



Annual Registration Summary 2022

DHCR website: www.hcr.ny.gov

1. Building Registration Number 117723			18. Building Status		
2. Building Street Address 336 E 56TH ST			Building Class <input type="checkbox"/> Class A <input checked="" type="checkbox"/> Class B		
3. City, Town or Village NEW YORK 4. ZIP Code (plus 4) NY 10022			Building Description		
5. County Code 62 - NEW YORK 5a. Municipality Code			<input type="checkbox"/> Hotel <input type="checkbox"/> Single Room Occupancy		
6. Owner's Name CHARLES HENRY PROPERTIES, LLC			<input type="checkbox"/> Garden Apartment Complex <input type="checkbox"/> Coop / Condo		
7. Owner's Street Address P.O. BOX 682			Non-Evict Coop/Condo Plan Effective Date: _____		
8. City, Town or Village NEW YORK 9. State NY 10. ZIP Code 10108			Evict Coop/Condo Plan Effective Date: _____		
11. Telephone Number (212) 683-9300 Email Address CLAUDE@CHARLESHENRYPROPERTIES.COM			Coop/Condo Plan Filed: _____		
12. Managing Agent's Name			Financing Programs		
13. Managing Agent's Street Address			<input type="checkbox"/> Sec 11-243 or 11-244 (J-51) <input type="checkbox"/> Sec 608 of PHFL		
14. City, Town or Village 15. State 16. ZIP Code			<input type="checkbox"/> Article 11 of PHFL <input type="checkbox"/> Article 14 & 15 of PHFL <input type="checkbox"/> 421-g		
17. Telephone Number Email Address			<input type="checkbox"/> 421-a(1-15) <input type="checkbox"/> 421-a(16)		
			Total Number of 421-a Units: Income Restricted _____		
			Market Rate _____		
19. Types of Units in Building on April 1, 2022					
					Number
* STABILIZED/ETPA (includes vacant and temporarily exempt)					1
RENT CONTROL					_____
PERMANENTLY EXEMPT					_____
TOTAL NUMBER OF APARTMENTS IN BUILDING					1
* Units subject to annual administrative fee. See DHCR Policy Statement 89-7 on our website at www.hcr.ny.gov .					
20. TOTAL NUMBER OF APARTMENT FORMS SUBMITTED					1

21. AFFIDAVIT AND CERTIFICATION

I have verified that the information entered on the Annual Registration Summary and the associated Annual Apartment Registration(s) for the subject premises, to the best of my knowledge, information and belief, is true, accurate and complete. I further affirm that I am the individual owner, individual managing agent, officer or partner of the corporation/partnership of the owning entity of said premises, the authorized representative of the owning entity or managing agent of said premises and that I am authorized to sign and file this registration with the New York State Division of Housing and Community Renewal.

All services furnished or which are required to be furnished to these premises/housing accommodations by any law, ordinance or regulation applicable to the premises/housing accommodations are being maintained and will continue to be maintained. Other than rent controlled or exempt apartments, one copy of the Annual Apartment Registration form will be provided to each tenant of the apartment to which said form applies in accordance with DHCR requirements.

Name of Individual: CLAUDE SIMON

Date: 6/2/2022

Status of Person Affirming: Individual Owner

Name of Corporation or Partnership: