



# FAMILY INDEPENDENCE ADMINISTRATION

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Office of Procedures

## POLICY BULLETIN #15-11-SYS

### ELECTRONIC FUNDS TRANSFER TO CON EDISON FOR SINGLE ISSUE PAYMENTS OF UTILITY ARREARS

<b>Date:</b> February 17, 2015	<b>Subtopic(s):</b> POS, PAM
<p> This procedure can now be accessed on the FIAweb.</p> <p>Refer to <a href="#">PD #14-12-ELI</a>.</p> <p>Refer to <a href="#">PB #15-10-SYS</a>.</p>	<p>The purpose of this policy bulletin is to inform Utility Liaisons and all staff in the Job Centers that a new process has been developed by Management Information Systems (MIS) to send single issue payments for utility arrears to Con Edison via an electronic funds transfer (EFT). This policy bulletin is informational for all others.</p> <p>The Paperless Office System (POS) now has the ability to send EFT payments to Con Edison using a routing option (RO) instead of issuing e-checks. There is no change to the process used by the JOS/Worker to generate the initial request for a utility grant in POS on the <b>Single Issue Benefit Data Entry</b> window.</p> <p>EFT payments to Con Edison can be made for the following special grant codes:</p> <ul style="list-style-type: none"> <li>• Code <b>10</b> – Utility Grant to Prevent Turn Off/Restore Services (prior to CA);</li> <li>• Code <b>41</b> – Utility Grant to Prevent Turn Off or Restore Utility Services (Mismanagement); and</li> <li>• Code <b>50</b> – Non-Recoupable Utility Grant (No Mismanagement).</li> </ul> <p><b>Note:</b> Utility grants that were processed prior to the new process will not be impacted.</p>

HAVE QUESTIONS ABOUT THIS PROCEDURE?  
Call 718-557-1313 then press 3 at the prompt followed by 1 or  
send an e-mail to *FIA Call Center Fax* or fax to: (917) 639-0298

The JOS/Worker must ensure that the correct 15-digit Con Edison account number is entered in the **Account Number** field on the **POS Arrears/Clearance Information** window, see the screen shot below.

Arrears/Clearance Information window

The screenshot shows the 'Arrears/Clearance Information' window. A red box highlights the 'Account Number' field. Other visible fields include 'Name On Bill', 'Other Name', 'Is the Name on this Utility bill a person residing in Household?' (Yes/No), 'Company Name' (Con Edison), 'Company Address' (4 Irving Place NW9), 'Company City' (New York), 'Company State' (NY), 'Company Zip' (10003), 'Company Phone', 'Amount of Current Bill' (\$488.23), 'Bill Frequency' (M), 'Verified' (Yes/No), 'Gas or Electric Service is' (On/Off), 'Service End Date' (00/00/0000), 'Are there Arrears?' (Yes.../No), 'Is this a Heat related Utility?' (Yes/No), 'Utility Guarantee WMS Indicator' (2), 'Utility Guarantee' (1-Con Edison), 'Utility Restriction' (None), 'Document...' (Electric Bill), and 'Scan' (checked). 'OK' and 'Cancel' buttons are at the bottom.

Refer to [PD #10-22-SYS](#).

POS will automatically fill in the correct values for the *Pick-Up Codes*, *Routing Location* and *Authorization Number* fields on the **Single Issue Benefit Data Entry** window, see the screen shot below.

Single Issue Benefit Data Entry window.

The screenshot shows the 'Single Issue Benefit Data Entry Window' from the 'Paperless Office System'. The title bar indicates 'Version 18.3.1 - Paperless Office System - [Single Issue Benefit Data Entry Window]' and the date is 'Thursday, January 22, 2015'. The window contains several fields: 'Case Number', 'Case Name', 'Suffix' (1), 'Re-Use Case Number', 'Center' (Hunts Point Job Center), 'Category' (FA), 'Request Type' (Additional Payment to Maintain or Restore Utility Services(41 - Recoupable Payment of Utility Arrears)), 'What type of grant needs to be issued?' (PA/SNAP), 'Total grant amount' (\$100.00), and 'View CA Toe Digit Schedule'. The 'PA Single Issue Grant Information' section includes: 'Pick-Up Codes' (PUC 1 - Special Roll Check), 'Issuance Category' (Emergency Grants Codes), 'Issuance Code' (Code 10 - Utility Grant to Prevent Turn-Off or Restore Services Prior to Public Assistar), 'Case Category for Emergency Grant' (EAF), 'Fair Hearing', 'Shelter Type' (01), 'Is this a back-up grant?' (Yes/No), 'Amount' (\$25.00), 'From' (10/01/2014), 'To' (10/31/2014), 'Routing Location' (R034), 'Replaces Check Number', 'Restricted Indicator', 'Vendor', and 'Authorization Number' (00335000). 'Done' and 'Cancel' buttons are at the bottom.

The information that is entered into POS, regarding a utility grant payable to Con Edison, is not directly transmitted into the Con Edison Public Assistance Central (PAC) system. Therefore, the Utility Liaison/Supervisor is responsible for entering the grant information into the PAC system as it was entered into POS.

The PAC system will generate a Notification to Utility Company (**M-858v**) form when the grant is successfully processed. The version of the **M-858v** in the PAC system is not the current version that is generated in POS. The Utility Liaison/Supervisor must print the **M-858v** that was generated by the PAC system and scan and index the **M-858v** into the applicant/participant's electronic case record.

Refer to **Attachment A**.

The Utility Liaison/Supervisor accesses the PAC system online at <http://www.coned.com/pac>. Refer to the Public Assistance Central Handbook for HRA Users (**Attachment A**) for instructions on how to navigate the PAC system.

**Note:** MIS sends a file to Con Edison that lists all of the single issue payments made. Con Edison uses the file to compare the payments received with the PAC entries to reconcile the accounts of their clients.

If the utility service has already been shut off or if there is a pending shut off, Con Edison will begin the restoration of the utility service once the Utility Liaison/Supervisor enters the grant information into the Con Edison PAC system.

When the Group/Unit Supervisor completes the approval activity, s/he must confirm that the JOS/Worker entered the correct 15-digit Con Edison account number.

Refer to  
[PB #13-90-SYS](#).

If POS is unavailable and the Con Edison payment cannot wait until the system is restarted, the JOS/Worker is required to prepare the Public Assistance Single Issuance Authorization Form (**LDSS-3575**) in the Paperless Alternate Module (PAM), s/he must be sure to make the same entries on the **LDSS-3575** that POS would automatically fill in on the **Single Issue Benefit Data Entry** window, including:

- **PUC 1 – Special Roll Check** in the *Pick-Up Codes* field;
- **RO94** in the *Routing Location* field; and
- Unique authorization number for the utility grant in the *Authorization Number* field.

*Effective Immediately*

**Related Items:**

[PB #15-10-SYS](#)

[PD #14-12-ELI](#)

[PB #13-90-SYS](#)

[PD #10-22-SYS](#)

**Attachment:**

**Attachment A**      Public Assistance Central Handbook for HRA  
Users



# **PUBLIC ASSISTANCE CENTRAL HANDBOOK FOR HRA USERS**

## Attachment A



## Table of Contents

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## Attachment A

# LOGIN

To access this system, double click the Launch Internet Explorer icon on your desk top.

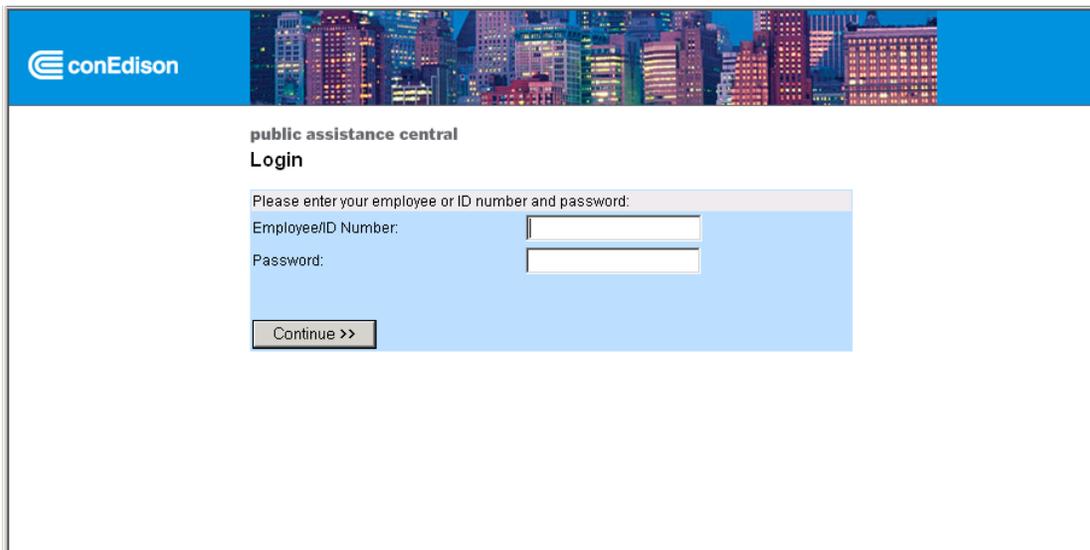


In the address section of the browser, type in the on the following link:

**www.coned.com/pac**

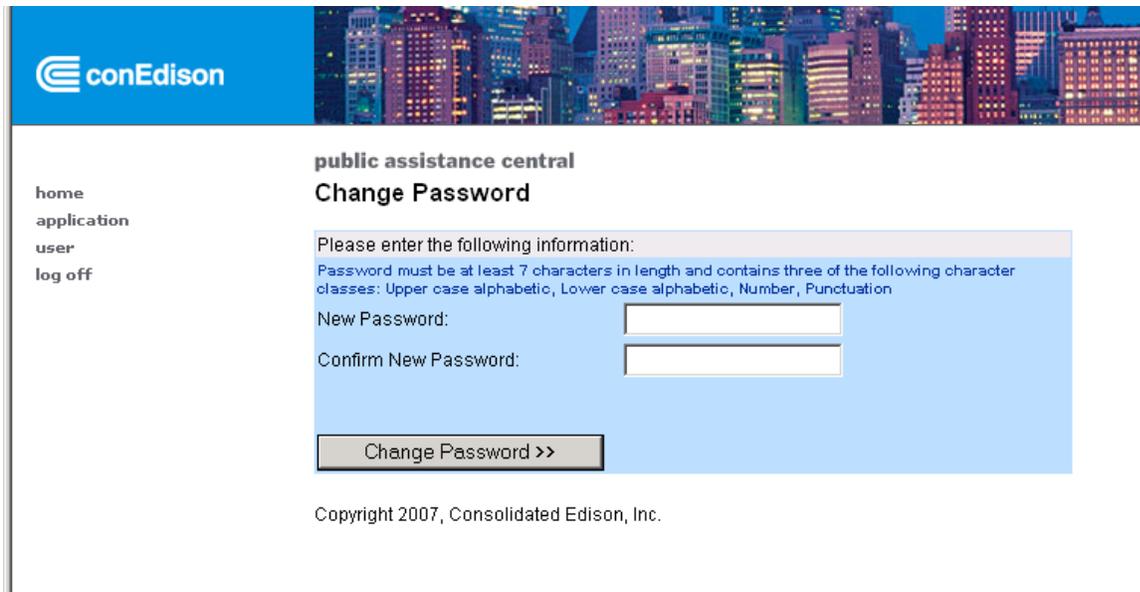


You will arrive at the **LOGIN** screen. To login to the Public Assistance Central system, enter your Employee/ID number (H0000) and your temporary password. Then press continue.

A screenshot of the Public Assistance Central login screen. The top banner features the Con Edison logo on the left and a city skyline at night on the right. Below the banner, the text "public assistance central" is displayed in a bold, sans-serif font, followed by "Login" in a slightly smaller font. A light blue rectangular box contains the login instructions: "Please enter your employee or ID number and password:". Below this, there are two input fields: "Employee/ID Number:" and "Password:". At the bottom of the box is a "Continue >>" button.

## **LOGIN: CREATING YOUR PERMANENT PASSWORD**

You will arrive at this screen:



The screenshot shows a web application interface. At the top left is the 'conEdison' logo. Below it is a navigation menu with links: 'home', 'application', 'user', and 'log off'. The main content area is titled 'public assistance central' and 'Change Password'. It contains a text box with instructions: 'Please enter the following information: Password must be at least 7 characters in length and contains three of the following character classes: Upper case alphabetic, Lower case alphabetic, Number, Punctuation'. Below this are two input fields: 'New Password:' and 'Confirm New Password:'. At the bottom of the form is a button labeled 'Change Password >>'. The footer of the page reads 'Copyright 2007, Consolidated Edison, Inc.'

**You must create your permanent password.**

Your password must be 7 characters in length and contain three of the following character classes:

- 1) **Upper case alphabetic**
- 2) **Lower case alphabetic**
- 3) **Number**
- 4) **Punctuation**

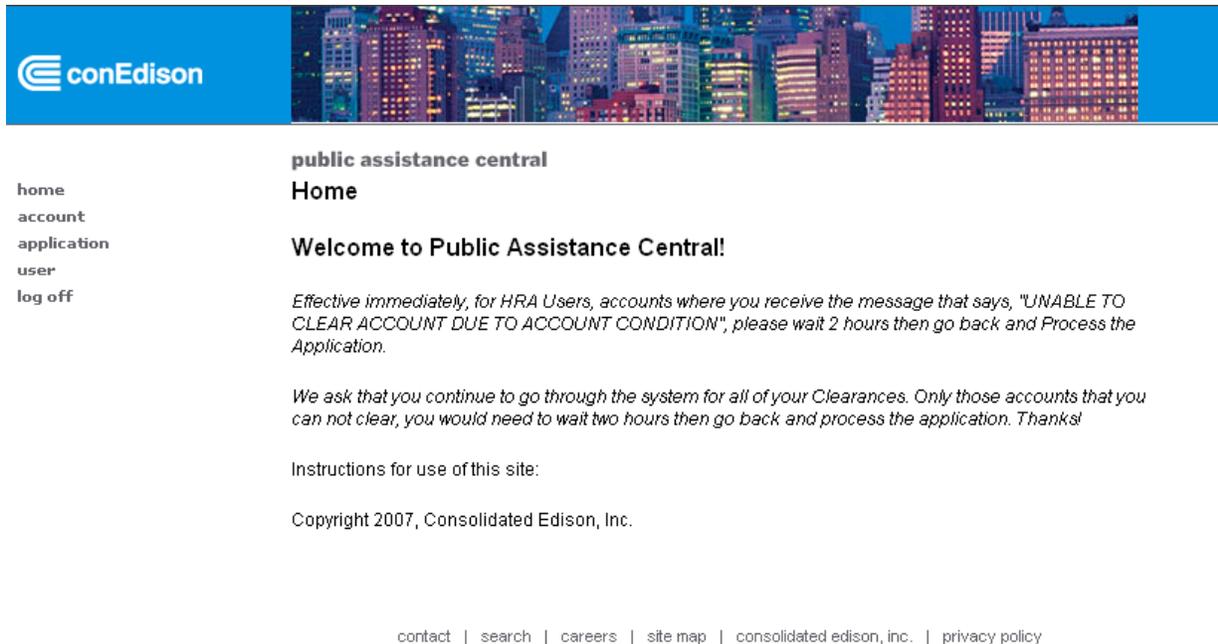
**Example: (Coned#01)**

**Please write down your new password. This is your permanent password.**

## Attachment A

# **LOGIN: CREATING YOUR PERMANENT PASSWORD**

You will arrive at the **HOME** page of the Public Assistance Central system.



**conEdison**

home  
account  
application  
user  
log off

**public assistance central**  
**Home**

**Welcome to Public Assistance Central!**

*Effective immediately, for HRA Users, accounts where you receive the message that says, "UNABLE TO CLEAR ACCOUNT DUE TO ACCOUNT CONDITION", please wait 2 hours then go back and Process the Application.*

*We ask that you continue to go through the system for all of your Clearances. Only those accounts that you can not clear, you would need to wait two hours then go back and process the application. Thanks!*

Instructions for use of this site:

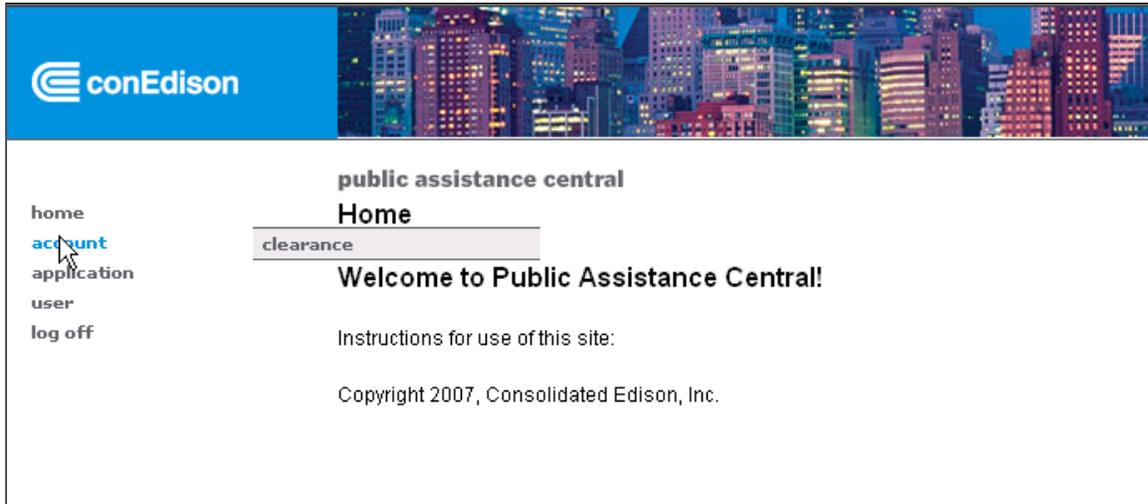
Copyright 2007, Consolidated Edison, Inc.

[contact](#) | [search](#) | [careers](#) | [site map](#) | [consolidated edison, inc.](#) | [privacy policy](#)

**Now you're ready to start using the system**

## PROCESSING A CLEARANCE

To start to process a clearance, move the cursor over the word **ACCOUNT**. A menu will appear that shows clearance. Click on the word **CLEARANCE**.



You will arrive at the following screen:



Enter the customer's Con Edison account number and press continue

## PROCESSING A CLEARANCE

You will arrive at the **Clear Account** screen.

conEdison

home  
account  
application  
user  
log off

public assistance central  
**Clear Account**

Please fill in the following information:

Account Number:

Customer Name on Con Edison Account:

Welfare Center Contact:

Welfare Center Number:

**Total Clearance Amount:** 298.30

JV53S Amount: 0.00

Type of Application:

Name Change:

Do you need more time to pay your bill and would like to arrange a payment extension:

A/R Balance: 329.30

From Date (mm/dd/yyyy): 04/25/2008

To Date (mm/dd/yyyy): 07/28/2008

\*\*\*Your client has made the following payments:  
\$272 on 6/5/2008, \$0.54 on 6/5/2008.

\*\*\*The current disconnect notice on this account was issued on 07/28/2008. The original disconnect notice expires on 08/13/2008.

Submit Account Clearance >>

You will need to type or select the following information:

- **Your Welfare Center Number (example 41. not 041)**
- **Select the type of application**
- **Select Yes or No if there is a name change**
- **Select if yes or no if you need an extension**

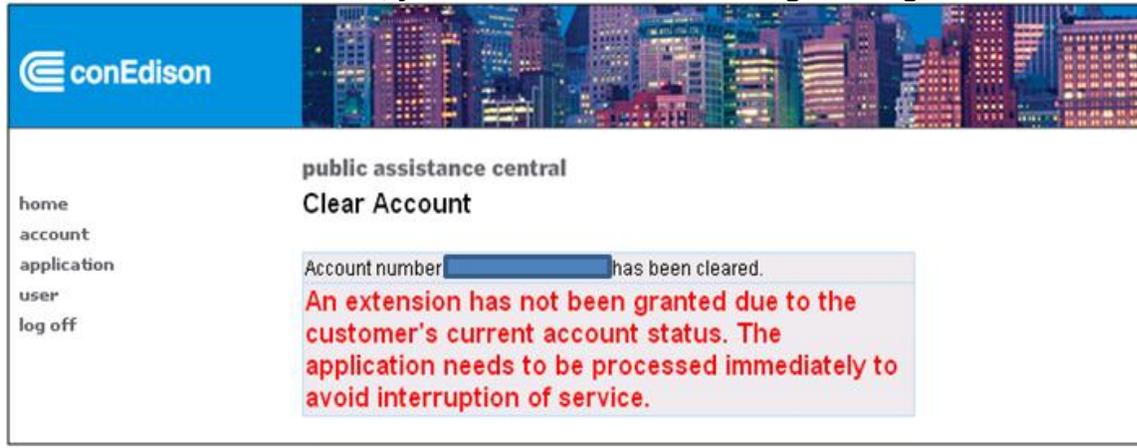
Then press, **Submit Account Clearance**

## PROCESSING A CLEARANCE

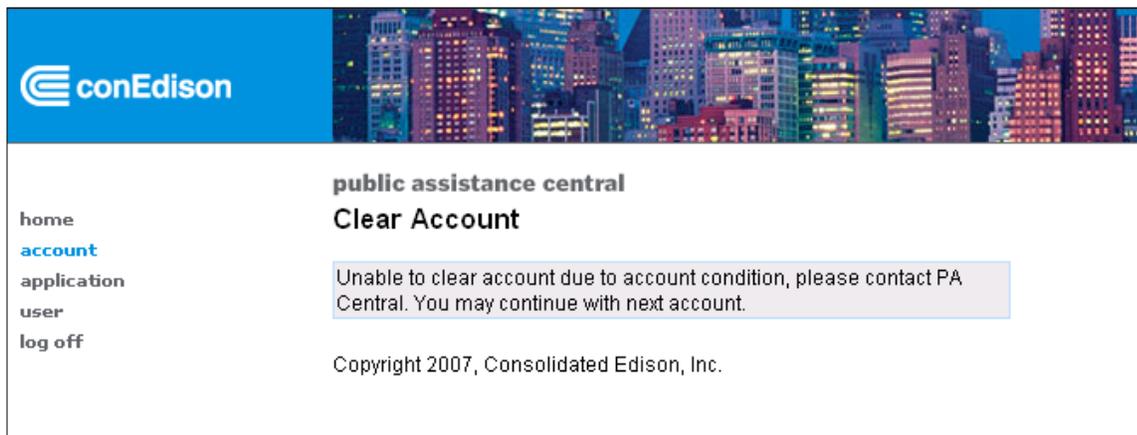
You will receive the following screen once the account is cleared.



In some account situations, you will receive the following message:



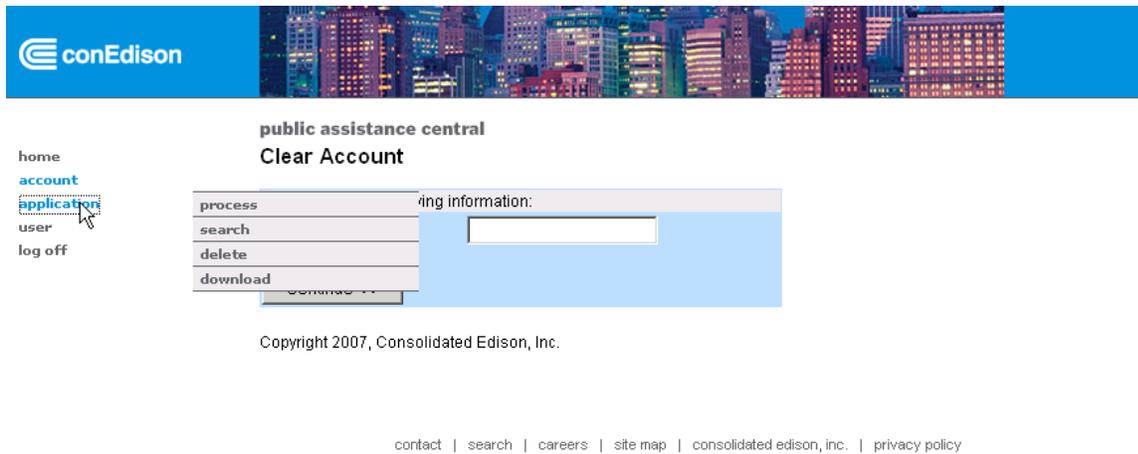
If you receive the following message, do not call. Wait 2 hours, and then process your 858. **DO NOT CLEAR THE ACCOUNT AGAIN:**



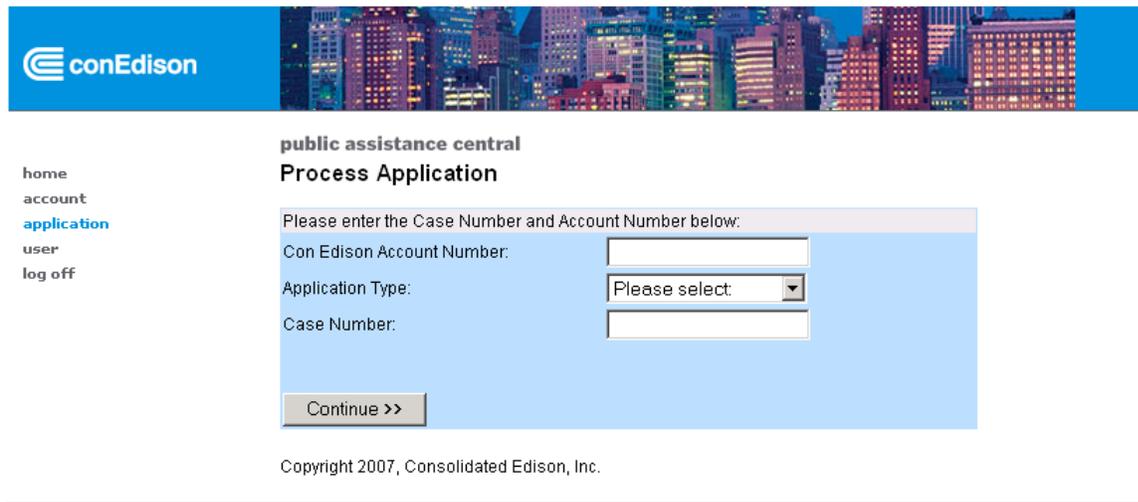
## Attachment A

# PROCESSING AN APPLICATION

To start to process an application, move the cursor over the word **APPLICATION**.  
A menu will appear that shows process, search and delete. Click on the word **PROCESS**.



You will arrive at the following screen.



## PROCESSING A ONE SHOT APPLICATION

You will arrive at the **Process Application Screen**.

home  
account  
**application**  
user  
log off

public assistance central  
**Process Application**

Please enter the Case Number and Account Number below:

Con Edison Account Number:

Application Type:

Case Number:

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### To process a One-Shot Application:

- 1) Type in the customer's 15 digit account number
- 2) Click on the drop down menu and select the appropriate Application Type **One-Shot**
- 3) Enter the customer case number (**Just the 7 digit number. Do not enter any letters**)

# PROCESSING A ONE SHOT APPLICATION

You will arrive at the following screen:

Please fill in the following information:

Customer Name on Con Edison Account: \_\_\_\_\_

Does the customer name match the application? Yes  No

Note: UGC/DVC clearance received on 02/28/2008 for arrearage payment of \$ 391.68 for the period 07/23/2007 to 02/26/2008  
If payment is different please call for a new clearance amount.

Form M-858v (page 1)  
Rev. 8/23/07



**The CITY of NEW YORK**  
Human Resources Administration  
Family Independence Administration

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Con Edison PA Central  
4 Irving Place, 9 FLNE  
New York, New York 10003

Date: 3/4/2008

Case Name: \_\_\_\_\_

Address: \_\_\_\_\_

Case Number/Category: \_\_\_\_\_

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

Utility Account Number: \_\_\_\_\_

### Notification to Utility Company

This is to inform you that this Administration will take the following action(s) for the above named individual.

**For emergency assistance cases NOT being accepted for on-going assistance:**

1. Make an arrearage payment of \$ 391.68 for the period 07/23/2007 to 02/26/2008.

Because this individual is NOT in receipt of on-going public assistance or Supplemental Security Income (SSI), your company should proceed with its normal collection efforts for all future bills.

**For ongoing public assistance and SSI cases: [  SSI ]**

2. Make an arrearage payment of \$ \_\_\_\_\_ for the period \_\_\_\_\_ to \_\_\_\_\_.

**AND/OR**

**VENDOR CASE**

2a. Effective \_\_\_\_\_, future utility bills will be paid by this Administration directly to the utility company. Please send all future bills to this agency for payment after the effective date indicated above. Any bills submitted prior to this date may be rejected. All outstanding monies owed to your company by the above-named participant shall be exempt from collection for as long as such participant continues to receive or would become in need of public assistance or Supplemental Security Income if the collection were made. Should restriction not take effect for technical or other reasons, we guarantee payment of all future utility bills for a period of six months from the effective date.

**GUARANTEE CASE**

2b. Guarantee payment of all future utility bills for a period of six months effective from \_\_\_\_\_ or until the participant's case is dosed, whichever comes first. All outstanding monies owed to your company by this individual shall be exempt from collection as long as such individual continues to receive or would become in need of public assistance or Supplemental Security Income if the collection were made. Your company should proceed with its normal collection efforts for future bills and provide our Administration with written notification should the above-named person fail to make payment and your company issues a notice of non-payment. Such notification should be made to this Administration at the same time the participant is issued a notice of non-payment.

Application prepared online by: \_\_\_\_\_ (ID # \_\_\_\_\_)

Process Application >> Print Form

If the customer's name matches the application, click yes. Confirm the amount and click PROCESS APPLICATION.

# PROCESSING A ONE SHOT APPLICATION

You will receive this screen indicating the application has been successfully processed.

Application has been successfully processed.

Print Form

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Form M-858v (page 1)  
Rev. 8/23/07



**The CITY of NEW YORK**  
Human Resources Administration  
Family Independence Administration

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Con Edison PA Central  
4 Irving Place, 9 FLNE  
New York, New York 10003

Date: 3/4/2008

Case Name: \_\_\_\_\_

Address: \_\_\_\_\_

Case Number/Category: \_\_\_\_\_

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

Utility Account Number: \_\_\_\_\_

### Notification to Utility Company

This is to inform you that this Administration will take the following action(s) for the above named individual.

**For emergency assistance cases NOT being accepted for on-going assistance:**

1. Make an arrearage payment of \$ 391.68 for the period 07/23/2007 to 02/26/2008.

Because this individual is NOT in receipt of on-going public assistance or Supplemental Security Income (SSI), your company should proceed with its normal collection efforts for all future bills.

