

**NEW YORK STATE
DIVISION OF HOUSING
AND
COMMUNITY RENEWAL**

Instructions for Filing

an

Owner's Application for Rent Increase

Based on

Alternative Hardship

**OFFICE
OF
RENT
ADMINISTRATION**



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Division of Housing and Community Renewal
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Introduction

General information is given in Section I for such topics as; who may file, what is an Alternative Hardship, when etc. and where to file.

Suggestions are listed in Section II on the sequence used in completing the forms and in organizing your records.

Section III contains detailed instructions application and a checklist of necessary attachments to the application.

Read Sections I and II before you complete the forms. Follow the detailed instructions in Section III for each form and attachment.

All data must be based on your chosen test year, unless otherwise instructed. See Section I, E. for definition.

For questions concerning the forms, or the Alternative Hardship regulations, contact the New York State Division of Housing and Community Renewal (DHCR) Borough/District Rent Office in the county where your building is located. Addresses and telephone numbers are listed on the last page.

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Section I General Information

A. Who May File?

You may apply if you own a partially or completely rent stabilized building and your operating expenses are equal to or greater than 95% of the gross income. In addition, all of the following must be met:

1. The owner (or an entity related to the owner) acquired the building at least 36 months before the date of application; and
2. The building has not received a Rent Stabilization Hardship Rent Increase within 36 months of the date of application; and
3. The owner's equity in the property is greater than five percent (5%) of the value of the property.

The property must be properly registered with DHCR under the Omnibus Housing Act of 1983. If the property is located outside of New York City, a current Property Maintenance and Operation Cost Survey Schedule must be on file with DHCR.

B. What is an Alternative Hardship Rent Increase?

A building subject to rent stabilization is eligible for a rent increase if the property's allowable expenses are equal to or more than 95% of its income.

C. Is the Income Adjusted in Certain Cases?

A property's income is adjusted, if any of the following conditions exist:

1. Any apartment was rent controlled; or
2. Any apartment was rented for commercial or professional purposes; or
3. Any apartment was occupied by the owner, the owner's relative, or the owner's employee(s); or
4. Any apartment was vacant for more than one month; or
5. Any apartment was occupied by a senior citizen with a rent increase exemption; or
6. Any apartment was occupied by a tenant with a Section 8 rent subsidy.

Actual and reasonable costs of operating and maintaining the property, including mortgage interest costs, are included when determining an Alternative Hardship. Depreciation costs, capital repairs, and mortgage amortization are not included.

D. Which Forms to File?

A complete application includes the following required forms:

- | | |
|-------------|---|
| RTP-45 | - Owner's Application for Rent Increase Based on Alternative Hardship - Part I |
| RTP-45A | - Alternative Hardship Rent Increase Qualification Form |
| RTP-45C & D | - Alternative Hardship Rent Increase Application - Part II and Part III |
| RTP-45G | - Owner's or Managing Agent's Statement of Affirmation to Application for Alternative Hardship Rent Increase. |

You may be required to complete one or more supplemental forms depending on your answers to certain questions on Forms RTP-45A and RTP-45C, or if mortgage interest is claimed on Form RTP-45D.

Section II describes which of the following supplemental forms is required:

- | | |
|---------|--|
| RTP-45B | Calculation of Owner's Equity in Property |
| RTP-45E | Calculation of Allowable Mortgage Interest |
| RTP-45F | Rental Income Worksheet |

E. What is a Test Year?

A "test year" is the selected period for reporting your building's income and expenses. The "test year" can be (1) the last year used by the owner for normal accounting and tax purposes, either fiscal or calendar or (2) any twelve (12) consecutive months of building operation ending within 90 days prior to the date of filing the application. **All supporting documents must reflect the selected test year.**

F. When do I File?

File for an Alternative Hardship Rent Increase as soon as all necessary information is complete and you (or a related entity) have owned the building for at least three (3) years.

G. Where do I File?

File the application with the DHCR District Rent Office in the county or borough in which your building is located. Addresses and telephone numbers are listed on the last page.

H. Where do I Get Assistance?

Call the DHCR District Rent Office in the county or borough in which your building is located for either telephone assistance or to schedule an appointment. Addresses and telephone numbers are listed on the last page.

I. What is the Processing Time?

The time needed to process your application depends on: (1) the number of cases currently being reviewed; (2) the complexity of your application; and (3) the time you take to supply additional requested information.

J. What is the Maximum Alternative Hardship Increase Allowed Per Year?

The maximum increase allowed in any one year is six percent (6%) and any excess increase over six percent (6%) is allowed in future years, and all increases are calculated based on the legal regulated rent in effect when the application was filed.

K. Are there Restrictions on Filing and Collecting a Subsequent Hardship Rent Increase?

DHCR will not accept applications for hardship rent increase (comparative hardship OR alternative hardship) in any twelve-month period in which the maximum six percent (6%) hardship rent increase for that building is still collectible.

If the collectible hardship increase is less than the maximum 6% in a year, the owner may file an application for a hardship rent increase. Any new hardship rent increase granted and collectible for that property during any portion of that year is limited to the difference between the hardship rent increase and the 6% maximum allowed.

For example, if a maximum increase of 20% is granted, DHCR will not accept applications for a hardship rent increase for years 1, 2 or 3 as the maximum 6% is being collected. In Year 4, a 2% hardship rent increase is collectible and the owner may file a new application. If DHCR issues an order granting an increase which is collectible during Year 4, the maximum new increase is limited to 4%, which with the 2% from the previous order equals the maximum 6% in a year. The new 4% increase is calculated on the legal regulated rent in effect immediately before the filing in Year 4.

L. Are Other Increases Still Permitted?

A granted Alternative Hardship rent increase applies only to rent stabilized units and does not stop you from collecting other rent increases. For example, you may also receive the full amount of all vacancy and renewal guideline increases permitted, as well as any approved Major Capital Improvement rent increases, and other increases allowed under the State or City Rent Control Law for the rent controlled units in your building.

M. What are Allocation Adjustments?

If some apartments are subject to Rent Control under State or City Rent Control Laws, adjustments are made to income and expenses to reflect the proportion of Rent Controlled to Rent Stabilized apartments.

N. Will You Request Additional Information?

You may have to supply additional information detailing income and expenses and you should send in all information promptly. The effective date of the Order granting your Alternative Hardship rent increase is delayed until you comply with any requests. If you do not respond to a request for additional information, your application may be denied.

O. How Long Must I Retain Records?

Records must be retained for three (3) years after the effective date of your Alternative Hardship increase. DHCR may request documentation of any or all items submitted as part of your application. Retain all records such as: receipts, cancelled checks, mortgage documents, contracts, leases, tenant notices, bills of sale, etc. substantiating items reported in the application.

P. Are there Penalties for False Statements?

An owner who knowingly makes false statements on an application is subject to penalties under Article 175 of the Penal Law of the State of New York and the owner may also be subject to civil fines authorized by statute.

Q. How do I Notify Tenants?

Do not deliver this application to your tenants until DHCR sends you complete instructions on how to notify all affected tenants.

II. Suggestions For Preparing Your Application

A. Organize your Records for your Selected Test Year. Collect and organize all records that show income (rents and other payments) and the expenses incurred for your building(s).

1. Expenses omitted are not counted in determining the amount of the Alternative rent increase.
2. If the rent increase is granted, and you discover omitted expenses you may not be able to re-apply for three years.
3. You may be required to substantiate income and/or expenses shown on your application;
4. For three (3) years after the effective date of an Order granting a rent increase, you may be audited.
5. For the two (2) years prior to the test year, DHCR may examine your books and records.

B. Complete the Forms in the Listed Order. Your answer to certain questions may indicate that you do not qualify for an alternative hardship rent increase at this time. You will be directed to **Stop**. For the most efficient use of your time, complete the forms in the following order.

