircase treads loose leading to bulkhead. Remedy: Make safe.
DOB	28-301.1	Failure to maintain, missing fire stopping throughout lobby basement walls, ceiling around pipe penetrations. Remedy: Seal penetrations.
DOB	28-302.1	Failure to maintain exterior noted fire escape supports/anchors inside parapet severely covered with bowing/deforming. Also noted ladder which was connected to parapet fell 6 stories at side yard. Remedy: Make safe provide engineers report for fire escape supports.
DOB	28-302.1	Failure to maintain exterior wall noted at front parapet (10" high) Evident signs of leaning with motor separation below. Remedy: Provide protection, provide engineers report attesting to the condition of wall.
DOB	28-301.1	Failure to maintain noted severe corrosion on gas line piping with severe flaking and pitting at cellar level. Remedy: Provide licensed plumber report attesting to the integrity of gas lines and for leaks with remedial action.
DOB	28-105.1	Work without permit, illegal work noted at cellar level the removal of multiple block walls. Remedy: Restore to legal condition, obtain all permits.
DOB	28-301.1	Failure to maintain fire proof self closing doors noted on all levels corridor smoke doors held open and defective unable to shut properly. Remedy: Close doors/repair and replace defective doors.
DOB	28-105.1	Work without permit, illegal erection of 2 bill board structures mounted to building façade no permits on file structures over hanging residential house below. Remedy: Remove structures.
DOB	110.2 (A)	Unapproved, unsafe, unsuitable electrical equipment, apparatus materials devices appliances or wiring is in use. Noted: throughout all floors, rooms, closets, mechanical rooms, closets open splice boxes, junction boxes are not closed. Open boxes are open to physical damage. All boxes/splices must be covered. Boxes are live and dangerous.
DOB	110.2 (A)	Unapproved, unsafe, unsuitable electrical wiring is in use. Notes: at main entrance on ceiling, approx 1" EMT pipe with elbow on ceiling, exposed wire are run inside the plaster ceiling. In ceiling no protection provide...
DOB	28-501.1	Failure to maintain building in code-compliant manner. During physical inspection 1 observed sewage escaping throughout the cellar due to broken vertical waste lines and uncapped traps. Remedy: Repair and/or replace.

Agency	Violation Code	Description
DOB	28-301.1	Use or installation of plumbing material which do not comply with RS-16. During physical inspection I observed PVC waste lines and FERMCO couplings installed throughout the cellar. PVC piping are not allowed in the building more than 5 floors. Remedy: Remove non-complying material or equipment.
DOB	28-105.1	Work without a permit. During physical inspection I observed 1 slop sink, 1 lavatory and 1 toilet installed in the cellar without a permit. Also noted waste and hot/cold lines dedicated to the fixtures installed without a permit. Remedy: Obtain permit.
DOB	110.2 (A)	Unapproved, unsafe, unsuitable electrical wiring is in use. Notes: At main entrance on ceiling, approx 1" EMT pipe with elbow on ceiling, exposed wire are run inside the plaster ceiling. In ceiling no protection provide Fire hazard. Remedy: Comply with electrical code.
FDNY	FC 1027.3	Failure to remove obstruction which are impeding means of egress on the fire escapes, in violation of FC 1027.3. Note: Fire escapes dump into a courtyard which does not exit to street.
FDNY	FC 607.5	Failure to maintain elevators with phase I emergency recall and phase II emergency in-service operation shall be maintained in proper working order in violation of FC 607.5.
FDNY	27-996.1	Provide a dedicated means of communication to communicate with the building mgmt. office or remove the lock on the elevator vestibule door located in the basement as required by zero clearance rule section 27-996.1 reference standard 18-1 rule 110.6.
FDNY	VC 1: Portable Fire Extinguishers and Fire Hoses	Failed to provide and or/maintain required portable fire extinguishers/ fire hoses/other.
FDNY	VC 25: Electrical Hazards	Failed to provide and or/maintain required electrical devices/equipment and/or allowed electrical hazards to exist
FDNY	VC 15: Fire Rated Construction	Failure to provide fire stopping in through penetration in all fire rated walls throughout the building.
FDNY	NEPA 10	Failure to properly maintain the portable fire extinguisher located throughout the building in violation of NEPA 10.
FDNY	VC 25: Electrical Hazards	Failure to provide approved type covers for all electrical boxes located throughout the building.
FDNY	BC 1019.1.1	Failure to provide that all fire rated doors be self-closing and have re-latching capability in violation of BC 1019.1.1.
FDNY	VC 12: Fire Protection Systems	Failure to provide smoke detectors in each dwelling unit which is designated as non-transient occupancy as per chapter 14, section 6 of NYS multiple dwelling law.
FDNY	VC 6: Signs, Postings, Notices and Instructions	Failure to provide an approved type sign on each door designated as a non-transient occupancy
HPD	27-2010, 2011, 2012	Cleanse and disinfect to the satisfaction of this department after removing the rubbish and urine all stories at public hall.

Agency	Violation Code	Description
HPD	27-2005	Replace with new the broken or defective wood hand railing at public hall stairs 6th story.
HPD	27-2005	Properly repair the broken or defective regulation type lock at building entrance door.
HPD	27-2013	Paint with light colored paint to the satisfaction of this department walls and ceilings all stories at public hall.
HPD	27-2018	Abate the nuisance consisting of roaches at public hall, 1st story.
HPD	27-2005	Replace with new the missing 2 balusters stairs to roof at public hall bulkhead, section at south.
HPD	27-2005	Replace with new the broken or defective wire glass lower sash 1st window from north at west wall at public hall, 5th story.
HPD	27-2005, 2007	Arrange and make self-closing the doors at bulkhead roof.
HPD	27-2026	Repair the leaky and/or defective faucets at sink in the kitchen located at APT 402, 4th story, 2nd apartment from west at north.
HPD	27-2046.1, 2046.2	Provide an approved and operational carbon monoxide detecting device, installed in accordance with applicable law and rules. In the entire apartment located at APT 402, 4th story, 2nd apartment from west at north.
HPD	27-2018	Abate the nuisance consisting of mice in the entire apartment located at APT 402, 4th story. 2nd apartment from west at north.
HPD	27-2005	Refit wood door in the 1st room from north at east located at APT 402, 4th story, 2nd apartment from west at north.
HPD	27-2005	Properly repair the broken or defective washbasin base cabinet in the bathroom located at APT 402, 4th story, 2nd apartment from west at north.
HPD	27-2045	Repair or replace the smoke detector defective in the entire apartment located at APT 402, 4th story, 2nd apartment from west at north.
HPD	27-2005	Properly secure the loose radiator at south wall in the 3rd room from east at south located at APT 504, 5th story, 2nd apartment from north at east.
HPD	27-2005	Trace and repair the source and abate the nuisance consisting of mold approx. 8 sq ft at ceiling in the bathroom located at APT 504, 5th story, 2nd apartment from north at east.
HPD	27-2005	Properly repair the broken or defective lower sash glass window counter balance in the kitchen located at APT 504, 5th story, 2nd apartment from north at east.
HPD	27-2026, 2027	Properly repair the source and abate the evidence of a water leak at ceiling in the bathroom located at APT 510, 5th story, 4th apartment from north at east.
HPD	27-2005	Properly repair the broken or defective wood floor in the 1st room from north located at APT 510, 5th story, 4th apartment from north at east.

Agency	Violation Code	Description
HPD	27-2013	Paint with light colored paint to the satisfaction of this department walls and ceilings in the entire apartment located at APT 514, 5th story, 1st apartment from north at east, section at south.
HPD	27-2005	Repair the broken or defective plastered surfaces and paint in a uniform color ceiling in the bathroom located at APT 514, 5th story, 1st apartment from north at east, section at south.
HPD	27-2005	Repair the broken or defective plastered surfaces and paint in a uniform color ceiling in the 3rd room from east located at APT 514, 5th story, 1st apartment from north at east section at south.
HPD	27-2026, 2027	Properly repair the source and abate the evidence of a water leak at ceiling in the bathroom located at APT 514, 5th story, 1st apartment from north at east section at south.
HPD	27-2018	Abate the nuisance consisting of mice in the entire apartment located at APT 610, 6th story, 6th apartment from north at east.
HPD	27-2005, 2007	Arrange and make self-closing the doors in the entrance located at APT 610, 6th story, 6th apartment from north at east.
HPD	27-2005, 2007	Arrange and make self-closing the doors entrance door located at APT 617, 6th story, 1st apartment from south at west.

