New York State
Department of State
Division of Building Standards and Codes
One Commerce Plaza
99 Washington Avenue, Suite 1160
Albany, NY 12231-0001
(518) 474-4073
FAX: (518) 474-5788
www.dos.ny.gov

Print Form

Reporting Year: 2017

19 NYCRR PART 1204
UNIFORM CODE: ADMINISTRATION AND ENFORCEMENT BY STATE AGENCIES

STATE AGENCY ANNUAL REPORT

Uniform Code Administration and Enforcement

GENERAL INFORMATION

Name of State Agency: _____

Mailing Address _____

This Report is being submitted by:

☐ Entire Agency ☐ Campus, Region or Division on behalf of the agency's primary code coordinator

If the form is being completed for anything other than the entire agency, please describe the Campus, Region or Division(be specific):

_____

If form is being completed for anything other than the entire agency, has/will form be submitted to Central Agency**:**

Name of Primary Agency Code Coordinator: _____

Title of Primary Agency Code Coordinator : _____

Code Official NYDOS Certification #: _____

Phone Number: _____ E-mail Address: _____

NUMBER OF BUILDINGS WITHIN CUSTODY OF THIS AGENCY

1. Total number of buildings within the custody of this State Agency for reporting year **2014:**

2. Total number of buildings within the custody of this State Agency for reporting year **2013:**

ADDITIONAL INFORMATION/COMMENTS

NEW YORK STATE OF OPPORTUNITY.
Building Standards and Codes

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State Agency: _____

3. List all construction permits, code compliance certificates, and temporary approvals for occupancy which were issued or received by the State Agency preparing this Report during the calendar year covered by this Report, and indicate which permits, certificates and temporary approvals were still valid on December 31 of the calendar year covered by this Report:

☐ *Check here if this list is included or continued on attached sheet[s]*

Permit, Certificate or Approval	Valid on December 31

New York State
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4. List all fire safety inspections conducted within buildings or structures in the custody of the State Agency preparing this Report during the calendar year covered by this Report

☐ *Check here if this list is included or continued on attached sheet[s]*

Date of Inspection	Building or Structure Inspected

New York State
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5. List all code violations within the State Agency's buildings or structures which were discovered during the calendar year covered by this Report and which were not corrected within 60 days of their discovery, and indicate the current status of each such violation:

☐ *Check here if this list is included or continued on attached sheet[s]*

Date of Discovery:	Building or Structure	Violation (s) Discovered	Current Status

New York State
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State Agency: _____

6. Provide a statement of a plan to correct each violation which is listed in the preceding section and which remains uncorrected:

☐ *Check here if this list is included or continued on attached sheet[s]*

7. List all code related complaints made or received by the State Agency preparing this Report during the calendar year covered by this Report, and the disposition of each such complaint

☐ *Check here if there were no complaints*

☐ *Check here if this list is included or continued on attached sheet[s]*

Complaint	Disposition

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State Agency: _____

8. List all *changes* during the calendar year covered by this Report in the list of the buildings or portions of buildings which the State Agency preparing this Report occupies, uses, maintains, or operates *and* which are within its custody:

☐ *Check here if there were no changes*

☐ *Check here if this list is included or continued on attached sheet[s]*

Building or Portion of Building	Added to or removed from list

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State Agency: _____

9. List all *changes* during the calendar year covered by this Report in the list of the buildings or portions of buildings which the State Agency preparing this Report occupies, uses, maintains, or operates and which are (i) within the custody of another State Agency or (ii) subject to code enforcement by the authority responsible for enforcement in the particular municipality where the building is located:

☐ *Check here if this list is included or continued on attached sheet[s]*

Building or Portion of Building	Nature of and reason for change (e.g., removed from list because this State Agency no longer occupies, uses, maintains or operates this building or portion of building)

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ABOUT THIS FORM

Each State Agency that has not been granted an exemption under 19 NYCRR Section 1204.15 is required to prepare an annual report that includes the following information:

(1) the name and address of the State Agency, the name and address of the State Agency's code coordinator, and the name(s) and address(es) of the State Agency's code compliance manager(s), if any;

(2) a list of all construction permits, code compliance certificates, and temporary approvals for occupancy which were issued or received during the preceding year along with an indication of which permits, certificates and temporary approvals were still valid on the preceding December 31st;

(3) a list of all fire safety inspections conducted within buildings or structures in the custody of the State Agency;

(4) a list of all code violations within the State Agency's buildings or structures which were not corrected within 60 days of their discovery;

(5) a statement of the current status of the violations noted in paragraph (4) and a plan to correct any such violations still uncorrected;

(6) a list of all code related complaints and their disposition;

(7)any changes in the list of the buildings or portions of buildings which the State Agency occupies, uses, maintains, or operates *and* which are within its custody; and

(8) any changes in the list of the buildings or portions of buildings which the State Agency occupies, uses, maintains, or operates and which are (i) within the custody of another State Agency or (ii) subject to code enforcement by the authority responsible for enforcement in the particular municipality where the building is located.

The report must be completed by February 1 of each year, and must include the information pertaining to the preceding calendar year. Each State Agency must notify the Department of State of the Agency's completion of its annual report within 30 days after completion.

This form is provided as a courtesy of the Secretary of State of the State of New York, to assist State Agencies in fulfilling their Annual Report requirements pursuant to 19 NYCRR Part 1204. Use of this form is optional, but may be used to satisfy their Annual Report obligation. State Agencies may instead use other forms, where acceptable to the Secretary of State, to fulfill their Annual Report obligations.