1. RTP-45A, "Alternative Hardship Rent Increase Qualification Form". Questions 2 and 3 direct you to either **Stop** or to continue. If you continue, question 8 directs you to Form RTP-45B, or Form RTP-45C;
2. RTP-45B, "Calculation of Owner's Equity in Property". Question 9 directs you to either **Stop** or continue to Form RTP-45C.
3. RTP-45C ("Alternative Hardship Rent Increase Application - Part II"). If your answers to questions 6 through 13 direct you to complete Form RTP-45F, continue as follows.
4. RTP-45F, "Rental Income Worksheet".
5. RTP-45E, "Calculation of Allowable Mortgage Interest". The final figure is copied as an entry on RTP-45D.
6. RTP-45D, "Alternative Hardship Rent Increase Application - Part III, Substantiating Information". Your answer to question 18 will direct you to either **Stop** or continue.
7. RTP-45, "Owner's Application for Rent Increase Based on Alternative Hardship - Part I).
8. RTP-45G, "Owner's or Managing Agent's Statement of Affirmation to Application for Alternative Hardship Rent Increase".

C. Complete All Forms Required for Your Application. In addition to forms: RTP-45, RTP-45A, RTP-45C, RTP-45D and RTP-45G, you may be directed to complete forms RTP-45B, RTP-45F, and/or RTP-45E, based on your answers to question 8 on Form RTP-45A and to questions 6 through 13 on Form RTP-45C, and your claim of mortgage interest on Form RTP-45D.

File Form RTP-45B, Calculation of Owner's Equity in Property, if the original value of all outstanding mortgages is 95 percent (95%) or more of the purchase price of the property.

File Form RTP-45E, Calculation of Allowable Mortgage Interest, if you claim mortgage interest as an expense.

File Form RTP-45F, Rental Income Worksheet, if any one of the following conditions exist:

1. Any apartment was rent controlled at the end of the test year;
2. Any apartment was rented for commercial or professional purposes;
3. Any apartment was occupied by the owner during any part of the test year;
4. Any apartment was occupied by a relative or an employee of the owner during any part of the test year, at less than the allowable stabilized rent;
5. Any apartment was vacant more than one month during the test year; or
6. Any apartment was occupied by a senior citizen with a rent increase exemption or a tenant with a Section 8 rent subsidy.

D. Complete the Forms According to Instructions.

In the upper right corner of each form, mark accurately the following:

1. For buildings located in New York City, check () the MDR box;
2. For buildings located outside New York City, check () the ETPA box;
3. Enter the building's official identifying number, as it appears on the Registration Summary, DHCR form RR-2; and
4. Leave the Docket Number blank. DHCR will assign it on receipt of your application.

When all the required information will not fit in the space provided, print "see attached" in that space, and enter the information on a separate sheet. Mark the new sheet as an attachment for that specific form and item. Example: "Attachment for RTP-45, item 3."

E. Prepare and Attach All Necessary Schedules and Documents. A single asterisk (*) following a line item on a form indicates that an attachment may be required for that item. Read the line-by-line instructions for the specific line to determine whether an attachment is required for your application and the content needed and the format to be used.

"Schedules" are prepared as charts with column headings. For example, if you are instructed to attach a schedule for fuel costs during the test year, including specific information on date of delivery, vendor name, quantity, unit, type and dollar amount, prepare a chart attachment with a column heading for each type of information. A sample entry line is shown.

Date of Delivery	Vendor Name	Quantity	Unit	Type	Dollar Amount
March 21, 1983	Acme Fuel Co.	10,000	gallons	# 2 oil	\$10,000

A checklist of necessary schedule and other attachments appears on page _____. In order to determine whether your application requires a specific attachment, refer to the instructions for the form and item number indicated next to the listed attachment. Mark each attachment as instructed; this will help us process your application in a timely manner.

F. Check Your Completed Application Form

- 1. Complete all entries.
- 2. If you are directed to copy an answer from one form to another, check to see that the entries are identical.
- 3. Make sure that all information submitted is accurate.
- 4. Check arithmetic carefully.
- 5. Sign and date the "Owner's Affirmation" Form RTP-45G.

G. Sign, date, copy and submit the application. Make a photocopy of the total application for your records.

Submit the original completed application package, including all attachments, with two copies to the DHCR Borough/District Rent Office in the county in which your building is located. We suggest you mail your application by registered mail, return receipt requested.

III. Line-By-Line Instructions for each Form

Form RTP-45 "Owner's Application for Rent Increase based on Alternative Hardship - Part I"

Complete upper right corner as instructed on page 6, item D..

- 1. Owner or Managing Agent information.** Enter the mailing address and telephone number for either the owner or the managing agent, and draw a line through the title which does not apply.
- 2. Leave item blank at this time.**
- 3. Leave item blank at this time.** Attach a schedule, that is current at the time of filing, as shown in the sample below for each apartment in each affected building. List the following for each building separately: Apartment number; Occupant's (Tenant's) name, (if vacant, enter "vacant"); Number of rooms (Use description from item 5d. below); Legal regulated rent for that unit, (if vacant at time of filing, enter the last legal regulated rent and last effective date); "Stabilized" if the apartment is under ETPA or the Rent Stabilization Law; "Controlled" if the apartment is rent-controlled; and "Other" if the apartment is not rent-stabilized or rent-controlled.
For each apartment identified as "Other", enter a short explanation such as "owner-occupied", "employee-occupied", "commercial", etc. Mark this schedule "Attachment for RTP-45, Item 3."

Apt. No.	Occupant's Name	No. of Rooms	Legal Regulated Rent	Stabilized/ Controlled/Other

- 4. Property Address.** Enter the full address, including zip code, of the property for which this application is being filed. If more than one building is included, enter the street address for each building as it appears on the Building Registration Summary, DHCR Form RR-2.

5. Building Data. Enter the building data as follows:

a. Number of Dwelling Units.

b. Number of Professional or Commercial Units, including stores.

c. Total Number of Units. Add a + b.

d. Total Number of Rooms in the building, counted as follows:

COUNT: An enclosed area with window(s); an enclosed area without a window containing at least 80 square feet; a windowless kitchen containing at least 59 square feet.

DO NOT COUNT: Bathrooms, foyers, alcoves, pantries, or walk-in closets whether they contain a window or not.

e. Number of garage spaces (indoor).

f. Number of designed parking spaces (outdoor).

g. Total number of garage and parking spaces. Add e + f.

6. Acquisition and Construction Data. Enter the required acquisition and construction data for the property:

a. Date that the current owner acquired this property.

b. If this property was **purchased at a Tax Sale**, check "yes." Otherwise, check "no."

c. Check the appropriate box(es) to indicate whether the building is brick, frame, or "other" **construction**. If "other," specify type.

d. Year of construction. If not known, enter the approximate year, followed by the letter "A" (Example: 1951A).

e. Number of buildings on this property for which the owner is applying for an alternative hardship increase, and the number of stories in the building(s). (Ground level equals one (1) story.)

f. Type of Building. Check the appropriate box to indicate whether the building is "elevator," "garden," or "walk-up." If "elevator," enter the total number of automatic (passenger-operated) or manual (staff-operated) elevators.

g. Enter the type of fuel used for heat and hot water (oil, gas, electric, coal, etc.) If more than one type, specify each type.

h. Enter the capacity of fuel tanks or bins - number of gallons, tons, or other unit of measurement used.

7. Assessment Data. Enter the Assessment Data for the property:

a. The name of governmental agency (city, town, or village) which establishes the assessed valuation of the property;

The assessed value of the land and the assessed value of the building(s) at the time of filing;

The total assessed value (the sum of both).

b. The first and last days of the tax year for the assessed valuation during the "test year".

c. The section, lot and block number of the property shown on your real estate tax bill.

d. Check "yes" if the **assessed valuation for the year shown** on 7b above, or for the year prior to that year, **was reduced by settlement or Court Order**. If so, enter the following information: the tax year for the reduction, the original assessed valuation and the total dollar amount of the reduction.

e. Check the appropriate box to indicate whether your **real estate tax payments are up to date** at the time of filing this application.

A. Form RTP-45A "Alternative Hardship Rent Increase Qualification Form"

Complete upper right corner as instructed on page 6, item D.

Building Address - Fill in the complete address of the building (house number, street number or name, city or town, and zip code) as it appears on the Building Registration Summary (Form RR-2) filed with DHCR when the building was registered.

Owner - Fill in the name of the entity (person, partnership, corporation, etc.) which owns the property, and the address to which all correspondence should be sent.

1. Did the owner acquire this property within 36 months of the date of this application?

If the current owner (i.e., the person, partnership, corporation or other legal entity which holds the title of record) acquired the property within 36 months of the date of this application, check "yes" and continue to item 2.

If the current owner acquired the property more than 36 months prior to the date of this application, check "no" and continue to item 3.

2. Has owner or an entity related to the owner, owned the property for the last 36 months? The 36 month period is counted from the date this rent increase application is filed.

A prior owner is related to the present owner if:

- a. The prior owner is **related by blood** including parents, grandparents, and children **or marriage** including previous marriage; or
- b. The controlling interest in the entity (partnership or corporation) **currently owning the property** is held by the **same individual or group of individuals who held the controlling interest in the entity previously owning the property**, provided that an individual related by blood or marriage as defined in (a) above may succeed to the interest of an individual in the controlling group without disqualifying the owner as a related entity under the section; or
- c. The present owner is a trust or other fiduciary which received title from the former owner as a gift or under a will.

If a current owner is related to the prior owner as described above and together both have owned the property for the last 36 months, check "yes" and attach a concise statement on a separate sheet of paper which describes how the current and prior owners are related. Mark this as "Attachment for RTP-45A, Item 2." Continue to item 3.

If you checked "no" for item 2, **STOP**. You do not qualify for an Alternative Hardship rent increase at this time.

3. Other hardship rent increases within the last 36 months. The 36 month period is counted from the date this rent increase application is filed.

Check "yes" if you have received either a rent stabilization hardship increase for this building within the last 36 months under Section YY51-6.0(c)(6) of the Administrative Code of the City of New York or Section 34(3) of the Tenant Protection Regulations (comparative hardship), or any alternative hardship rent increase under the Rent Stabilization Law or the Emergency Tenant Protection Act.

Do not check "yes" if the increase you received was a **rent control** hardship increase.

If you checked "yes", **STOP**. You do not qualify for an Alternative Hardship rent increase at this time.

4. Pending reduction in real estate and/or water and sewer charges. Check "yes" if you have resolved all legal objections to any real estate and/or water and sewer charges for the test year. This means you do not have any pending application(s) for reduction of assessed valuation and/or water and sewer charges. If you check "yes," go to item 5.

Check "no" if you have applied for, but not yet received, any valuation reduction which would reduce the total amount of your taxes for the test year.

Check "no" if you have petitioned for, but not been granted, a decision or settlement in an "inequality proceeding" or other action which would reduce the total amount of property taxes and/or water and sewer charges for the test year.

If you checked "no" because there is a pending application for reduction of assessed valuation and/or water and sewer charges, **STOP**. You do not qualify for an Alternative Hardship increase at this time.

5. **Purchase or Construction Price.** Enter the purchase or construction price of the property. This is the full amount of payment for the building and land including cash and securities, the outstanding principal amount of the mortgage(s) or other debts assumed by the purchaser, and any other considerations.
6. **Original value of existing mortgages.** Enter the information for all existing mortgages on this property. The original value of an outstanding mortgage secured by the property is the face value of the mortgage when the mortgage was made. If you assumed any pre-existing mortgage, show the outstanding principal amount of the mortgage on the date of property purchase.
7. **Equity in the property.** Subtract the amount on line 6d from the amount on 5.
8. **Equity as a fraction of property value.**
 If line 8 is greater than 0.05 (5%), you may file for an Alternative Hardship rent increase. Complete Form RTP-45C, Alternative Hardship Rent Increase Application - Part II.
 If line 8 is less than or equal to 0.05 (5%), complete Form RTP-45B, Calculation of Owner's Equity in Property.
9. **Equity as a percentage of property value.** If the amount from line 8 is greater than 0.05 (5%), enter the amount here. If the amount entered on line 8 is less than or equal to 0.05 (5%), complete Form RTP-45B and print "See Form RTP-45B" on this line.

B. Form RTP-45B "Calculation Of Owner's Equity In Property"

Complete upper right corner as instructed on page 6, item D.

1. **Purchase Price or Construction Cost Including Land.** Enter the purchase or construction price of the property. This is the full amount of payment for the building(s) and land including cash and securities, the outstanding principal amount of the mortgage(s) or other debts assumed by the purchaser, and any other consideration. This is the same amount entered on line 5 of Form RTP-45A.
2. **Original Mortgages and Loans.** Enter the original amount(s) of all mortgages or loans used to finance the purchase of the property. Include pre-existing mortgages assumed by the current owner, all mortgages taken out by the current owner at the time of building purchase and all loans taken out by the current owner if the proceeds of such loan(s) were delivered to the seller as part of the settlement. Do not include the portion of amounts used for capital improvements.
3. **Capital Improvements Without Rent Increases.** Enter the cost of all capital improvements (i.e., items deemed depreciable by the Internal Revenue Service) for which no rent increase was collected by the owner. These can be building-wide or within a specific apartment or group of apartments. Attach a schedule as shown below, listing the following for each such capital improvement: description; cost; apartment or space affected. Mark this schedule "Attachment for RTP-45B, Item 3."

Description	Cost	Apartment or Space Affected

4. **Original Principal Amount of Mortgages or Loans.** Enter the original principal amount(s) of any mortgage(s) or loans used to finance the capital improvements entered on line 3.
5. **Repayment of Principal.** Enter the amount by which the original principal amount of any mortgage or loan reflected on line 2 or line 4 was reduced as of the end of the test year. Do not include interest payments or other charges paid for such mortgages or loans. Attach a schedule as shown below, listing the following for each such mortgage or loan: original principal amount; amortization amount; payment date. Do not include interest payments or other charges paid for such mortgages or loans. Mark this schedule "Attachment for RTP-45B, Item 5."

Original Principal Amount	Amortization Amount	Payment Date

6. **Increase in Equalized Assessed Value.** The net increase in the equalized assessed value is computed as follows: Take the difference between the assessment in effect at the end of the test year and the first assessment after purchase of the property, and multiply it by the equalization rate for the test year, which can be obtained from your Borough/District Rent Office. Attach a copy of your computation, as shown below. Mark this "Attachment for RTP-45B, Item 6."

Assessment in Effect at End of Test Year: \$ _____
First Assessment after Purchase of Property: \$ _____
Difference: \$ _____
Equalization Rate for Test Year: _____%

Net Increase: \$ _____

7. **Property Value.** Total lines 1, 3, 5 and 6. This amount is the value of the property, as defined by law, determining whether the owner may apply for an Alternative Hardship rent increase.
8. **Owner's Equity.** Add lines 2 and 4 and subtract total from line 7 and enter the result. This is the owner's equity in the property, as defined by law, determining whether the owner may apply for an Alternative Hardship rent increase.
9. **Owner's Equity as a Percentage of Property Value.** Divide line 8 (owner's equity) by line 7 (property value) and enter result. This is the Owner's Equity in Property shown as fraction of the value of the property.

If line 9 is less than or equal to 0.05 (5%), **STOP.** You do not qualify for an Alternative Hardship rent increase.

If line 9 is more than 0.05 (5%), complete Form RTP-45C.

C. Form RTP-45C "Alternative Hardship Rent Increase Application-Part II.

Complete upper right corner as instructed on page 6, item D.

