



# NOTICE OF CERTIFICATION

Pursuant to the Uniform Land Use Review Procedure

Application #:	Project Name:
CEQR Number:	Borough(s):
	Community District Number(s):

Please use the above application number on all correspondence concerning this application

Docket Description:

Related Applications:				
Applicant(s):			Applicant's Representative:	
<p><b>Contact:</b> Address questions about this application to the following DCP office: <b>DEPARTMENT OF CITY PLANNING</b></p> <p><b>Address:</b> <b>Phone:</b> <b>Fax:</b></p>				
<p><b>Public Review Timeline:</b></p> <p>On <u>                    </u> the above listed application was certified as complete by the Department of City Planning. The          ] ^!q aA for community board review begins on <u>                    </u> and must be completed by <u>                    </u></p>				