Agency	Violation Code	Description
DOB	28-105.1	Work without permit, illegal work notes at basement with the conversion into 2 class B units lay erecting full height partitions, erecting CMU clock wall for the creation of 1 room, also 2 3-piece bathroom residential sink, toilet and bath/shower
DOB	28-1183.2	Occupancy contrary to Dept records, notes at basement level the creation of 2 class B units with no means of express and insufficient light and ventilation
DOB	BC 1020.2	Failure to provide unobstructed exit passageway at basement by the erection of CMU block and wall narrowly the passage into exit door
DOB	28.302.1	Failure to maintain exterior, notes at roof level missing coping stones, mortar joints palling front entrance courtyard 5 floor level
DOB	28-301.1	Failure to maintain building notes, storage of flower pots, ball, umbrella, plants on fire escape throughout
DOB	28-301.1	Failure to maintain building notes at stairwell, severe deteriorated stair pans with deflection notes. Multiple levels throughout
DOB	28-301.1	Failure to maintain building notes at 1 and 2 floors, severe sagging of apartment floors throughout supports setting, approx 4" inch drop
DOB	28-301.1	Failure to maintain building in code compliant, installation of plumbing material. In cellar all drainage pipes are connected with the use of fence coupling
DOB	BC 1073, 27-921 (a)	Failure to have a new or altered plumbing system inspected or tested. As per DOB records there is no recorded information which states no inspection or tests
DOB	28-301.1	Failure to maintain building in code compliant manner. Inside boiler room openings at the ceiling where fresh air comes into boiler room there are no fire dampers to close the venting in case of fire
DOB	28-105.1	Work without permit work noted in basement hot and cold water lines, drainage lines, gas lines ran to 3 bathrooms and two kitchens with no DOB permits
DOB	EC-110.2 (A)	Unapproved, unsafe, unsuitable equipment apparatus, materials, devices, appliances, or wiring is in use. Open junction boxes throughout entire building, outside, basement, all floors, lobby. All boxes 6x6 through rear basement open. In rear basement, approx 7 large splice boxes not covered, cables exposed to human contact-live and exposed
DOB	EC-110.2 (A)	Unapproved, unsafe, unsuitable electrical equipment, apparatus, materials, devices, appliances, or wiring is in use. Throughout entire basement, extension cords used as permanent wiring. Light fixtures not installed in an approved manner/method. Defective wiring. Excessive use of cords and power strips
DOB	EC-Misc	Miscellaneous violation of the electrical code technical standards. No ground rod provided for electrical service. No second means of grounding

Agency	Violation Code	Description
DOB	EC-Misc	Miscellaneous violation of the electrical code technical standards. Service disconnects are not properly grouped. Service switch that is labeled "beauty salon 4822 White Plains Road" is not grouped with all other service disconnects. Must all be grouped together as per Nec Code (230.72A)
DOB	EC 110.2 (A)	Unapproved, unsafe, unsuitable electrical equipment, apparatus, materials, devices, appliances, or wiring is in use. All emergency wall packs and exits lights throughout all of building not working when power is shut off, the lights and signs do not become illuminated
DOB	EC-Misc	Miscellaneous violations of the electrical code technical standards. Service grounding conductor has not been installed properly on service switch that is labeled, "4822 White Plains Road beauty salon" No service grounding conductor is installed
DOB	1D2, EC 110.2(A)	Unapproved, unsafe, unsuitable electrical equipment, apparatus, materials, devices defective wiring is in. All emergency wall packs and exits lights throughout all the building not working when power is shut off.
FDNY	NYC Mechanized Code 1006.8.1	Failure to provide and maintain label for remote control switch to burner, in violation of NYC Mechanized Code 1006.8.1
FDNY	FC 703.2	Failure to provide and maintain required fire door in the boiler room in proper order, in violation of FC 703.2
FDNY	FC 703.1	Failure to maintain required fire resisted carrier wall in the fuel oil storage room, in violation of FC 703.1
FDNY	FC 1027.1	Failure to maintain emergency lighting throughout the building, in violation of FC 1027.1
FDNY	FC 1027.2	Failure to maintain fire escape located on the 2 floor on E 243 Street side of the building free of obstruction, in violation of FC 1027.2
FDNY	FC 1027.1	Failure to maintain stairwell between the 3 floor and the roof in 710 building in proper order, in violation of FC 1027.1
FDNY	FC 408.9.3	Failure to post and maintain on the door of each dwelling unit a fire safety notice, in violation of FC 408.9.3
FDNY	FC 906.1	Failure to provide a portable fire extinguisher at least one per floor, in violation of FC 906.1
FDNY	FC 3805.3	Failure to maintain the premises free of storage containers with liquefied petroleum gas (LPG) with a capacity exceeding 16.40oz, in violation of FC 3805.3

Cluster

**Bronx Neighborhood
Annex
Tinton Avenue, Bronx**

Inspection Date: 5/1/2014

Agency	Violation Code	Description
DOB	28-302.1	Failure to maintain bldg. walls noted at exterior walls exposure 1, 2, 3 &4. Noticeable loose missing & cracked mortar & masonry brick evident throughout. Excessive amounts noted window sills deteriorating throughout
DOB	27-369 BC 1020.2	Failure to provide unobstructed exit passageway noted at time of inspection windows leading to fire escapes blocked at multiple apartments. 50,52,56,43,32,30,36 etc. Also at rear travel path stairs blocked w/ 2'high wood g
DOB	28-301.1	Failure to maintain bldg. in code compliant manner noted at time of inspection excessive sagging & stopping evident in multiple apartments. 42,44,32,35,22,16 & throughout also cracks in plaster walls & unoperational smoke
FDNY	FC 401.6.8.2	Failure to provide sufficient amount of certified fire safety coordinator, at least two per each shift. FC 401.6.8.2
FDNY	FC 401.6.8.3	Failure to provide sufficient amount of certified fire guards FC 401.6.8.3
FDNY	FC 404	Failure to provide a fire safety and evacuation plan for review, and acceptance FC 404.
FDNY	FC 907.15	Failure to provide a supervised monitoring fire alarm system FC 907.15
FDNY	FC 405.2	Failure to conduct fire drills FC 405.2
FDNY	FC 405.5	Failure to maintain fire drill records. FC 405.5
FDNY	1 RCNY 28-02	Failure to provide/maintain carbon monoxide detecting devices inside all DHS Apts. 1 RCNY 28-02
FDNY	SP-1	Failure to repair exposed electrical wires inside the following Apts. #13, #42, #45, #52.
FDNY	SP-1	Failure to reduce amounts of belongings inside Apt. #14 on 1st floor
FDNY	FC 703.2.2	Failure to maintain fire doors self-closing devices in Boiler room. FC 703.2.2
FDNY	FC 901.7	Failure to provide fire guards with at least one approved means of notification to the Fire Department FC 901.7
FDNY	FC 605.3.1	Failure to provide/maintain required sign for electrical panel in Basement. FC 605.3.1
FDNY	SP-1	Failure to provide certificate of occupancy of premises.
FDNY	SP-1	Failure to provide an operating certificate from NY State
FDNY	1968 BC 27-396.2; New BC 1026.10	Fail to provide posted egress charts / sleeping signs inside all DHS apts.
FDNY	FC 906	Failure to maintain / recharge / Service fire extinguishers inside all DHS Apts. FC 906
FDNY	FC 901.5.1	Failure to install an approved interior Fire alarm system. FC 901.5.1
FDNY	FC 801.6	Failure to remove and maintain means of egress free of impending / obstructions in Basement corridors. FC 801.6
FDNY	FC 903	Failure to install an approved sprinkler system through the building having at least one source of water supply. FC 903

Cluster

**Bronx Neighborhood
Annex
Tinton Avenue, Bronx**

Inspection Date: 5/1/2014

Agency	Violation Code	Description
FDNY	FC 310.3	Failure to provide and maintain "No Smoking" signs through Building. FC 310.3
FDNY	FC 605.3	Failure to maintain electrical room located in Basement free of storage. FC 605.3
FDNY	FC 315.2	Failure to properly store paints/others in Basement corridor. FC 315.2
FDNY	FC 605.5	Failure to discontinue use of temporary extension cords/electrical wiring inside Bilder room. FC 605.5