1. **Rent Increases in the last 36 months.** Check "yes" if you have any building-wide rent increase(s) pending or if you have been granted a rent increase for this building within the last 36 months, under the Emergency Tenant Protection Act or the Rent Stabilization Law for increased services, major capital improvement/substantial rehabilitation. If you check "yes," fill in the Docket Number. If the order has been granted, enter the date of the order.
2. **Outstanding Violations.** Check "yes" if there are any outstanding violations on the property; attach an explanation describing the violations, what is being done to correct them and the approximate date that they will be corrected. Mark this "Attachment for RTP-45C, Item 2."
3. **Building-Wide Rent Reduction.** If you checked "yes", enter the Docket Number; attach a statement that the legal regulated rents shown on the Alternative Hardship Rent Increase forms are the reduced rents, and that all refunds due the tenants have either been refunded or credited to the tenants, or have been deposited with DHCR in escrow for the tenants. Mark this "Attachment for RTP-45C, Item 3."
4. **Required Filing of Property Maintenance and Operations Cost Survey Schedule.** Complete this item only if the building is located outside New York City. Check "yes" if you have already filed your annual Property Maintenance and Operations Cost Survey Schedule for this property and enter the date filed.

DHCR will delay processing your Alternative Hardship application until determining that the required Cost Survey Schedule has been filed. If you check "no," file the Schedule before filing the application. This Schedule is not processed by Rent Administration staff and should not be mailed with the application.

5. **Required Filing of Apartment Registration forms.** Check "yes" if you have registered this property with DHCR. Applications are not processed unless and until a proper registration is on file with DHCR.
6. **Rent Controlled Apartments.** Check "yes" if any apartment was rent controlled at the end of the test year.**
7. **Occupation by Owner or Managing Agent.** Check "yes" if any apartment was occupied by the owner or managing agent for any length of time during the test year.**

** If you check "yes" to any question in items 6 through 13, you must complete the "Rental Income Worksheet, Form RTP-45F.

8. Occupancy by Relative of Owner or Managing Agent. Check "yes" if any apartment was occupied by a relative of the owner or managing agent for any length of time during the test year and the collectible rent charged was less than the allowable stabilized rent.** If both conditions are not met, check "no."

9. Vacant Apartment. Check "yes" if any apartment was vacant more than one month, for any reason during the test year.**

10. Occupation by Employee of Owner or Managing Agent. Check "yes" if any apartment was occupied by an employee of the owner or managing agent for any length of time during the test year and the collectible rent charged such employee was less than the allowable stabilized rent.** If both conditions are not met, check "no."

11. Non-Residential Space. Check "yes" if any apartment, room or space in the building was rented for commercial or professional purposes during the test year.**

12. Occupancy by Senior Citizens with Rent Increase Exemptions. Check "yes" if any stabilized apartment in the building was occupied during the "test year" by senior citizen(s) with rent increase exemption.**

13. Occupancy by Tenants with Section 8 Rent Subsidy. Check "yes" if any stabilized apartment in the building was occupied during the test year by tenant(s) with Section 8 rent subsidy.**

**** If you check "yes" to any question in items 6 through 13, you must complete the "Rental Income Worksheet, Form RTP-45F.**

D. Form RTP-45D "Alternative Hardship Rent Increase Application-Part III Substantiating Information

Complete upper right corner as instructed on page 6, item D.

Selection of the Test Year. Select as your "Test Year" one of the following:

- a. **Most recent calendar year** (January 1st to December 31st);
- b. **Most recent fiscal year** (one year ending on the last day of a month other than December 31st), provided that books of account are maintained and closed accordingly.
- c. **Any 12 consecutive months ending within 90 days before the date of filing application.** Such period must end on the last day of a month.

After entering the "Test Year" selected, collect your income and expense records for the test year, including information on rents, vacant apartments, and mortgages.

A1. Total Rental Income. Enter the total annual collectible rental income. This is the income from all sources; i.e., dwelling units, stores, units for professional or commercial use, garages and parking spaces. If you have apartment units which are not rent stabilized, or have apartments with rent concessions, Senior Citizen's rent increase exemption or Section 8 rent subsidy, compute your total rental income by completing the "Rental Income Worksheet," form RTP-45F, and enter on A1 the total from Line 48.

If any rental income is excluded from Line 1 because it is non-collectible, submit an explanation and evidence, i.e., judgment against tenant plus proof that collection was beyond your control. Mark this "Attachment for RTP-45D, Item A1."

A2. Other Income. Enter all other income not included in A1, such as income from easements or air rights, washing machines and other laundry equipment, vending machines, sign rentals, tax abatement from J-51 or 421-A, etc., during the test year. If there are no other sources of income, enter "NONE." Do not include as "Other Income" any credit which reduces or offsets an itemized cost. Credit items include refunds from certiorari proceedings or tenant reimbursed expenses such as utility costs, non-capital repairs and/or legal fees. Deduct these from related expense items. Credit insurance recovery and premium refunds against the expenses claimed in B12 of this form.

A3. Total Gross Income. Enter the sum of lines 1 and 2.

B4. Fuel. Enter the total cost of fuel (oil, gas, steam, etc.) providing heat and hot water during the test year. If you receive one bill for the cost of both heating fuel and a utility which you provide free to tenants (for example, gas), check "yes" and enter the full amount of the bills. Do not include the cost of the utility in B6. Attach a schedule, as shown below, with the following information for each fuel expense claimed: date of delivery; vendor name; quantity; unit; fuel type; and dollar amount. Mark this "Attachment for RTP-45D, B4."

Date of Delivery	Vendor Name	Quantity	Unit	Type	Dollar Amount

B5. Labor-Payroll. Enter the actual payroll and related payroll costs for the test year for all employees engaged in operating the property, such as superintendent, elevator operators, doormen, porters, and handymen. Related payroll costs include social security taxes, unemployment insurance contributions, workers' compensation, disability and health insurance premiums, and welfare fund contributions. Enter the rental allowance (concession) for apartments occupied by these employees here also. **Do not include payroll for management or administrative personnel.**

If an employee is involved in the operation of a building which is not included in this application, allocate labor costs to each building according to time cards or other activity records maintained in the normal course of business. If records are not available, pro-rate the labor costs to each building according to the proportion of rental rooms in each building maintained by common employees. Be consistent in the method used for allocating labor expense for all buildings.

Attach a schedule, as shown below, for each employee: name; weekly hours scheduled; service performed; weekly wages; total wages paid during test year. Mark this "Attachment for RTP-45D, B 5."

Name	Weekly Hours Scheduled	Service Performed	Weekly Wages	Total Yearly Wages

If the owner personally performs janitorial services (such as cleaning halls, attending to heating system, cleaning of walks, etc.), the owner may claim an allowance for such services computed at \$10.00 per month per unit, including any unit occupied by the owner. If you claim an Owner's Janitorial Allowance, submit a statement clearly describing the nature of the janitorial services performed. Mark this "Attachment for RTP-45D, B5 - Owner's Allowance."

B6. Utilities. Enter the cost of water and sewer charges, and all gas and electric service supplied for the tenants and for the operation of the building during the test year. Omit the cost of a utility included in any bill for fuel, since such costs should be included in your entry on B4. If you were reimbursed by tenants for any utility charges, deduct the amount of reimbursements from B6 costs.

Attach a schedule, as shown below, for each of the utility charges claimed: period covered (first and last dates); type of service; dollar amount. Mark this schedule "Attachment for RTP-45D, B6."

Period Covered	Type of Service	Dollar Amount

B7. Taxes. Total all local real estate, school and county taxes, based on assessed valuation. Do not include any payroll or income taxes, State franchise taxes, or water and sewer charges paid to a municipality, state or federal government. Deduct refunds from certiorari proceedings from the total.

