



<b>M-90cc</b>	Application Review Addendum Checklist (Rev. 10/22/13)
<b>M-90e</b>	Non Cash Assistance Supplemental Nutrition Assistance Program (NCA SNAP) Application/Recertification Kit Forms (Rev. 10/22/13)
<b>LDSS-5004</b>	Electronic Benefit Transfer (EBT) How to Use Your Benefit Card to Get Supplemental Nutrition Assistance Program (SNAP) and/or Cash Benefits
<b>Obsolete</b>	
<b>PUB. 4596</b>	Electronic Benefits Transfer (EBT) How To Use Your Benefit Card To Get Food Stamp and/ or Cash Benefits (Obsolete)

## Cash Assistance Application Kit Forms

Forms included in the Cash Assistance Application Kit:

Item	Title	Form Number	Agency
1	Non-Parent Caregivers (Grandparents, Other Relatives, Friends) Caring for Children	<a href="#">Attachment A****</a>	State
2	Changes to the LDSS-2921 Statewide	<a href="#">Attachment 1****</a>	State
3	Statewide Common Application	<a href="#">LDSS-2921*</a>	State
4	Supplemental Nutrition Assistance Program (SNAP) Change Report Form	<a href="#">LDSS-3151*</a>	State
5	New York State What You Should Know About Your Rights And Responsibilities (When Applying For or Receiving Benefits)	<a href="#">LDSS-4148A*</a>	State
6	New York State What You Should Know About Social Services Programs Questions and Answers	<a href="#">LDSS-4148B*</a>	State
7	New York State What You Should Know If You Have An Emergency Questions and Answers	<a href="#">LDSS-4148C*</a>	State
8	Notice Of Responsibilities And Rights For Support	<a href="#">LDSS-4279**</a>	State
9	Domestic Violence Screening Form Under the Family Violence Option	<a href="#">LDSS-4583*</a>	State
10	Domestic Violence Palm Card	<a href="#">LDSS-4583A**</a>	State
11	DFR Legal Residence Statement	<a href="#">LDSS-4733</a>	State
12	Information about Child Support Services and Application/Referral for Child Support Services	<a href="#">LDSS-4882</a>	State
13	Domestic Violence Information for all Temporary Assistance Applicants	<a href="#">LDSS-4905*</a>	State
14	New York State How To Complete The Temporary Assistance (TA) - Medical Assistance (MA) - Medical Savings Program (MSP) - Food Stamp Benefits (FS) - Services (S), including Foster Care (FC) - Child Care Assistance (CC) Application	<a href="#">PUB-1301*</a>	State
15	How To Use Your Benefit Card To Get Supplemental Nutrition Assistance Program (SNAP) and/or Cash Benefits	<a href="#">LDSS-5004**</a>	State
16	Keep the Heat On With HEAP	<a href="#">PUB-4735</a>	State
17	Notice to All Applicants	<a href="#">EXP-75Q***</a>	FIA
18	Notice to Individuals Who Entered the United States or Had Their Status Changed Via Sponsorship	<a href="#">FIA-1068*</a>	FIA
19	I Speak Cards for Limited English Proficient Applicant/Participant	<a href="#">HRA-101***</a> <a href="#">(FIA-1043)</a>	FIA
20	Your Interview with the Office of Child Support Enforcement	<a href="#">M-384t*</a>	FIA

\*Denotes forms that are available in multiple languages. Job Center staff must include the appropriate foreign language version of the forms in the foreign language version of the CA Application Kit.

\*\*Available in English and Spanish only.

\*\*\*Multiple languages are contained on one form.

\*\*\*\*Denotes forms that must be manually printed until made available on the OTDA website. Only available in English at this time.