Appendix G: OATH default judgment chart

Hamilton Place Hotel (Tier II look-alike)

New York

Total: \$58,992

Violation#	Agency	Issued	Hearing Scheduled Date	Balance	Paid	Imposed	Status	Disposition
000174333X	DEP	5/18/2005	6/29/2005	105.00	350.00	350.00	HEARING-COMplete	STIPULATED
040177721M	DSNY	5/11/2010	9/17/2010	200.00	0.00	200.00	DOCKETED	DEFAULTED
040177722Y	DSNY	5/11/2010	9/17/2010	200.00	0.00	200.00	DOCKETED	DEFAULTED
035099657P	DOB	6/5/2014	7/31/2014	200.00	0.00	200.00	HEARING-COMplete	STIPULATED
035099655L	DOB	6/5/2014	7/31/2014	250.00	0.00	250.00	HEARING-COMplete	STIPULATED
035099658R	DOB	6/5/2014	7/31/2014	250.00	0.00	250.00	HEARING-COMplete	STIPULATED
035099659Z	DOB	6/5/2014	7/31/2014	250.00	0.00	250.00	HEARING-COMplete	STIPULATED
035099661H	DOB	6/5/2014	7/31/2014	250.00	0.00	250.00	HEARING-COMplete	STIPULATED
035066625J	DOB	6/5/2014	7/31/2014	250.00	0.00	250.00	HEARING-COMplete	STIPULATED
011202580H	FDNY	12/9/2010	3/16/2011	400.00	0.00	400.00	DOCKETED	IN-VIOLATION
035072948P	DOB	6/5/2014	9/4/2014	400.00	0.00	400.00	HEARING-COMplete	IN-VIOLATION
035072949R	DOB	6/5/2014	7/31/2014	400.00	0.00	400.00	HEARING-COMplete	IN-VIOLATION
035094774L	DOB	6/5/2014	7/31/2014	400.00	0.00	400.00	HEARING-COMplete	STIPULATED
035099656N	DOB	6/5/2014	9/4/2014	500.00	0.00	500.00	HEARING-COMplete	IN-VIOLATION
0800389289	DOHMH	6/27/2013	8/2/2013	600.00	0.00	600.00	DEFAULTED	DEFAULTED
0800389298	DOHMH	6/27/2013	8/2/2013	600.00	0.00	600.00	DEFAULTED	DEFAULTED
0800389270	DOHMH	6/27/2013	8/2/2013	600.00	0.00	600.00	DEFAULTED	DEFAULTED
0800495466	DOHMH	5/12/2014	6/13/2014	600.00	0.00	600.00	DEFAULTED	DEFAULTED
011270878P	FDNY	5/10/2013	8/9/2013	600.00	0.00	600.00	DOCKETED	IN-VIOLATION
035099660X	DOB	6/5/2014	7/31/2014	600.00	0.00	600.00	HEARING-COMplete	STIPULATED
0182098355	DEP	2/22/2013	2/7/2014	700.00	0.00	700.00	DOCKETED	IN-VIOLATION
012035194K	FDNY	7/16/2014	9/3/2014	1,000.00	0.00	1,000.00	DEFAULTED	DEFAULTED
011261676M	FDNY	4/19/2013	7/10/2013	1,000.00	0.00	1,000.00	DOCKETED	DEFAULTED
011357967Z	FDNY	2/6/2014	4/11/2014	1,000.00	0.00	1,000.00	DOCKETED	DEFAULTED
011370310K	FDNY	3/3/2014	4/23/2014	1,000.00	0.00	1,000.00	DOCKETED	DEFAULTED
012020155X	FDNY	12/8/2012	1/30/2013	1,000.00	0.00	1,000.00	DOCKETED	DEFAULTED
012027675L	FDNY	10/9/2013	4/9/2014	1,000.00	0.00	1,000.00	DOCKETED	DEFAULTED
012008094J	FDNY	5/29/2012	8/1/2012	1,000.00	0.00	1,000.00	DOCKETED	DEFAULTED
034878293J	DOB	1/30/2011	8/4/2011	1,000.00	0.00	1,000.00	DOCKETED	IN-VIOLATION
035066574Z	DOB	6/5/2014	9/4/2014	1,000.00	0.00	1,000.00	HEARING-COMplete	IN-VIOLATION
035066572P	DOB	6/5/2014	7/31/2014	1,000.00	0.00	1,000.00	HEARING-COMplete	IN-VIOLATION
000402549R	DEP	4/23/2013	6/17/2013	1,137.50	0.00	875.00	DEFAULTED	DEFAULTED
011373896K	FDNY	6/10/2014	10/8/2014	1,500.00	0.00	1,500.00	HEARING-COMplete	IN-VIOLATION
035072976M	DOB	6/5/2014	7/31/2014	1,600.00	0.00	1,600.00	HEARING-COMplete	IN-VIOLATION
035072977Y	DOB	6/5/2014	7/31/2014	1,600.00	0.00	1,600.00	HEARING-COMplete	IN-VIOLATION
035066573R	DOB	6/10/2014	7/31/2014	1,600.00	0.00	1,600.00	HEARING-COMplete	IN-VIOLATION
035066570L	DOB	6/5/2014	9/4/2014	1,600.00	0.00	1,600.00	HEARING-COMplete	IN-VIOLATION
035066571N	DOB	6/5/2014	9/4/2014	1,600.00	0.00	1,600.00	HEARING-COMplete	IN-VIOLATION
011135292X	FDNY	12/6/2010	3/16/2011	2,375.00	375.00	2,750.00	DOCKETED	IN-VIOLATION