If any tenant received a Senior Citizen Rent Increase Exemption (SCRIE) during the test year, report the amount actually paid for real estate taxes plus the amount of the SCRIE tax abatement(s). Tax abatements (such as J-51 or 421-A) during the test year should also be added to the taxes paid, to the extent they were recorded as "Other Income" in A 2.

B8. Fees. Enter the total amount for professional fees incurred, such as legal and accounting fees. Limit these only to services used in operating the building; exclude services used for financial or personal affairs of the ownership. Do not duplicate fees included in Management Fees. Legal fees listed here include those incurred in connection with preparing leases and landlord-tenant legal proceedings to the extent not reimbursed by the tenant. The fees are the actual amount paid for services rendered. Professional fees for representing the owner before DHCR for this proceeding are not allowed. Attach a copy of the Retainer Agreement(s). Mark this "Attachment for RTP-45D, B8."

B9. Permits. Enter the total amount paid for building, elevator, boiler, environmental permits, etc.

B10. Necessary Contracted Services. Enter the total payments to individual contractors or firms providing services under contract for boiler repairs, elevator maintenance, extermination, exterior grounds maintenance, refuse or garbage removal, appliance and air-conditioner repairs, etc. Do not include payment for work done by the owner's employees. Attach a schedule, as shown below, with the following information for each service: the name of the contractor/vendor; type of service; period covered; and total payment. Mark this "Attachment for RTP-45D, B10."

Name of Contractor/Vendor	Type of Service	Period Covered	Total Payment
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B11. Non-Capital Repairs. Enter the annual cost of repairs and maintenance such as: painting and decorating, plumbing repairs, carpentry, electrical repairs, general repairs, and supplies which are not capitalized and included on B10. Do not include depreciable capital expenses such as: sink replacements, stoves, refrigerators, dishwashers and air-conditioners. If you do not separate costs of parts and supplies from non-capital repairs, include parts and supplies here. Do not include them in B13.

If a DHCR audit shows an unusually high non-capital repair item, you may be required to compute non-capital repairs by taking a one-year average of the expenses for three years ending with the last month of the test year or actual expenses for the year, whichever is lower. If you must submit data for the three-year cycle, and you have been the owner for less than three years, the bills and data of the previous owner, who must be a related entity, is used to calculate the average.

Attach a schedule, as shown below, with the following information for each invoice charge claimed: date of invoice; name of vendor; type of repair, maintenance, part or supply; location (apartment number, lobby, etc.); and dollar amount. Credits reducing an itemized cost should be noted and the amount deducted from the total. Credits include allowances in price, returns of merchandise, proceeds from the sale of materials and supplies, payments received from insurance carriers, and reimbursements from tenants. Mark this schedule "Attachment for RTP-45D, B11."

Invoice Date	Name of Vendor	Type of Repair, Maintenance, Part or Supply	Location	Dollar Amount
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B12. Insurance. Enter the total amount of premiums paid for insurance on property damage, public liability, fire, vandalism, burglary, water damage, etc., carried on the building. If any insurance policy also covers any other building, pro-rate the premiums based on the ratio of the number of rental rooms in this application and the total number of rental rooms of all buildings covered. Do not include health, workers' compensation and disability insurance premiums, as these items are included in B5.

Reduce annual premium cost by all credits which have been received or may be received, such as dividends or rate adjustments.

Submit copies of all insurance policies, showing endorsements and amendments. Attach a schedule, as shown below, with the following for each policy: type of insurance; name of carrier; amount of coverage; term (first and last dates of the period covered); total premium charge; annual cost. Mark all policy copies and the schedule "Attachment for RTP-45D, B12."

Type of Insurance	Name of Carrier	Amount of Coverage	Term	Total Premium Charge	Annual Cost
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B13. Parts and Supplies. Enter actual expenses for parts and supplies used such as: janitorial supplies, maintenance parts, plumbing parts and electrical parts which are not capitalized or included as non-capital repairs in B11. Do not include inventory on hand. Do not separate the parts and supplies from non-capital repairs, if you do not separate such expenses in your books of account.

B14. Management Fees. Check the box identifying the type of management. Calculate management fees, as follows:

If owner managed, an allowance is claimed. The allowance is in place of paying an agent and recognizes work done by the owner for collecting rents, negotiating leases, purchasing parts and supplies, and supervising maintenance employees. The allowance is a percent of the total income shown on **Form RTP-45, A3:**

6% of the first \$100,000.00 of total income
plus
 4% of the second \$100,000.00 of total income
plus
 3% of the balance.

If employee managed, enter the total salaries of such employee(s), including cash payments and benefits paid for them. Do not duplicate costs reported on B5. However, the total of salaries and benefits cannot exceed the allowance for owner managed buildings as calculated above. If an employee manages another building not covered in this application, allocate the costs to each building by using time cards or activity records maintained by the owner. If records are not available, prorate the cost by the proportion of rental rooms in each building managed by common employees.

If agent managed, enter fees paid, but not exceeding the allowance to owner managed buildings as calculated above. If an agent manages another building not covered in this application, pro-rate as instructed for employee managed buildings.

Attach a schedule, as shown below, with the following information: type of management, (ie: owner, agent or employee); basis of computation; and amount. Mark this "Attachment for RTP-45D, B14."

Type of Management	Basis of Computation	Amount for Test Year
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B15. Mortgage Interest. Copy from RTP-45E, B14, the amount of mortgage interest allowed. Do not include mortgage amortization, escrow payments and mortgage-related expenses.

B16. Other Administrative Costs. Enter total of all other administrative costs actually incurred in operating the property. Examples are: advertising fees, rent stabilization fees, inspection fees, costs for upkeep of uniforms and mortgage-related expenses. Mortgage-related expenses are prorated over the life of the mortgage or over a five-year (5 year) period, **whichever is greater.** If a charge was incurred for buildings not covered in this application, prorate the charge appropriately.

Attach a schedule, as shown below, with the following information for each charge: date of invoice; vendor; type of expense; total amount; prorated amount; explanation for proration. Mark this "Attachment for RTP-45D, B16."

Invoice Date	Vendor	Type of Expense	Total Amount	Pro-rated Amount	Explanation for proration
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B17. Total Operating Expenses. Add B4 to B16. Enter the total here.

C18. Relationship Between Income and Expenses. Calculate as instructed. If line 18 is less than or equal to 95% (0.95), **STOP.** You do not qualify for an Alternative Hardship Rent Increase. If line 18 is greater than 95% (0.95), continue to Line 19.

D19. Maximum Allowable Income. Calculate as instructed. This is the gross income needed to make expenses (Line 17) equal to 95% of the maximum allowable income.

E20. Dollar Amount of Rent Increase. Calculate as instructed the difference between the maximum allowable income (Line 19) and the actual income (Line 3). This is the dollar amount of the alternative hardship rent increase for which you are applying.

E. RTP-45E "Calculation of Allowable Mortgage Interest"

Complete upper right corner as instructed on page 6, item D.