## Cash Assistance Application Kit Forms

Forms included in the Cash Assistance Application Kit:

Item	Title	Form Number	Agency
21	Child Care Guarantee Informational	<a href="#">M-528m</a> **	FIA
22	Attention: Applicants/Participants	<a href="#">W-116U</a> *	FIA
23	Important: Using Common Benefit Identification Cards (CBIC) for Medical Services	<a href="#">W-126E</a> *	FIA
24	Services for Victims of Sexual Assault	<a href="#">W-131</a> **	FIA
25	Cash Assistance Additional Allowances	<a href="#">W-137C</a> *	FIA
26	Notice of Benefits and Services Available from the HIV/AIDS Services Administration (HASA)	<a href="#">W-139E</a> **	FIA
27	Troubled? Frustrated? Angry? Don't Take It Out On Your Children!	<a href="#">W-273A</a> **	FIA
28	Did You Know That The City of New York Will Pay for Your Child Care For Your Children Under 13 and For Children With Special Needs?	<a href="#">CS-273E</a> **	ACS
29	Notice to Applicants and Participants Regarding Third Party Health Insurance	<a href="#">W-299</a> *	FIA
30	What To Do If You Have Been Sexually Assaulted	<a href="#">BRC-100B</a> **	Mayor's Office
31	Welfare Fraud (BFI Bureau of Fraud Investigation)	<a href="#">BRC-151M</a> **	BFI
32	Guide to Work Supports	<a href="#">BRC-504</a> **	FIA
33	Are You a Person With a Disability?	<a href="#">BRC-681A</a> *	HRA
34	Interpretation Services Notice for the Application/Recertification Kits (Insert)	<a href="#">W-515W</a> ***	FIA
35	Eligibility Verification Review Questionnaire	<a href="#">W-532T</a> *	FIA
36	Cash Assistance & Child Support What You Need to Know	<a href="#">W-549D</a> **	OCSE
37	Child Care Fact Sheet and Planner	<a href="#">CS-574EE</a> **	ACS
38	Language Questionnaire	<a href="#">W-680FF</a> *	FIA
39	Notice to Applicants/Participants	<a href="#">W-904DD</a> *	FIA
40	Essential Persons	<a href="#">W-912KK</a> **	FIA
41	List of Participating Clinics and Hospitals (Child/Teen Health Program)	<a href="#">MAP-58k</a> ***	FIA
42	Explanation of the Medicaid Buy-In Program For Working People with Disabilities (MBI-WPD)	<a href="#">MAP-252</a> *	MAP
43	Child/Teen Health Program (C/THP) Fact Sheet	<a href="#">MAP-1096</a> *	MAP
44	Public Health Insurance Eligibility: You Can Qualify	<a href="#">MAP-2020N</a>	MAP

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Job Center: \_\_\_\_\_

Review Month: \_\_\_\_\_

Reviewer's Name: \_\_\_\_\_

### Application Review Addendum Checklist

(Reviewer is to request to see the Application Kits in three different languages)

A- APPLICATION KIT																		Language Legend														
Reception Area																		A = Arabic														
INDICATE LANGUAGE (3)																		C = Chinese														
1																		D = Haitian/Creole														
2																		E = English														
3																		K = Korean														
																		R = Russian														
																		S = Spanish														
B- MANDATED FORMS				Attachment A ****	BRC-151M**	BRC-681A*	LDSS-2921*	LDSS-3151*	LDSS-4148A*	LDSS-4148B*	LDSS-4148C*	LDSS-4583*	LDSS-4882	LDSS-4905*	MAP-252*	M-384K*	MAP-1096*	PUB-1301*	LDSS-5004	PUB-4916*	W-126E*	W-137C*	W-299*	W-680FF*	W-904DD*							
Application Kit Check to see if the Mandated Forms are in the Application Kit in the requested language. <b>ENTER: YES (Y) / NO (N) or Check the box for English/Spanish Only (E/S)**</b>				1																												
				2																												
				3																												
				E/S																												
				Attachment-1	Revised Assignment of Support Rights Language for <b>LDSS-2921</b>																											
				BRC-100B**	What To Do If You Have Been Sexually Assaulted																											
				BRC-504**	A Guide to Work Supports																											
				BRC-681A*	Are You a Person With a Disability?																											
				CS-273E**	Did You Know That The City of New York Will Pay for Your Child Care For You Children Under 13 and For Children With Special Needs?																											
				CS-574EE**	Child Care Fact Sheet and Planner																											
				EXP-75Q***	Notice to All Applicants																											
				FIA-1043*** (HRA-101)	I Speak Card (Instructional)																											
				FIA-1068*	Notice to Individuals Who Entered the United States or Had Their Status Changed Via Sponsorship																											
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				W-116U*	Attention: Applicants/Participants																											
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				W-515W***	Interpretation Services Notice for the Application/Recertification Kits (Insert)																											
				W-532T*	Eligibility Verification Review Questionnaire																											
				W-549D**	Cash Assistance & Child Support: What You Need To Know																											
				W-912KK**	Essential Persons																											
C- POSTER																		D- PALM CARDS														
All Applicant/Participant Waiting Areas																		Application/Reception Area														
"IF YOU NEED AN INTERPRETER" POSTER																		LANGUAGE PALM CARDS														
(PUB-4842)																		(FORM W-194)														
ENTER Y - YES				POSTER AVAILABLE	Available in all Waiting Areas				Palm Card Available				Available in Application/Reception Area																			
N - NO																																