**For ongoing public assistance and SSI cases: [  SSI ]**

2. Make an arrearage payment of \$ \_\_\_\_\_ for the period \_\_\_\_\_ to \_\_\_\_\_.

AND/OR

**VENDOR CASE**

2a. Effective \_\_\_\_\_, future utility bills will be paid by this Administration directly to the utility company. Please send all future bills to this agency for payment after the effective date indicated above. Any bills submitted prior to this date may be rejected. All outstanding monies owed to your company by the above-named participant shall be exempt from collection for as long as such participant continues to receive or would become in need of public assistance or Supplemental Security Income if the collection were made. Should restriction not take effect for technical or other reasons, we guarantee payment of all future utility bills for a period of six months from the effective date.

**GUARANTEE CASE**

2b. Guarantee payment of all future utility bills for a period of six months effective from \_\_\_\_\_ or until the participant's case is dosed, whichever comes first. All outstanding monies owed to your company by this individual shall be exempt from collection as long as such individual continues to receive or would become in need of public assistance or Supplemental Security Income if the collection were made. Your company should proceed with its normal collection efforts for future bills and provide our Administration with written notification should the above-named person fail to make payment and your company issues a notice of non-payment. Such notification should be made to this Administration at the same time the participant is issued a notice of non-payment.

Application prepared online by: \_\_\_\_\_ ( ID # \_\_\_\_\_ )

Process Application >> Print Form

Once you've processed the application, you can then process the next application.

## PROCESSING A PENDING APPROVAL APPLICATION

Click on application, then process to get to this screen:

home  
account  
**application**  
user  
log off

public assistance central  
**Process Application**

Please enter the Case Number and Account Number below:

Con Edison Account Number:

Application Type:

Case Number:

Continue >>

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### To process an On-Going Application:

- 1) Type in the customer's 15 digit account number
- 2) Click on the drop down menu and select the appropriate Application Type **ON-GOING**
- 3) Enter the customer case number (**Just the 7 digit number. Do not enter any letters**)

# PROCESSING A PENDING APPROVAL APPLICATION

You will arrive at the following screen:

**public assistance central**  
**Process Application**

home  
 application  
 user  
 log off

Please fill in the following information:

Customer Name on Con Edison Account: \_\_\_\_\_  
 Does the customer name match the application? Yes  No

Note: UGC/DVC clearance received on 03/03/2008 for arrearage payment of \$ 159.87 for the period 12/07/2007 to 02/08/2008  
 If payment is different please call for a new clearance amount.

Form M-858v (page 1)  
 Rev. 8/23/07

**The CITY of NEW YORK**  
 Human Resources Administration  
 Family Independence Administration

Date: 3/4/2008  
 Case Name: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 Case Number/Category: \_\_\_\_\_  
 Center: \_\_\_\_\_  
 Utility Account Number: \_\_\_\_\_

Con Edison PA Central  
 4 Irving Place, 9 FLNE  
 New York, New York 10003

**Notification to Utility Company**

This is to inform you that this Administration will take the following action(s) for the above named individual.

**For emergency assistance cases NOT being accepted for on-going assistance:**

1. Make an arrearage payment of \$ \_\_\_\_\_ for the period \_\_\_\_\_ to \_\_\_\_\_.

Because this individual is NOT in receipt of on-going public assistance or Supplemental Security Income (SSI), your company should proceed with its normal collection efforts for all future bills.

**For ongoing public assistance and SSI cases: [  SSI ]**

2. Make an arrearage payment of \$ 159.87 for the period 12/07/2007 to 02/08/2008.

**AND/OR**

**VENDOR CASE**

2a. Effective \_\_\_\_\_, future utility bills will be paid by this Administration directly to the utility company. Please send all future bills to this agency for payment after the effective date indicated above. Any bills submitted prior to this date may be rejected. All outstanding monies owed to your company by the above-named participant shall be exempt from collection for as long as such participant continues to receive or would become in need of public assistance or Supplemental Security Income if the collection were made. Should restriction not take effect for technical or other reasons, we guarantee payment of all future utility bills for a period of six months from the effective date.

**GUARANTEE CASE**

2b. Guarantee payment of all future utility bills for a period of six months effective from \_\_\_\_\_ or until the participant's case is closed, whichever comes first. All outstanding monies owed to your company by this individual shall be exempt from collection as long as such individual continues to receive or would become in need of public assistance or Supplemental Security Income if the collection were made. Your company should proceed with its normal collection efforts for future bills and provide our Administration with written notification should the above-named person fail to make payment and your company issues a notice of non-payment. Such notification should be made to this Administration at the same time the participant is issued a notice of non-payment.

Application prepared online by: \_\_\_\_\_ ( ID # \_\_\_\_\_ )

Process Application >>      Print Form

If the customer's name matches the application, click yes. Confirm the amount and click **PROCESS APPLICATION**.

# PROCESSING A PENDING APPROVAL APPLICATION

You will receive this screen indicating the application has been successfully processed.

Application has been successfully processed.

Print Form

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application user log off

Form M-858v (page 1)  
Rev. 8/23/07

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Con Edison PA Central  
4 Irving Place, 9 FLNE  
New York, New York 10003**



**The CITY of NEW YORK**  
Human Resources Administration  
Family Independence Administration

Date: 3/7/2008

Case Name: \_\_\_\_\_

Address: \_\_\_\_\_

Case Number /Category: \_\_\_\_\_

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

Utility Account Number: \_\_\_\_\_

**Notification to Utility Company**

This is to inform you that this Administration will take the following action(s) for the above named individual.

**For emergency assistance cases NOT being accepted for on-going assistance:**

1. Make an arrearage payment of \$ \_\_\_\_\_ for the period \_\_\_\_\_ to \_\_\_\_\_.

Because this individual is NOT in receipt of on-going public assistance or Supplemental Security Income (SSI), your company should proceed with its normal collection efforts for all future bills.

**For ongoing public assistance and SSI cases: [  SSI ]**

2. Make an arrearage payment of \$ 159.87 for the period 12/7/2007 to 2/8/2008.

**AND/OR**

**VENDOR CASE**

2a. Effective \_\_\_\_\_, future utility bills will be paid by this Administration directly to the utility company. Please send all future bills to this agency for payment after the effective date indicated above. Any bills submitted prior to this date may be rejected. All outstanding monies owed to your company by the above-named participant shall be exempt from collection as long as such participant continues to receive or would become in need of public assistance or Supplemental Security Income if the collection were made. Should restriction not take effect for technical or other reasons, we guarantee payment of all future utility bills for a period of six months from the effective date.

**GUARANTEE CASE**

2b. Guarantee payment of all future utility bills for a period of six months effective from \_\_\_\_\_ or until the participant's case is closed, whichever comes first. All outstanding monies owed to your company by this individual shall be exempt from collection as long as such individual continues to receive or would become in need of public assistance or Supplemental Security Income if the collection were made. Your company should proceed with its normal collection efforts for future bills and provide our Administration with written notification should the above-named person fail to make payment and your company issues a notice of non-payment. Such notification should be made to this Administration at the same time the participant is issued a notice of non-payment.