Cluster: Bronx Neighborhood Annex
Tinton Ave, Bronx
Total: \$40,445

Violation#	Agency	Issued	Hearing Scheduled Date	Balance	Paid	Imposed	Status	Disposition
035038009H	DOB	2/11/2014	6/27/2014	1600	0	1600	DOCKETED	IN-VIOLATION
035038008X	DOB	2/11/2014	6/27/2014	3000	0	3000	DOCKETED	IN-VIOLATION
035038007Y	DOB	2/11/2014	6/27/2014	4800	0	4800	DOCKETED	IN-VIOLATION
035038006M	DOB	2/11/2014	6/27/2014	800	0	800	DOCKETED	IN-VIOLATION
178294014	DSNY	3/7/2014	5/6/2014	100	0	100	DOCKETED	IN-VIOLATION
035095626Y	DOB	5/1/2014	8/15/2014	5000	0	5000	DOCKETED	DEFAULTED
035095628H	DOB	5/1/2014	8/15/2014	6000	0	6000	DOCKETED	DEFAULTED
035095627X	DOB	5/1/2014	8/15/2014	5000	0	5000	DOCKETED	DEFAULTED
182925519	DSNY	10/24/2014	11/25/2014	100	0	100	NEW ISSUANCE	N/A
032049136P	DOB	3/24/2006	12/21/2007	2500	0	2500	DEFAULTED	DEFAULTED
000189454Y	DOB	12/17/2008	2/24/2009	7020	0	7020	DEFAULTED	DEFAULTED
172293110	DSNY	3/27/2009	6/10/2009	25	0	25	DOCKETED	IN-VIOLATION
011194133Z	FDNY	5/21/2010	3/24/2011	1000	0	1000	DOCKETED	DEFAULTED
011194135M	FDNY	5/21/2010	3/24/2011	2000	0	2000	DOCKETED	DEFAULTED
0111943134K	FDNY	5/21/2010	12/9/2010	1000	0	1000	DOCKETED	DEFAULTED
035008614Z	DOB	1/15/2014	6/27/2014	500	0	500	DOCKETED	IN-VIOLATION

Appendix H: RSRI Life safety hazard chart

	Shelter Name	RSRI SCORE	RSRI Inspection Date	RSRI Life Safety Hazards	DOI Inspection Date	Corresponding City Agency Violation Issued at DOI Inspection	CAP Date	Life Safety Hazards Addressed in CAP
1	REGENT FAMILY RESIDENCE	72	5/14/14	Missing/Non-working Carbon Monoxide Detectors	6/9/14	FDNY - 1 RCNY 28-02	6/27/14	TBC 6/20/14
				Emergency Lights not working		FDNY - FC 1027.1 - Failure to maintain provided emergency lighting in proper working order		Completed 6/13/14
				Panel in Trouble Mode		FDNY -FC 1027.1 and 1027.2- failure to maintain the Fire Alarm and Voice communication system in proper working order		Completed 6/5/14
				Missing Egress Signs		FDNY - 1 RCNY 27-01; FC 607.3		TBC 6/20/14
				Missing/Non-working Smoke Detectors		FDNY - 1 RCNY 28-02		TBC 6/20/14
				Fire Panel (Inspections-system in trouble mode)		FDNY - FC 907.17		Completed 6/5/14
				Fire Safety (Logs - No FDNY Approval Letter)		FDNY - FC 401.6		City owned Property
2	HAMILTON PLACE HOTEL	75	4/2/14	Missing Carbon Monoxide Detectors	6/5/14		6/30/14	Completed 4/29/14
				5 Year Hydro-Static (Inspections -no info available)				TBC 7/1/14
				6 Month Sprinkler (Inspections -need certificate of fitness)		DOB- BC 903.6; FDNY -FC 901.6; 901.63		Completed 6/10/14
				Standpipes (Inspections - site could not provide info)		FDNY - FC 903.5		No note
				Fire Safety - (Logs - No FDNY Approval Letter)		FDNY - FC 907.20; FC 404.5; 3 RCNY 404-01		No note
3	ELLINGTON HOTEL	76	3/24/14	Missing Fire Safety Signs in some rooms	7/8/14	FDNY - FC 1027.1	No CAP	
				Fire Safety - No FDNY Approval Letter				
				Building Dept. - Open Violations (19)				
4	BRIDGE HAVEN	78	6/12/14	Emergency Lights not working at main entry	7/9/14		7/21/14	TBC 8/31/14
				Extinguishers not in common area				TBC 8/31/14
				Missing egress Signs		FC 408.93		TBC 8/31/14
				Fire Safety - No FDNY Approval Letter				TBC 8/31/14
5	JAMAICA	77	4/4/14	Missing Egress Signs	4/22/14	BC 27-396.3	6/26/14	TBC 6/30/14
				Building Dept. - Open Violations				

	Shelter Name	RSRI SCORE	RSRI Inspection Date	RSRI Life Safety Hazards	DOI Inspection Date	Corresponding City Agency Violation Issued at DOI Inspection	CAP Date	Life Safety Hazards Addressed in CAP
				FDNY - Open Violations				
6	HELP 1	74	6/18/14	Carbon Monoxide Detectors not working	8/19/14	27-2046.1	8/7/14	7/16/2014
				Emergency Lights not working				7/16/2014
				Panel - Fire panel for rooms has trouble signal & silenced				7/7/2014
				Missing egress Signs		BC 1019.1.7		7/10/2014
				Smoke Detectors missing		27-2045		7/18/2014
				5 Year Hydro-Static no information				7/21/2014
7	LIBERTY FAMILY RESIDENCE	75	5/29/14	Carbon Monoxide Detectors removed from some rooms	8/21/14		8/20/14	6/5/2014
				Emergency Lights not working		FDNY - BC101.1		7/15/2014
				Missing Egress Signs		FDNY - IRCNY 27-01		6/15/2014
				Smoke Detectors removed from some rooms				6/5/2014
				5 Year Hydro-Static (Inspections -no info available)				7/30/2014
				Standpipes (Inspections - site could not provide info)				5/30/2014
8	KINGSTON FAMILY RESIDENCE	80	7/23/14	Emergency Lights not working	8/19/14		No CAP	
				Fire Safety - No FDNY Approval Letter		VO# E357446		
9	KING'S INN	80	7/15/14	Fire Safety - No FDNY Approval Letter	8/20/14	FDNY - 3RCNY 901-04		
10	LINCOLN ATLANTIC	77	8/7/14	Carbon Monoxide Detectors not working	8/20/14		5/21/14	3/1/2014
				Emergency Lights not working		EC 110.2 (A)		3/1/2014
				Fire Panel in trouble mode				
				5 Year Hydro-Static (Inspections -no info available)				TBC 7/1/14
				Fire Panel (Inspections-system in trouble mode)				
				Fire Safety - No FDNY Approval Letter				TBC 7/1/14
11	PING HOTEL	80	3/24/14	Fire Safety - No FDNY Approval Letter		FDNY - 3RCNY 404-01 (C)(2)(A)	No CAP	
				Building Dept. - Open Violations				