A. Current Mortgages:

1. **Holder's Name.** Enter the full name of the person or entity holding each mortgage.
2. **Holder's Address.** Enter the holder's full address (street number and name, city, state and zip code).
3. **Origination Date.** Enter the month and year each mortgage was placed, or the date assumed from a previous owner.
4. **Expiration Date.** Enter the month and year when the final payment is due.
5. **Original Principal.** Enter the beginning balance as of the date entered on line 3, (origination date).
6. **Outstanding Principal.** Enter the balance outstanding as of the last day of the test year.
7. **Interest Rate.** Enter the annual interest rate. If the interest rate is variable, enter the interest rates in effect during the test year and explain the basis of the variable rate.
8. **Interest Payments.** Enter the amount of interest paid during the test year. Exclude any interest accrued from prior year.
9. **Number of Annual Payments.** Enter the number of annual payments. Enter "12" if you pay monthly; "4" if you pay quarterly or "2" if you pay semi-annually.
10. **Type of Mortgage.** Check the **type of mortgage** based on the following definitions:
 - Full self-amortizing** - The balance due on the expiration date is zero.
 - Balloon** - The balance due on the expiration date is greater than zero. If a balloon mortgage, enter the principal balance due on the expiration date.
11. **Relationship between Property Owner and Mortgage Holder.** Check "yes," if the holder (mortgagee) is a corporation, partnership or other legal entity in which the property owner is a shareholder, a partner, or an officer, or if the holder is related by blood or marriage (including previous marriage) to the property owner.
12. **Previous Owner.** Check "yes" if the holder is a previous owner of the property and enter an explanation.
13. **Additional Collateral.** Check "no" if the building and land are the only collateral pledged as security against the mortgage. Check "yes" if any additional assets (i.e., a second building, stocks, bonds, etc.) are pledged as security against the mortgage and attach an explanation. Mark this "Attachment for RTP-45E, A13."
14. **Mortgage Payments.** Check "yes" if you pay your mortgage on time. Check "no" and attach an explanation if you are behind in your mortgage payments. Give the date the latest installment was paid and state the additional interest or penalty paid as a result of default. Mark this "Attachment for RTP-45E, A-14."
15. **Mortgage Payment Statements.** Submit mortgage payment statements or other verifiable documents. If you have more than one mortgage, submit a statement or other acceptable proof for each mortgage. Show the breakdown of each mortgage (i.e., interest paid, amortization, taxes, insurance, escrow and penalty, if any.) Mark this "Attachment for RTP-45E, A15."
16. **Required Mortgage Documents.** For each mortgage, attach a copy of the following: the recorded mortgage, the mortgage commitment letter(s), the mortgage closing statement(s), and any mortgage assignments. Mark this "Attachment for RTP-45E, A16."

17. Mortgage Refinancing. If any existing mortgage was refinanced within the last three (3) years, check "yes" and complete lines 17a through 17c as follows:

- a. Check any mortgage that was refinanced.
- b. Give reason for refinancing - if you have more than one mortgage that you refinanced, identify whether first, second or third mortgage. Mark this "Attachment for RTP-45E, A17b."
- c. If any mortgage was paid before maturity, explain details of prepayment privilege or penalty paid. If you have more than one mortgage identify whether first, second or third mortgage. Mark this "Attachment for RTP-45E, A17c."

B. Prior Mortgages: (Complete only if prior mortgage expired or was terminated within the past three years.)

- 1. Holder's Name.** Enter the full name of the person or entity which held any mortgage which expired or was terminated within the last 36 months.
- 2. Holder's Address.** Enter the holder's full address, (street number and name, city, state and zip code).
- 3. Origination Date.** Enter the month and year each mortgage was placed, or the date assumed by the current owner, whichever is later.
- 4. Expiration Date.** Enter the date the last payment was due or the date the mortgage was satisfied, whichever is earlier.
- 5. Original Principal.** Enter the beginning balance as of the date entered on B3.
- 6. Outstanding Principal at Expiration.** Enter the balance outstanding as of date entered on B4.
- 7. Interest Rate.** Enter the annual interest rate. If the interest rate was variable, enter the interest rates in effect during the year the mortgage expired or was satisfied.
- 8. Annual Debt Service Payments.** Enter the annual amount of payments on the mortgage(s).
- 9. Number of Annual Payments.** Enter the number of annual payments. Enter "12" if you paid monthly; "4" if you paid quarterly; and "2" if you paid semi-annually.
- 10. Allowable Principal on Prior Mortgage.** Total the amounts entered on B6.
- 11. Principal on Current Mortgage.** Total the amounts entered on A5.
- 12. Proportion of Interest Cost Allowed.** Divide B10 by B11. Enter if it is less than or equal to 1.00 (100%). If result is greater than 1.00, enter 1.00.
- 13. Total Interest Cost on Current Mortgages.** Total the amounts entered in A8.
- 14. Allowable Interest Cost.** Multiply the total from B13 by the figure in B12. Enter the result here and on Form RTP-45D, 15.

F. Form RTP-45F, "Rental Income Worksheet"

Complete upper right corner as instructed on page 6 item D.

Part I. Rent Stabilized Apartments.

- 1. Total Stabilized Rent Income.** Enter the total rent payable by tenants in rent stabilized units during the test year. Include the rents payable by the owner's relatives and/or employees, by tenants receiving Senior Citizen Rent Increase Exemption and/or Section 8 rent subsidy in rent-stabilized units. Do not include the amounts of the exemptions or subsidies. If rent is payable, but was not collected and you excluded that rent, attach proof such as: a judgment against the tenant and explain why collection was beyond your control; this proof is submitted as part of Form RTP-45D, A1.
- 2. Total Number of Rooms.** Enter the total number of rooms in rent-stabilized units at the end of the test year. A rent-controlled unit which was vacated during the year becomes a rent stabilized unit and is included here.

Part II. Rent-Controlled Apartments. If none, enter a zero ("0") on lines 3 and 4.

- 3. Total Rent.** Enter the total rent payable on all rent-controlled apartments during the test year.
- 4. Total Number of Rooms.** Enter the number of rooms in rent-controlled units at the end of the test year.

Part III. Commercial/Professional Units. If none, enter a zero ("0") on lines 5 and 6.

- 5. Total Rent.** Enter the total rent payable on all commercial and/or professional units during the test year.
- 6. Total Number of Rooms.** Enter the total number of rooms in commercial and/or professional units. Calculate the equivalent number of rooms in the commercial and/or professional space that an apartment would have with the same square footage. For example: if a commercial or professional unit measures 1200 square feet, compare the space with an apartment (preferably in the same line) that measures nearest to 1200 square feet; if your room count for the apartment was 4 rooms, count the commercial space as 4 "rooms."

Part IV. Owner's or Managing Agent's Apartment. If the owner or managing agent occupies an apartment in the building during the test year, the rental value of the apartment must be added to the total income of the building. If neither the owner nor the managing agent occupied an apartment during the test year, enter a zero ("0") on lines 7 through 11.

- 7. Expiration Date of Last Stabilized Lease.** Enter the month and year the owner's apartment was vacated by the last rent-stabilized tenant or by the last rent-controlled tenant, whichever is applicable. If the date is unknown, mark "not known" and attach a complete explanation.
- 8. Last Stabilized Rent.** Enter the amount of the monthly stabilized rent on the date shown on line 7. If the rent was controlled, mark "RC". If the amount is unknown, mark "not known."
- 9. Imputed Monthly Rent.** Calculate the imputed monthly rent for the owner's apartment by the method below that reflects your entry on line 8.

If your entry on line 8 is the monthly rent at the expiration of the last rent-stabilized lease, use the three-year or two-year rent guideline in effect on the date shown on line 7, plus vacancy guideline (if any), to compute the monthly rent. Apply as many three-year and/or two-year guideline increases as needed. The last calculation is the imputed monthly rent to be entered on line 9.

If your entry on line 8 is marked "RC" or "not known", consult the rent roll for the test year. Add the highest monthly rent amount and the lowest monthly rent amount for apartments in the building having the same number of rooms as the owner's apartment. Divide by two (2). Enter this result on line 9.

- 10. Imputed Annual Rent.** Multiply the imputed monthly rent on line 9 by 12 to get the annual imputed rent and enter on line 10.
- 11. Total Number of Rooms.** Enter the total number of rooms in owner's apartment.

Part V. Owner or Managing Agent Relatives Apartments. The concessions granted to tenants who are relatives must be added to the actual rent collectible. The concession is equal to the difference between the allowable stabilized rent and the rent actually charged the relative. If you had no apartments occupied by relatives of the owner or managing agent, or if the relatives paid the legal regulated rent, enter a zero ("0") on lines 12 through 16 of Column G.

12. to 15. Attach additional sheets, if needed; mark these "Attachment for RTP-45F, items 12-15."