\*Denotes forms that are available in multiple languages.

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## Non Cash Assistance Supplemental Nutrition Assistance Program (NCA SNAP) Application/Recertification Kit Forms

Forms included in the NCA SNAP Application/Recertification Kit:

Item	Title	Form Number	Agency
1	Non-Parent Caregivers Caring for Children	<a href="#">Attachment A</a>	State
2	Domestic Violence Palm Card	<a href="#">LDSS-4583A</a> **	State
3	Supplemental Nutrition Assistance Program (SNAP) Application/Recertification	<a href="#">LDSS-4826</a> *	State
4	How To Complete The Supplemental Nutrition Assistance Program (SNAP) Application/Recertification and Applicant/Recipient Rights and Responsibilities for SNAP	<a href="#">LDSS-4826A</a> *	State
5	How To Use Your Benefit Card To Get Supplemental Nutrition Assistance Program (SNAP) and/or Cash Benefits	<a href="#">LDSS-5004</a> **	State
6	List of Participating Clinics and Hospitals	<a href="#">MAP-58k</a> ***	FIA
7	Child/Teen Health Program (C/THP) Fact Sheet	<a href="#">MAP-1096</a> *	MAP
8	I Speak Card (Instructional)	<a href="#">HRA-101</a> *** <a href="#">(FIA-1043)</a>	FIA
9	Supplemental Nutrition Assistance Program (SNAP) Documentation Guide	<a href="#">W-129G</a> *	FIA
10	Services for Victims of Sexual Assault	<a href="#">W-131</a> **	FIA
11	Interpretation Services Notice for the Application/Recertification Kits (Insert)	<a href="#">W-515W</a> ***	FIA
12	Photo Identification for Supplemental Nutrition Assistance Program (SNAP) / Finger Imaging for Cash Assistance Notice	<a href="#">W-519</a> *	FIA
13	Language Questionnaire	<a href="#">W-680FF</a> *	FIA
14	What To Do If You Have Been Sexually Assaulted	<a href="#">BRC-100B</a> **	Mayor's Office
15	Guide to Work Supports	<a href="#">BRC-504</a> **	FIA
16	Are You a Person With a Disability?	<a href="#">BRC-681A</a> *	HRA

\*Available in multiple languages.  
 \*\*Available in English and Spanish only.  
 \*\*\*Multiple languages are contained on one form.

NCA SNAP Center staff must include the appropriate foreign language version of the forms in the foreign language version of the NCA SNAP Application/Recertification Kit.

**Electronic Benefit Transfer (EBT)**  
**How to Use Your Benefit Card to Get Supplemental Nutrition Assistance Program (SNAP)**  
**and/or Cash Benefits**

**YOUR BENEFIT CARD**

- Keep your card in your card sleeve and in a safe place when you are not using it.
- Sign the back of your card.
- Do not write on or scratch the black stripe on the back of your card.
- Do not put your card near magnets. If your card is damaged or bent, it will need to be replaced by your local assistance center.
- If your card is lost, stolen or damaged, you must first call EBT Customer Service at **1-888-328-6399**.
- The Quest® mark is displayed on the back of your card.

**YOUR PIN—KEEP YOUR PIN A SECRET**

PIN stands for Personal Identification Number.

- Your PIN is your electronic signature.
- It contains four (4) numbers.
- Your benefit card will not work without your PIN.
- If you forget your PIN or want to change your PIN at any time, call **1-888-328-6399**. You will be asked to provide certain information for security purposes. You may also change your PIN at most Social Services Offices, Job Centers and SNAP Centers.
- If you enter your PIN incorrectly four times in a row, your account will be locked out until the next day even if you select a new PIN.
- **Never write your PIN on your card or on the card sleeve.**
- Never let anyone, even a store cashier, see you enter your PIN at a machine.
- **Never give your PIN to anyone. If a person has your card and knows your PIN, all of your benefits can be used.**
- If someone else uses your card and PIN, your BENEFITS WILL NOT BE REPLACED.
- If you need a friend or close relative to have access to your EBT benefits, contact your local agency about naming an Authorized Representative on your case.

**HOW TO USE YOUR CARD AT THE STORE**

1. Before you shop, check your last receipt to find out how much money is in your account, or call toll free **1-888-328-6399** or on the Internet [www.myaccount.chase.com](http://www.myaccount.chase.com).
2. Most food stores accept the EBT Card. Look for the Quest® sign on the door or window of the store.
3. Many stores that do not display the Quest® sign will accept the card. If you do not see the sign, ask a clerk before shopping.
4. At check-out, your card is swiped through the machine by you or the store cashier.
5. Follow the directions on the machine to enter your PIN. Only you should enter your PIN.
6. Tell the cashier how much money to enter, or enter the amount yourself.
7. Always check your receipt to make sure that the amount on the EBT purchase is the same as the grocery receipt.
8. If you are required to “key” enter your card that fails to “swipe” a purchase transaction because the card is damaged, you **must** contact EBT Customer Service (**1-888-328-6399**) and request a new card from your Case Manager.

**CHECKING YOUR SNAP and/or CASH ACCOUNT BALANCES**

Check your balance **before** you shop or withdraw cash!

You can do **FREE** balance inquiries:

- At food stores to check your food account.
- At ATMs to check your cash account where EBT cards are accepted.
- By calling Customer Service toll free at **1-888-328-6399**.
- On the internet at [www.myaccount.chase.com](http://www.myaccount.chase.com)

**SNAP PURCHASE**

- Use your SNAP benefit account to purchase food. You cannot get cash back from your SNAP account.
- Remember, you can only buy allowable food items with your SNAP benefits.
- All SNAP benefit transactions are free. There is no limit to the number of times you can use your card for SNAP benefit transactions.



**CASH PURCHASE**

- Any item may be purchased using your cash benefit account where EBT cards are accepted.

**CASH WITHDRAWAL**

- Some stores will allow you to receive cash back above the cost of your purchase.
- Some stores will allow cash withdrawal without a purchase.
- You must follow the store's policy regarding the allowable amount for cash back or withdrawals.
- If you use both a SNAP benefit account and a cash benefit account at the same time, your card will be swiped through the machine twice and you must enter your PIN twice.

**HOW TO USE YOUR BENEFIT CARD AT AN AUTOMATED TELLER MACHINE (ATM)**

Choose an ATM in a place where you feel safe.

Always follow directions on the ATM.

Put your card in the machine.

- Enter your PIN.
- Never let anyone see you enter your PIN.
- Press Withdrawal.
- Press Checking.
- Enter the dollar amount you want.
- Take your cash, card, and receipt so you will know how much you have left in your account.
- Check the receipt to make sure it is the same as the amount you got.

- You will have two (2) free ATM withdrawals each month at ATMs which do not surcharge.
- After the first 2 free, each extra ATM withdrawal will cost you a 50¢ fee even at ATMs that do not surcharge.
- This fee will be automatically taken out of your cash benefit account. You will not receive any other notification that this fee is being charged.

**WARNING:** SOME LOCATIONS CHARGE \$1.00 OR MORE FOR CASH WITHDRAWALS. LOOK FOR A MESSAGE ON THE ATM TO TELL YOU ABOUT THE SURCHARGE BEFORE YOU WITHDRAW ANY CASH.

YOU CAN CALL **1-800-289-6739** FREE FOR ATM LOCATIONS IN YOUR AREA THAT **DO NOT** SURCHARGE FOR CASH WITHDRAWALS.

**IDENTITY THEFT – PROTECT YOUR EBT BENEFITS**

**If someone calls you, don't give them personal information such as your social security number, EBT card number, or EBT PIN. Even if the caller claims to be a local agency worker, a State, a Federal or an EBT official, do not give them your personal information.**

If you suspect or know:

- That your card or card number has been stolen;
- That someone not authorized by you has gained access to your PIN; or
- That someone has gained information about your identity that may result in your benefits being stolen.

Then follow these three (3) steps:

1. You **must** contact EBT Customer Service (**1-888-328-6399**) or on the Internet at [www.myaccount.chase.com](http://www.myaccount.chase.com) to report your EBT card stolen. EBT Customer Service will deactivate your card so that no one else can use it. Only by first contacting EBT Customer Service to deactivate your EBT card can you protect yourself against potential benefit theft.



2. Contact your local agency worker to report the problem and to request what is called EBT ARU PIN Restriction. You, as the cardholder, will need to sign a permission form at your local agency or assistance center in order for this procedure to be used. This is a procedure that your local agency can use to make it impossible to change your PIN over the phone through the EBT Customer Service helpline or through the internet Cardholder Account website. Once this procedure is done, any PIN changes would have to be done by you, with your card in hand, at the local agency or assistance center.
3. Request that your worker issue you a new EBT card. It is recommended that you select a new PIN for your new card at the agency or assistance center.

### **CARDHOLDER ACCOUNT WEBSITE**

You can now get information about your account(s) on the Internet by going to [www.myaccount.chase.com](http://www.myaccount.chase.com). Once you sign in with your card number and PIN, you will be able to do the following:

- Get your account summary (account balances)
- Get your account(s) activity (transaction) details
- Change your PIN (unless you have a PIN restriction in place)
- Get an online account statement
- Communicate directly with EBT Customer Service; and
- Report your card damaged, lost or stolen.

The website also allows you to create your own account ID and password after you have logged in for the first time. You should use your most recent active card number to sign in. Authorized representatives can also use this website to access account information by using their own EBT card and PIN.

### **EXPUNGED BENEFITS**

An expunged benefit is a benefit that is **removed** from a cash or SNAP account. In the cash benefit program, if you do not use your account for a period of 90 consecutive days, any cash benefit remaining in the account that is at least 90 days old will be expunged (removed) from the account. You may ask your worker to reissue any expunged cash benefit for which you are eligible. In the SNAP benefit program, if you do not use your SNAP account for a period of 365 consecutive days, any SNAP benefit remaining in the account that is at least 365 days old will be expunged (removed) from the account. Expunged SNAP benefits cannot be reissued.

### **EBT TRANSACTION ERRORS**

Occasionally an EBT **system** error occurs during a cash or SNAP transaction resulting in a mistake being made in the account balance. Some examples of EBT system transaction errors:

- If you made a SNAP purchase, and the SNAP account was incorrectly charged twice for the same purchase; or
- If an ATM only gave you \$20 when you requested \$40, but your cash account was still charged the \$40.

If you think a **system** (not clerical or human) error has reduced your account incorrectly, you may file a claim for an account adjustment by contacting EBT Customer Service. You have 90 days from the date of the suspected transaction error to file your claim.

- SNAP account claims are usually resolved within 15 days.
- Cash account claims may take up to 30 days to resolve.
- EBT Customer Service will provide you with a claim number that you can use to check the status of your claim.