Application prepared online by: \_\_\_\_\_ (ID # \_\_\_\_\_)

Print Form

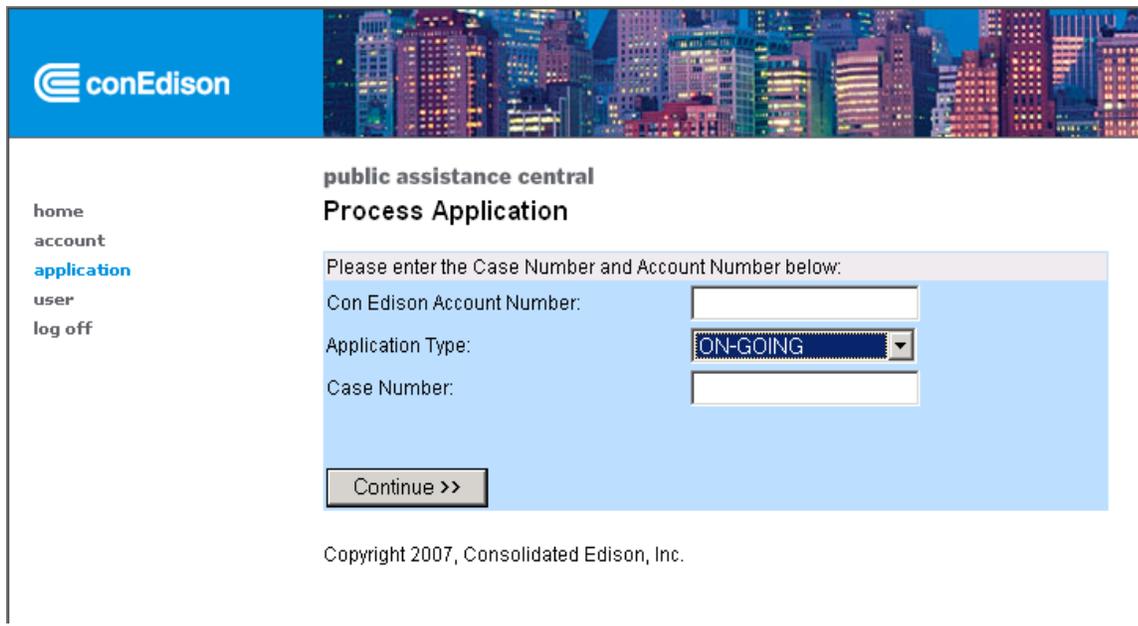
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Once you've processed the application, you can then process the next application

## PROCESSING A UTILITY GUARANTEE APPLICATION

Click on application, and then select process to get to this screen:



conEdison

public assistance central  
**Process Application**

home  
account  
**application**  
user  
log off

Please enter the Case Number and Account Number below:

Con Edison Account Number:

Application Type: **ON-GOING** ▼

Case Number:

Continue >>

Copyright 2007, Consolidated Edison, Inc.

### To process a Utility Guarantee Application:

- 1) Type in the customer's 15 digit account number
- 2) Click on the drop down menu and select the appropriate Application Type **ON-GOING**
- 3) Enter the customer case number (**Just the 7 digit number. Do not enter any letters**)

# PROCESSING A UTILITY GUARANTEE APPLICATION

You will arrive at the following screen:

public assistance central  
Process Application

home  
application  
user  
log off

Please fill in the following information:

Customer Name on Con Edison Account: [Redacted]  
Does the customer name match the application? Yes  No

Note: UGC/DVC clearance received on 03/04/2008 for arrearage payment of \$ 645.99 for the period 10/02/2007 to 02/04/2008  
If payment is different please call for a new clearance amount.

Form M-858v (page 1)  
Rev. 8/23/07

The CITY of NEW YORK  
Human Resources Administration  
Family Independence Administration

Date: 3/4/2008  
Case Name: [Redacted]  
Address: [Redacted]  
Case Number/Category: [Redacted]  
Center: [Redacted]  
Utility Account Number: [Redacted]

Con Edison PA Central  
4 Irving Place, 9 FLNE  
New York, New York 10003

### Notification to Utility Company

This is to inform you that this Administration will take the following action(s) for the above named individual.

**For emergency assistance cases NOT being accepted for on-going assistance:**

1. Make an arrearage payment of \$ \_\_\_\_\_ for the period \_\_\_\_\_ to \_\_\_\_\_  
Because this individual is NOT in receipt of on-going public assistance or Supplemental Security Income (SSI), your company should proceed with its normal collection efforts for all future bills.

**For ongoing public assistance and SSI cases: [  SSI ]**

2. Make an arrearage payment of \$ 645.99 for the period 10/02/2007 to 02/04/2008

AND/OR

**VENDOR CASE**

2a. Effective \_\_\_\_\_, future utility bills will be paid by this Administration directly to the utility company.  
Please send all future bills to this agency for payment after the effective date indicated above. Any bills submitted prior to this date may be rejected. All outstanding monies owed to your company by the above-named participant shall be exempt from collection for as long as such participant continues to receive or would become in need of public assistance or Supplemental Security Income if the collection were made. Should restriction not take effect for technical or other reasons, we guarantee payment of all future utility bills for a period of six months from the effective date.

**GUARANTEE CASE**

2b. Guarantee payment of all future utility bills for a period of six months effective from 02/04/2008 or until the participant's case is dosed, whichever comes first. All outstanding monies owed to your company by this individual shall be exempt from collection as long as such individual continues to receive or would become in need of public assistance or Supplemental Security Income if the collection were made. Your company should proceed with its normal collection efforts for future bills and provide our Administration with written notification should the above-named person fail to make payment and your company issues a notice of non-payment. Such notification should be made to this Administration at the same time the participant is issued a notice of non-payment.

Application prepared online by: [Redacted] (ID # [Redacted])

Process Application >>> Print Form

If the customer's name matches the application:

- 1) Click yes
- 2) Confirm the amount
- 3) Then select the box for Guarantee Case
- 4) Click PROCESS APPLICATION.

# PROCESSING A UTILITY GUARANTEE APPLICATION

You will receive this screen indicating the application has been successfully processed.

Application has been successfully processed.

Print Form

---

user  
log off

Form M-858v (page 1)  
Rev. 8/23/07



**The CITY of NEW YORK**  
Human Resources Administration  
Family Independence Administration

Date: 3/7/2008

Case Name: [REDACTED]

Address: [REDACTED]

Case Number/Category: [REDACTED]

Center: [REDACTED]

Utility Account Number: [REDACTED]

Con Edison PA Central  
4 Irving Place, 9 FLNE  
New York, New York 10003

### Notification to Utility Company

This is to inform you that this Administration will take the following action(s) for the above named individual.

**For emergency assistance cases NOT being accepted for on-going assistance:**

1. Make an arrearage payment of \$ \_\_\_\_\_ for the period \_\_\_\_\_ to \_\_\_\_\_.

Because this individual is NOT in receipt of on-going public assistance or Supplemental Security Income (SSI), your company should proceed with its normal collection efforts for all future bills.

**For ongoing public assistance and SSI cases:**  SSI

2. Make an arrearage payment of \$ 645.99 for the period 10/02/2007 to 02/04/2008.

AND/OR

**VENDOR CASE**

2a. Effective \_\_\_\_\_, future utility bills will be paid by this Administration directly to the utility company. Please send all future bills to this agency for payment after the effective date indicated above. Any bills submitted prior to this date may be rejected. All outstanding monies owed to your company by the above-named participant shall be exempt from collection for as long as such participant continues to receive or would become in need of public assistance or Supplemental Security Income if the collection were made. Should restriction not take effect for technical or other reasons, we guarantee payment of all future utility bills for a period of six months from the effective date.

**GUARANTEE CASE**

2b. Guarantee payment of all future utility bills for a period of six months effective from 02/04/2008 or until the participant's case is closed, whichever comes first. All outstanding monies owed to your company by this individual shall be exempt from collection as long as such individual continues to receive or would become in need of public assistance or Supplemental Security Income if the collection were made. Your company should proceed with its normal collection efforts for future bills and provide our Administration with written notification should the above-named person fail to make payment and your company issues a notice of non-payment. Such notification should be made to this Administration at the same time the participant is issued a notice of non-payment.

Application prepared online by: [REDACTED] (ID # [REDACTED])

Process Application >> Print Form

Once you've processed the application, you can then process the next application

## PROCESSING A DIRECT VENDOR APPLICATION

Click on application, then process to get to this screen:

conEdison

public assistance central  
**Process Application**

home  
account  
**application**  
user  
log off

Please enter the Case Number and Account Number below:

Con Edison Account Number:

Application Type:

Case Number:

Continue >>

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### To process a Direct Vendor Application:

- 1) Type in the customer's 15 digit account number
- 2) Click on the drop down menu and select the appropriate Application Type **ON-GOING**
- 3) Enter the customer case number (**Just the 7 digit number. Do not enter any letters**)

# PROCESSING A DIRECT VENDOR APPLICATION

You will arrive at the following screen:

home  
application  
user  
log off

public assistance central  
**Process Application**

Please fill in the following information:

Customer Name on Con Edison Account: [Redacted]

Does the customer name match the application? Yes  No

Note: UGC/DVC clearance received on 02/29/2008 for arrearage payment of \$ 147.45 for the period 11/16/2007 to 02/25/2008  
If payment is different please call for a new clearance amount.

