

# MIZRAHI LAW OFFICES, LLC.

## NON-PAYMENT INTAKE FORM



EMAIL: INTAKE@EVICTNY.COM  
FAX: 917 595-5371

1. Date:
2. Contact Person/Client:
3. Tenant(s) you are seeking to evict:
4. What is the tenant's address (with specific apartment or unit number, if applicable):
5. Was there EVER a written lease with anyone listed in question 3 above? ☐ Yes ☐ No
  - a. Was there ever a written lease renewal? ☐ Yes ☐ No
6. If you answered "NO" to #5 – was there an ORAL rental agreement? ☐ Yes ☐ No
  - a. What was the term of the agreement (i.e. month-to-month, week-to-week, etc.)?
7. What is the current monthly (or weekly) rent amount?
8. How old is the oldest tenant or occupant (approximate, if nec.)?
9. Is any tenant or occupant suffering from any mental or physical disability?
10. Is the unit ☐ Residential or ☐ Commercial Unit (please check one).
11. If residential, the unit is (check all those that apply):  
☐ Rent Stabilized    ☐ Rent Controlled    ☐ Co-op    ☐ Condo    ☐ Free Market  
☐ Section 8 (☐NYCHA ☐HPD ☐Other)    ☐ Subsidized-Other (please explain below)
12. Breakdown of rent non-payment & applicable late fees:

Month-Year	Rent Amount	Late Fee

13. Additional information to be considered (if applicable):

PLEASE EMAIL OR FAX COMPLETED FORM TO:  
[INTAKE@EvictNY.COM](mailto:INTAKE@EvictNY.COM) OR 917 595-5371,  
YOU WILL BE CONTACTED SHORTLY, THANK YOU FOR YOUR BUSINESS.