While you are waiting for your claim to be resolved, your local agency or assistance center cannot replace the amount you are disputing. If you have an emergency or immediate need, you may contact your local agency or assistance center regarding that need.

### **WHEN TO CONTACT CUSTOMER SERVICE**

Call Toll Free **1-888-328-6399**

or

On the Internet **[www.myaccount.chase.com](http://www.myaccount.chase.com)**

**24 hours/7 days a week**

Your call will be answered by an automated system. You will be guided through menu options to help direct your call.

**Call if:**

- You need your SNAP or cash account balance.
- You have questions or problems with your SNAP or cash account information.
- Your card is lost, stolen or damaged.
- You suspect that a transaction error occurred and you would like to file a claim.
- You need information about using your benefit card or PIN.

**People with disabilities may use the following numbers for assistance:**

**TTY Users: 1-800-662-1220**  
**Non TTY Users: 1-800-421-1220**  
**VCO Users: 1-877-826-6977**

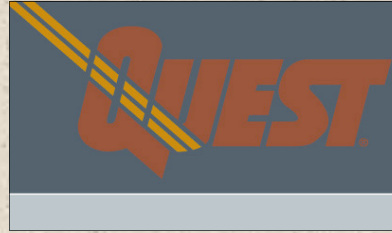
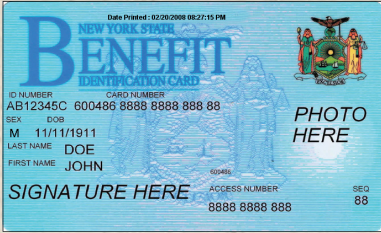
**IT'S THE LAW**

Misuse or abuse of your card will result in investigation by State and/or Federal authorities. Documented violations will result in sanctions including:

- Disqualification from program
- Recovery through recoupment/restitution
- Referral for criminal prosecution

It is a crime to defraud the system or to misuse your card.

SAMPLE



# Electronic Benefits Transfer (EBT)

**OB**SOLETE

*How To Use Your Benefit  
Card To Get Food Stamp  
and/or Cash Benefits*

## YOUR BENEFIT CARD

- Keep your card in your card sleeve and in a safe place when you are not using it.
- Sign the back of your card.
- Do not write on or scratch the black stripe on the back of your card.
- Do not put your card near magnets. If your card is damaged or bent, it will need to be replaced by your local assistance center.
- If your card is lost, stolen or damaged, you must first call EBT Customer Service at **1-888-328-6399**.
- The Quest® mark is displayed on the back of your card.



## YOUR PIN

PIN stands for Personal Identification Number.

- Your PIN is your electronic signature.
- It contains four (4) numbers.
- Your benefit card will not work without your PIN.
- If you forget your PIN or want to change your PIN at any time, call **1-888-328-6399**. This is done with one phone call, and you will be asked to provide certain information for security purposes.
- If you enter your PIN incorrectly four times in a row, your account will be locked out until the next day even if you select a new PIN.
- **KEEP YOUR PIN A SECRET!**
- **Never write your PIN on your card.**
- Never let anyone, even a store cashier, see you enter your PIN at a machine.
- **Never give your PIN to anyone. If a person has your card and knows your PIN, all of your benefits can be used.**
- If someone else uses your card and PIN, your BENEFITS WILL NOT BE REPLACED.
- If you need a friend or close relative to have access to your EBT benefits, contact your local agency about naming an Authorized Representative on your case.

## HOW TO USE YOUR CARD AT THE STORE

1. Before you shop, check your last receipt to find out how much money is in your account, or call **1-888-328-6399** for your balance. This is a free call.
2. Most food stores accept the EBT Card. Look for the Quest® sign on the door or window of the store.
3. Many stores that do not display the Quest® sign will accept the card. If you do not see the sign, ask a clerk before shopping.
4. At check-out, your card is swiped through the machine by you or the store cashier.
5. Follow the directions on the machine to enter your PIN. Only you should enter your PIN.
6. Tell the cashier how much money to enter, or enter the amount yourself.
7. Always check your receipt to make sure that the amount on the EBT purchase is the same as the grocery receipt.



**OBSELETE**

## CHECKING YOUR FOOD STAMP and/or CASH ACCOUNT BALANCES

Check your balance **before** you shop or withdraw cash!

You can do **FREE** balance inquiries:

- At food stores to check your food account.
- At ATMs to check your cash account where EBT cards are accepted.
- By calling Customer Service toll free at **1-888-328-6399**.
- On the internet at [www.ebtaccount.jpmorgan.com](http://www.ebtaccount.jpmorgan.com)

## FOOD STAMP PURCHASE

- Use your food stamp benefit account to purchase food. You cannot get cash back from your food stamp account.
- Remember, you can only buy allowable food items with your food benefits.
- All food stamp benefit transactions are free. There is no limit to the number of times you can use your card for food stamp benefit transactions.

## CASH PURCHASE

- Any item may be purchased using your cash benefit account where EBT cards are accepted.

## CASH WITHDRAWAL

- Some stores will allow you to receive cash back above the cost of your purchase.
- Some stores will allow cash withdrawal without a purchase.
- You must follow the store's policy regarding the allowable amount for cash back or withdrawals.
- If you use both a food stamp benefit account and a cash benefit account at the same time your card will be swiped through the machine twice and you must enter your PIN twice.

## HOW TO USE YOUR BENEFIT CARD AT AN AUTOMATED TELLER MACHINE (ATM)

Choose an ATM in a place where you feel safe.

Always follow directions on the ATM.

Put your card in the machine.

- Enter your PIN.
- Never let anyone see you enter your PIN.
- Press Withdrawal.
- Press Checking.
- Enter the dollar amount you want.
- Take your cash, card, and receipt so you will know how much you have left in your account.
- Check the receipt to make sure it is the same as the amount you got.

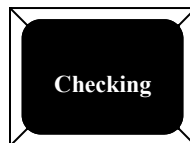
- You will have two (2) free ATM withdrawals each month at ATMs which do not surcharge.
- Each extra ATM withdrawal will cost you a 50¢ fee even at ATMs that do not surcharge.
- This fee will be automatically taken out of your cash benefit account. You will not receive any other notification that this fee is being charged.

**WARNING:** SOME LOCATIONS CHARGE \$1.00 OR MORE FOR CASH WITHDRAWALS. LOOK FOR A MESSAGE ON THE ATM TO TELL YOU ABOUT THE SURCHARGE BEFORE YOU WITHDRAW ANY CASH.

YOU CAN CALL **1-800-289-6739** FREE FOR ATM LOCATIONS IN YOUR AREA THAT **DO NOT** SURCHARGE FOR CASH WITHDRAWALS.



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## **IDENTITY THEFT – PROTECT YOUR EBT BENEFITS**

**If someone calls you, don't give them personal information such as your social security number, EBT card number, or EBT PIN. Even if the caller claims to be a local agency worker, a State, a Federal or an EBT official, do not give them your personal information.**

If you suspect or know:

- That your card or card number has been stolen;
- That someone not authorized by you has gained access to your PIN; or
- That someone has gained information about your identity that may result in your benefits being stolen.

Then follow these three (3) steps:

1. You **must** contact EBT Customer Service (**1-888-328-6399**) to report your EBT card stolen. EBT Customer Service will deactivate your card so that no one else can use it. Only by first contacting EBT Customer Service to deactivate your EBT card can you protect yourself against potential benefit theft.
2. Contact your local agency worker to report the problem and to request what is called EBT ARU PIN Restriction. You, as the cardholder, will need to sign a permission form at your local agency or assistance center in order for this procedure to be used. This is a procedure your local agency can use to make it impossible to change your PIN over the phone through the EBT Customer Service helpline or through the internet Cardholder Account website. Once this procedure is done, any PIN changes would have to be done by you, with your card in hand, at the local agency or assistance center.
3. Request that your worker issue you a new EBT card. It is recommended that you select a new PIN for your new card at the agency or assistance center.

## CARDHOLDER ACCOUNT WEBSITE

You can now get information about your account(s) on the Internet by going to [www.ebtaccount.jpmorgan.com](http://www.ebtaccount.jpmorgan.com) . Once you sign in with your card number and PIN, you will be able to do the following:

- Get your account summary (account balances);
- Get your account(s) activity (transaction) details;
- Get an online account statement;
- Change your PIN (unless you have a PIN restriction in place);
- Communicate directly with EBT Customer Service; and
- Report your card damaged, lost or stolen.

The website also allows you to create your own account ID and password after you have logged in for the first time. You should use your most recent active card number to sign in. Authorized representatives can also use this website to access account information by using their own EBT card and PIN.

**JPMorganChase**

### Welcome to EBT Account

[En Español](#)

The quick and easy way to access your EBT Account information.

- Check your balance
- Review transaction history
- Change your PIN
- Contact Customer Service
- ...and more

First time using this system? [Click here to register and access your account information.](#) [Registration Help](#)

**Login with UserID and Password**

User ID:

Password:  [Forgot Your Password?](#)

Take Me To:   Make this page my default destination page.

**Login with CardNumber and PIN**

Card Number:

PIN:

Take Me To:   Make this page my default destination page.

## EXPUNGED BENEFITS

An expunged benefit is a benefit that is **removed** from a cash or food stamp account. In the cash benefit program, if you do not use your account for a period of 90 consecutive days, any cash benefit remaining in the account that is at least 90 days old will be expunged (removed) from the account. You may ask your worker to reissue any expunged cash benefit for which you are eligible.

In the food stamp benefit program, if you do not use your food stamp account for a period of 270 consecutive days, any food stamp benefit remaining in the account that is at least 270 days old will be expunged (removed) from the account. Expunged food stamp benefits cannot be reissued.

## EBT TRANSACTION ERRORS

Occasionally an EBT **system** error occurs during a cash or food stamp transaction resulting in a mistake being made in the account balance.

Some examples of EBT system transaction errors:

- If you made a food stamp purchase, and the food stamp account was incorrectly charged twice for the same purchase, or
- If an ATM only gave you \$20 when you requested \$40, but your cash account was still charged the \$40.

If you think a **system** (not clerical or human) error has reduced your account incorrectly, you may file a claim for an account adjustment by contacting EBT Customer Service. You have 90 days from the date of the suspected transaction error to file your claim.

- Food stamp account claims are usually resolved within 15 days.
- Cash account claims may take up to 30 days to resolve.
- EBT Customer Service will provide you with a claim number that you can use to check the status of your claim.

While you are waiting for your claim to be resolved, your local agency or assistance center cannot replace the amount you are disputing. If you have an emergency or immediate need you may contact your local agency or assistance center regarding that need.

**WHEN TO CALL CUSTOMER SERVICE**

**This is a free call.  
1-888-328-6399**



Customer Service is available 24 hours a day, 7 days a week. Your call will be answered by an automated system. You will be guided through menu options to help direct your call.

**Call if:**

- You need your food stamp or cash account balance.
- You have questions or problems with your food stamp or cash account information.
- Your card is lost or stolen.
- You suspect that a transaction error occurred and you would like to file a claim.
- You need information about using your benefit card or PIN.

**Important Notice: As of August 15, 2007, you can no longer access EBT Customer Service from a payphone.**

**OBSOLETE**

**People with disabilities may use the following numbers for assistance:**

- TTY Users: 1-800-662-1220**
- Non TTY Users: 1-800-421-1220**
- VCO Users: 1-877-826-6977**

**IT'S THE LAW**

Misuse or abuse of your card will result in investigation by State and/or Federal authorities. Documented violations will result in sanctions including:

- Disqualification from program
- Recovery through recoupment/restitution
- Referral for criminal prosecution

It is a crime to defraud the system or to misuse your card.

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OBSOLETE



**State of New York**  
**David A. Paterson, Governor**  
New York State Office of Temporary & Disability Assistance  
David A. Hansell, Commissioner