Col. A. Apartment Number. Enter the apartment number of each apartment occupied by a relative. Relatives include children, grandchildren, parents, grandparents, brothers, sisters, cousins, aunts, uncles and former spouses.

Col. B. Number of Rooms. Enter the number of rooms in each apartment. See instructions for RTP-45, line 5 for description of rooms.

Col. C. Legal Regulated Monthly Rent. Enter the legal regulated rent per month that would have been payable for the apartment if it were not occupied by a relative.

Col. D. Monthly Rent Paid. Enter the actual monthly rent which the relative paid during the test year.

Col. E. Monthly Concession. Enter the difference between Column C and Column D for the monthly concession.

Col. F. Months Occupied. Enter the number of months the relative occupied the apartment. If it was occupied the entire year, enter "12".

Col. G. Total Concession Amount. Multiply the figure in Column E by the figure in Column F and enter result.

16. Col. B. Total Number of Rooms. Add the entries in Column B and enter the total in the box.

Col. G. Total Concession. Add the entries in Column G and enter the total in the box.

Part VI. Rent on Employees' Apartments. If employees of the owner or managing agent occupied apartments at less than the allowable stabilized rent, the concessions granted to the employees must be added to actual rent charged. If no rent was collected from employees, the allowable rents are entered as concessions. If no apartments were occupied by employees of the owner or managing agent, enter zero ("0") on lines 17 through 21 in Column G.

17. to 20. Attach additional sheets, if needed; mark these "Attachment for RTP-45F, items 17-20."

Col. A. Apartment Number. Enter the apartment number of each employee.

Col. B. Number of Rooms. Enter the number of rooms in each apartment.

Col. C. Legal Regulated Monthly Rent. Enter the legal regulated rent per month that would have been payable if it were not occupied by an employee of the owner or managing agent.

Col. D. Monthly Rent Paid. Enter the actual monthly rent paid by the employee. If the employee occupied the apartment "rent free", enter "zero."

Col. E. Monthly Concession. Enter the difference between Column C and Column D for the monthly concession.

Col. F. Months Occupied. Enter the number of months the employees occupied the apartment. If it was occupied the entire year, enter "12."

Col. G. Total Concession Amount. Multiply the figure in Column E by the figure in Column F and enter result.

21. Col. B. Total Number of Rooms. Add the entries in Column B and enter the total in the box.

Col. G. Total Concession for Test Year. Add the entries in Column G and enter the total in the box.

Part VII. Long Term Vacancies. If an apartment is vacant or unoccupied for more than one month, add to the rental income the amount that would have been received if the apartment was occupied. If a long-term vacancy is due to extenuating circumstances such as fire, attach an explanation.

22. to 26. Attach additional sheets if needed; mark these "Attachment for RTP-45F, Items 22-26."

Col. A. Apartment Number. Enter the apartment number.

Col. B. Termination Date. Enter the month, day and year on which the last tenant moved out leading to a vacancy.

Col. C. Origination Date. If the apartment was rented again during the test year, enter the beginning date of the new lease.

Col. D. Vacancy Reason. Give the reason why the apartment was vacant.

Col. E. Length of Vacancy. Enter the number of months in which the apartment was vacant.

Col. F. Legal Regulated Monthly Rent. If you entered a date in Column C, enter the monthly rent collectible on the first rental after the vacancy. Use the legal regulated rent in effect on the date entered in Column C. If you did not enter a date in Column C, compute the monthly rent by following the instructions for imputed rent in Part IV, 9 using the date in Column B above.

Col. G. Vacancy Rent Loss. Multiply the amount in Column E by the amount in Column F and enter result.

27. Total Vacancy Rent Loss for Test Year. Add the entries in Column G. Enter the total in this box.

Part VIII. Senior Citizens' Apartments. If no apartments were occupied by senior citizens with rent increase exemptions, enter zero ("0") on lines 28 through 32 in Column G.

28 to 32. Attach additional sheets, if needed; mark these "Attachment for RTP-45F, Items 28-32."

Col. A. Apartment Number. Enter the apartment number.

Col. B. Number of Rooms. Enter the number of rooms in each apartment.

Col. C. Legal Regulated Monthly Rent. Enter the legal regulated rent per month.

Col. D. Monthly Rent Collected. Enter the actual monthly rent collected from each tenant.

Col. E. Monthly Difference. Subtract the amount in Column D from the amount in Column C and enter the result.

Col. F. Number of Exemption Months. Enter the number of months each tenant occupied the apartment and received the exemption.

Col. G. Total Abatement Amounts. Multiply the amount in Column E by the number in Column F and enter the result.

Col. G. Total Abatement Amounts. Multiply the amount in Column E by the number in Column F and enter result.

Col. H. Rent Stabilized or Rent Controlled. If the apartment listed is rent stabilized, enter an "S" in this column. If the apartment listed is rent-controlled, enter a "C" in this column.

33. Col. B. Total Number of Rooms. Add the entries under Column B. Enter the total in this box.

Col. G. Total Abatement for Test Year. Add the entries under Column G. Enter the total in this box.

Part IX. Section 8 Tenants' Apartments. If no apartments were occupied by tenants with Section 8 Subsidy, enter a zero ("0") on lines 34 through 38 in Column G.

34 to 38. Attach additional sheets, if needed; mark these "Attachment for RTP-45F, Items 34-37."

Col. A. Apartment Number. Enter the apartment number.

Col. B. Number of Rooms. Enter the number of rooms in each apartment.

Col. C. Maximum Allowable Rent. Enter the maximum allowable rent per month.

Col. D. Monthly Collectible Rent . Enter the actual monthly rent collectible from each tenant.

Col. E. Monthly Subsidy. Subtract the amount in Column D from the amount in Column C and enter the result.

Col. F. Months Occupied. Enter the number of months each tenant occupied the apartment and received the subsidy.

Col. G. Total Subsidy. Multiply the amount in Column E by the number in Column F and enter the result.

Col. H. Rent Stabilized/Rent Controlled. If the apartment is rent stabilized, enter "S"; If rent controlled, enter "C".

38. Col. B. Total Number of Rooms. Add the entries under Column B. Enter the total in this box.

Part X. Summary of Rental Income. Carefully copy your entry from the referenced line.

39. Rent Stabilized Apartments. Copy the entry from line 1.

40. Rent Controlled Apartments. Copy the entry from line 3.

41. Commercial/Professional Apartments. Copy the entry from line 5.

42. Imputed Rent on Owner's or Managing Agent's Apartment. Copy the entry from line 10.

43. Concessions Granted to Relatives. Copy the entry from line 16, Column G.

44. Concessions Granted to Employees. Copy the entry from line 21, Column G.

45. Vacancy Rent Loss. Copy the entry from line 27, Column G.

46. Senior Citizens' Apartments. Copy the entry from line 33, Column G.

47. Section 8 Rent Subsidy. Copy the entry from line 38, Column G.

48. Total Rent Income. Add the entries in lines 39 through 47 and enter result on this line. In addition, copy the entry to Form RTP-45D, line 1. This is the total rent income during the test year.

Part XI. Income and Expense Allocation for Mixed Buildings. A mixed building is one in which there is at least one rent stabilized apartment and at least one rent controlled apartment. Do not complete Part XI if all apartments are rent stabilized, since no allocation is necessary. If all apartments rent controlled, you should not be filing this application.

49. Total Residential Room Count. Calculate the total residential room count as follows:

- a. Copy the entry from Line 2 of this form.
- b. Copy the entry from Line 4 of this form.
- c. Add the entries on Lines 49a and 49b, and enter the total on Line 49c.

50. Rent Stabilized Room Ratio. Divide the entry on Line 49a by the entry on Line 49c. Enter the result.

51. Total Income Allocated to Rent Stabilized Units.

a. On a separate sheet, copy the following rental income figures:

Entry on Line 39 (Rent Stabilized Apartments)

Entry on Line 42 (Imputed Rent on Owner's or Managing Agent's Apartment)

Entry on Line 43 (Concession Granted to Relatives)

Entry on Line 44 (Concession Granted to Employees)

Entry on Line 45 (Long Term Vacancy Rent Loss)

Adjusted entry of Line 46 (SCRIE). Add the Col. G entries for rent stabilized apartments (identified with an "S" in Col. H.)

Adjusted entry of Line 47 apartments (Section 8 Subsidy). Add the Col. H entries for rent stabilized apartments (identified with an "S" in Col. H.)

Add the above entries. Enter on Line 51a.

b. Commercial Income Allocated to Rent Stabilized Units. Multiply the entry on Line 41 (Commercial/ Professional Units) by the entry on Line 50 (Rent Stabilized Room Ratio). Enter result on Line 51b.

c. Other Income Allocated to Rent Stabilized Units. Refer to your completed form RTP-45D. Multiply the entry on Line 2 of the RTP-45D by the entry on Line 50 above. Enter result on Line 51c.

d. Total Income Allocated to Rent Stabilized Units. Add Lines 51a, 51b and 51c. Enter on Line 51d.

52. Total Operating Expenses Allocated to Rent Stabilized Units. Refer to your completed form RTP-45D. Multiply the entry on Line 17 of the RTP-45D by the entry on Line 50. Enter result on Line 52.

53. Relationship Between Income and Expenses Allocated to Rent Stabilized Units. Calculate as instructed on the form.

If entry on Line 53 is less than or equal to 0.95% (95%) **STOP.** You do not qualify.

If entry on Line 53 is greater than 0.95% (95%), continue to Line 54.

54. Maximum Allowable Stabilized Income. Calculate as instructed on the form. This is the gross income required to set the property's rent stabilized expenses (Line 52) equal to 95% of the gross rent stabilized income.

55. Relationship Between Allowable and Actual Rent Stabilized Income. Calculate as instructed on the form. This is the difference between the maximum allowable rent stabilized income (Line 54) and the actual total income allocated to rent stabilized units during the test year (Line 51d). This is the dollar amount of the rent stabilized alternative hardship rent increase for which you are applying.

Form RTP-45G, "Owner's or Managing Agent's Statement of Affirmation To Application For Alternative Rent Increase"

Complete upper right corner as instructed on page 6, item D.

Enter the current date.

Print the owner's name.

Owner or managing agent must sign the affirmation.

Print the name of the individual whose signature appears. This is required even if the owner has signed and has printed his or her name under the date.

Print the title of the individual whose signature appears.

Checklist of Required Attachments

The list of attachments shows schedules, statements, documents, etc. that may be necessary for submission with your Application for Rent Increase Based on Alternative Hardship. Each listing consists of the following:

A brief title for the attachment;

A reference to the specific form and the line number in which information appears; and

The word "**ALL**" or the word "**ITEM**". If the word "**REQUIRED**" appears, the attachment must be included. If the word "**ITEM**" appears, refer to the instructions for the specific form and line number to determine whether this attachment is required for your application.

Before sending the application, be sure that each "Required Attachment" is checked off. If you must furnish any additional attachments, marked "ITEM", check the box in the "Checklist" column after preparing the attachment. Mark each attachment clearly; if we can not identify an attachment, we will not consider it when reviewing your application.

Brief Title	Form #	Line #	Required Attachment	Checklist
Legal Regulated Rent Schedule	RTP-45,	3	REQUIRED	<input type="checkbox"/>
Owners' Relationships	RTP-45A,	2	ITEM	<input type="checkbox"/>
Capital Improvements Without Rent Increase Collected	RTP-45B,	3	ITEM	<input type="checkbox"/>
Amortization Payments	RTP-45B,	5	ITEM	<input type="checkbox"/>
Computation of Net Increase in Equalized Assessed Value	RTP-45B,	6	ITEM	<input type="checkbox"/>
Outstanding Violations	RTP-45C,	2	ITEM	<input type="checkbox"/>
Rent Reductions	RTP-45C,	3	ITEM	<input type="checkbox"/>
Excluded Non-Collectible Rental Income	RTP-45D,	1	ITEM	<input type="checkbox"/>
Fuel Schedule	RTP-45D,	4	REQUIRED	<input type="checkbox"/>
Labor Payroll	RTP-45D,	5	REQUIRED	<input type="checkbox"/>
Owner's Janitorial Allowance	RTP-45D,	5	ITEM	<input type="checkbox"/>
Utility Charges Schedule	RTP-45D,	6	REQUIRED	<input type="checkbox"/>
Professional Retainer Agreement	RTP-45D,	8	REQUIRED	<input type="checkbox"/>
Necessary Contracted Services	RTP-45D,	10	REQUIRED	<input type="checkbox"/>
Non-Capital Repairs	RTP-45D,	11	REQUIRED	<input type="checkbox"/>
Insurance Policies	RTP-45D,	12	REQUIRED	<input type="checkbox"/>
Management Fees	RTP-45D,	14	REQUIRED	<input type="checkbox"/>
Other Administrative Costs	RTP-45D,	16	REQUIRED	<input type="checkbox"/>
Additional Assets	RTP-45E,	A-13	ITEM	<input type="checkbox"/>
Mortgage Payment Arrears	RTP-45E,	A-14	ITEM	<input type="checkbox"/>
Mortgage Payment Statements	RTP-45E,	A-15	ITEM	<input type="checkbox"/>
Mortgage Documents	RTP-45E,	A-16	ITEM	<input type="checkbox"/>
Mortgage Refinancing	RTP-45E,	A-17b	ITEM	<input type="checkbox"/>
Mortgage Prepayment	RTP-45E,	A-17c	ITEM	<input type="checkbox"/>

Office of Rent Administration

Direct all communications to the Rent office in the county in which your building is located. Use the assigned Docket Number.

If you plan to visit an office, we suggest you telephone to confirm the address.

Borough Rent Offices

- | | |
|--|---|
| <input type="checkbox"/> Lower Manhattan (South side of 110 St. and below):
156 William Street, 9th Floor
New York, NY 10038
Tel. (212) 240-6010 | <input type="checkbox"/> Brooklyn:
250 Schermerhorn Street, 3rd Floor
Brooklyn, NY 11201
Tel. (718) 780-9246 |
| <input type="checkbox"/> Upper Manhattan (North side of 110 St. and above):
163 West 125 Street, 5th Floor
New York, NY 10027
Tel. (212) 870-8930 | <input type="checkbox"/> Queens:
92-31 Union Hall Street, 4th Floor
Jamaica, NY 11433
Tel. (718) 739-6400 |
| <input type="checkbox"/> Bronx:
One Fordham Plaza, 2nd Floor
Bronx, NY 10458
Tel. (212) 519-5678 | <input type="checkbox"/> Staten Island:
350 St. Mark's Place, Room 105
Staten Island, NY 10301
Tel. (718) 816-0277 |

District Rent Offices

- | | |
|--|--|
| <input type="checkbox"/> Nassau County:
50 Clinton Street, 6th Floor
Hempstead, NY 11550
Tel. (516) 481-9494 | <input type="checkbox"/> Rockland County:
94-96 North Main Street, Ground Floor
Spring Valley, NY 10977
Tel. (914) 425-6575 |
| <input type="checkbox"/> Westchester County:
55 Church Street, 3rd Floor
White Plains, NY 10601
Tel. (914) 984-4434 | <input checked="" type="checkbox"/> Albany County:
119 Washington Avenue
Albany, NY 12210-2204
Tel. (518) 432-0596 |
- Buffalo Regional Office
Ellicott Square Building
295 Main Street, Room 446
Buffalo, NY 14203
Tel. (716) 856-1382

* Alternative Hardship not applicable

State Of New York

**Division of Housing and Community Renewal
Office of Rent Administration
92 -31 Union Hall Street
Jamaica, NY 11433
(718) 739-6400**