Form M-858v (page 1)  
Rev. 8/23/07

**The CITY of NEW YORK**  
Human Resources Administration  
Family Independence Administration

Date: 3/4/2008

Case Name: [Redacted]

Address: [Redacted]

Case Number/Category: [Redacted]

Center: [Redacted]

Utility Account Number: [Redacted]

Con Edison PA Central  
4 Irving Place, 9 FLNE  
New York, New York 10003

**Notification to Utility Company**

This is to inform you that this Administration will take the following action(s) for the above named individual.

**For emergency assistance cases NOT being accepted for on-going assistance:**

1. Make an arrearage payment of \$ \_\_\_\_\_ for the period \_\_\_\_\_ to \_\_\_\_\_

Because this individual is NOT in receipt of on-going public assistance or Supplemental Security Income (SSI), your company should proceed with its normal collection efforts for all future bills.

**For ongoing public assistance and SSI cases: [  SSI ]**

2. Make an arrearage payment of \$ 147.45 for the period 11/16/2007 to 02/25/2008

**AND/OR**

**VENDOR CASE**

2a. Effective 02/25/2008, future utility bills will be paid by this Administration directly to the utility company.  
Please send all future bills to this agency for payment after the effective date indicated above. Any bills submitted prior to this date may be rejected. All outstanding monies owed to your company by the above-named participant shall be exempt from collection for as long as such participant continues to receive or would become in need of public assistance or Supplemental Security Income if the collection were made. Should restriction not take effect for technical or other reasons, we guarantee payment of all future utility bills for a period of six months from the effective date.

**GUARANTEE CASE**

2b. Guarantee payment of all future utility bills for a period of six months effective from \_\_\_\_\_ or until the participant's case is closed, whichever comes first. All outstanding monies owed to your company by this individual shall be exempt from collection as long as such individual continues to receive or would become in need of public assistance or Supplemental Security Income if the collection were made. Your company should proceed with its normal collection efforts for future bills and provide our Administration with written notification should the above-named person fail to make payment and your company issues a notice of non-payment. Such notification should be made to this Administration at the same time the participant is issued a notice of non-payment.

Application prepared online by: [Redacted] (ID # [Redacted])

Process Application >> Print Form

If the customer's name matches the application:

- 5) Click yes
- 6) Confirm the amount
- 7) Then select the box for Vendor Case
- 8) Click PROCESS APPLICATION.

# PROCESSING A DIRECT VENDOR APPLICATION

You will receive this screen indicating the application has been successfully processed.

Application has been successfully processed.

Print Form

---

user  
log off

Form M-858v (page 1)  
Rev. 8/23/07

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Con Edison PA Central  
4 Irving Place, 9 FLNE  
New York, New York 10003**



**The CITY of NEW YORK**  
Human Resources Administration  
Family Independence Administration

Date: 3/7/2008

Case Name: \_\_\_\_\_

Address: \_\_\_\_\_

Case Number/Category: \_\_\_\_\_

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

Utility Account Number: \_\_\_\_\_

### Notification to Utility Company

This is to inform you that this Administration will take the following action(s) for the above named individual.

**For emergency assistance cases NOT being accepted for on-going assistance:**

1. Make an arrearage payment of \$ \_\_\_\_\_ for the period \_\_\_\_\_ to \_\_\_\_\_.

Because this individual is NOT in receipt of on-going public assistance or Supplemental Security Income (SSI), your company should proceed with its normal collection efforts for all future bills.

**For ongoing public assistance and SSI cases: [  SSI ]**

2. Make an arrearage payment of \$ 147.45 for the period 11/16/2007 to 2/25/2008.

**AND/OR**

**VENDOR CASE**

2a. Effective 2/25/2008, future utility bills will be paid by this Administration directly to the utility company. Please send all future bills to this agency for payment after the effective date indicated above. Any bills submitted prior to this date may be rejected. All outstanding monies owed to your company by the above-named participant shall be exempt from collection for as long as such participant continues to receive or would become in need of public assistance or Supplemental Security Income if the collection were made. Should restriction not take effect for technical or other reasons, we guarantee payment of all future utility bills for a period of six months from the effective date.

**GUARANTEE CASE**

2b. Guarantee payment of all future utility bills for a period of six months effective from \_\_\_\_\_ or until the participant's case is closed, whichever comes first. All outstanding monies owed to your company by this individual shall be exempt from collection as long as such individual continues to receive or would become in need of public assistance or Supplemental Security Income if the collection were made. Your company should proceed with its normal collection efforts for future bills and provide our Administration with written notification should the above-named person fail to make payment and your company issues a notice of non-payment. Such notification should be made to this Administration at the same time the participant is issued a notice of non-payment.

Application prepared online by: \_\_\_\_\_ (ID # \_\_\_\_\_)

Print Form

Once you've processed the application, you can then process the next application

## APPLICATION TYPE DOESN'T MATCH CLEARANCE

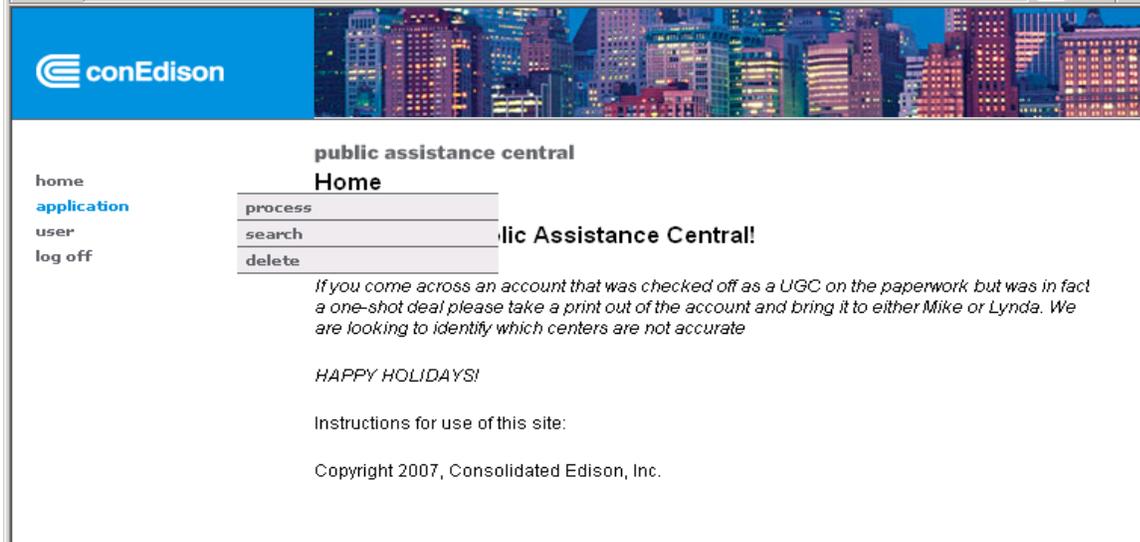
If the original clearance and the application you're processing do not match, you will receive the following screen:



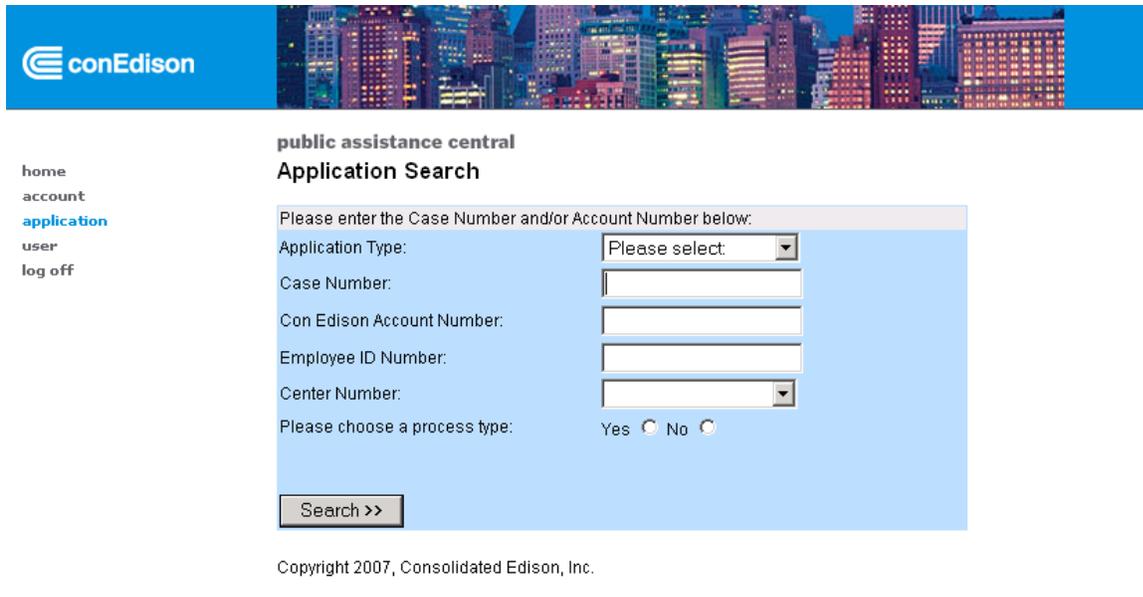
Click YES if you wish to override. If you click **NO**, you will be returned to the HOME page to start over.

## SEARCH FOR APPLICATION

To search for an application, move the cursor over the word **APPLICATION**. A menu will appear that shows process, search and delete. Click on the word **SEARCH**.



You will arrive at the **Application Search Screen**.



You can search for an application in several ways. You can search by **Case Number (No letters)**, **Con Edison Account Number**, **Employee ID Number** or **Center Number**. You can also search by date range and either **Applications** or **Payments** made by selecting "Please choose a process type". In all cases, you will also need the **Application Type** to do your search.

## DELETE AN APPLICATION

To delete for an application, move the cursor over the word **APPLICATION**. A menu will appear that shows process, search and delete. Click on the word **DELETE**.

home  
application  
user  
log off

public assistance central  
Application Search

process  
search  
delete

Number and/or Account Number below:

Case Number:

Con Edison Account Number:

Con Edison Employee Number:

Please choose the process type and date : Yes  No

One-Shot

Search >>

You will arrive at the **Delete Application Screen**.

home  
account  
application  
user  
log off

public assistance central  
Delete Application

Please enter the Case Number below:

Application Type: Please select:

Case Number:

Continue >>

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### To delete an application

- 1) Select the appropriate **Application Type** from the drop down menu
- 2) Enter the **Case Number (7 digits no letters)**
- 3) Click Continue

**Note: Applications that needs to be deleted must be done the same day and by the employee who input the application.**

# DELETE AN APPLICATION

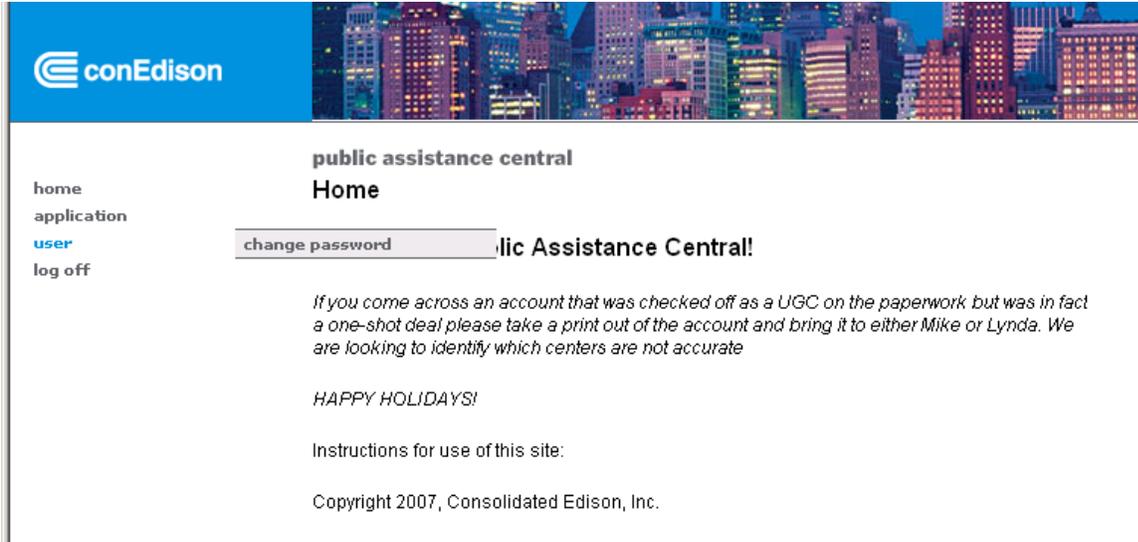
You will arrive at the following screen:



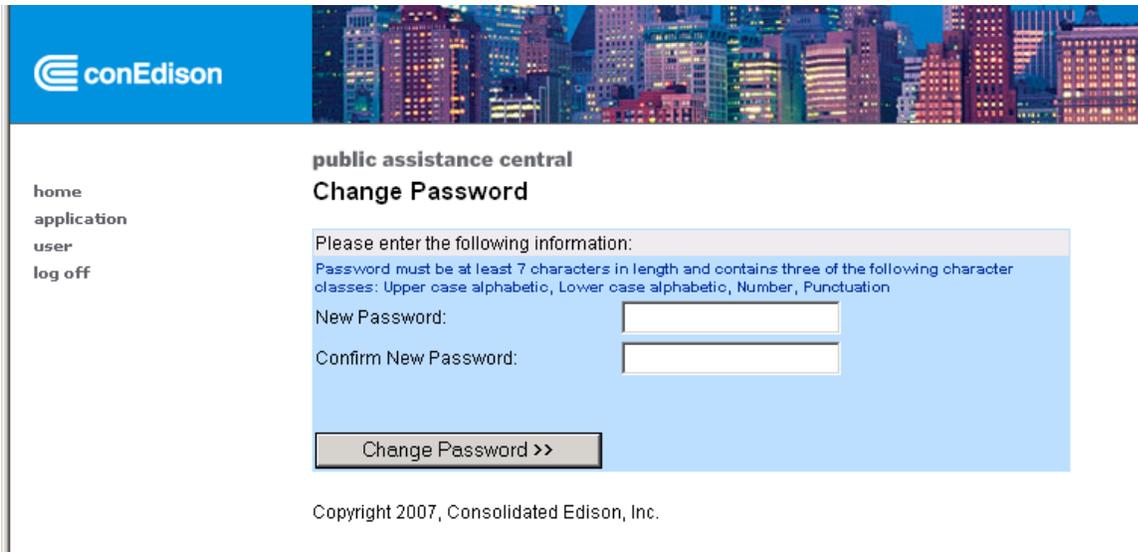
Click on **DELETE APPLICATION** to delete the application

# CHANGE YOUR PASSWORD

To change your User Password, move the cursor over the word **USER**. A menu will appear that shows change password. Click on **CHANGE PASSWORD**.



You will arrive at the **Change Password Screen**.



Your password must be 7 characters in length and contain three of the following character classes: **Upper case alphabetic, Lower case alphabetic, Number Punctuation**  
**Example: (Coned#01)**

## Password Restrictions

Passwords can not be changed more than one time in a 7 day period.

## Login Restrictions

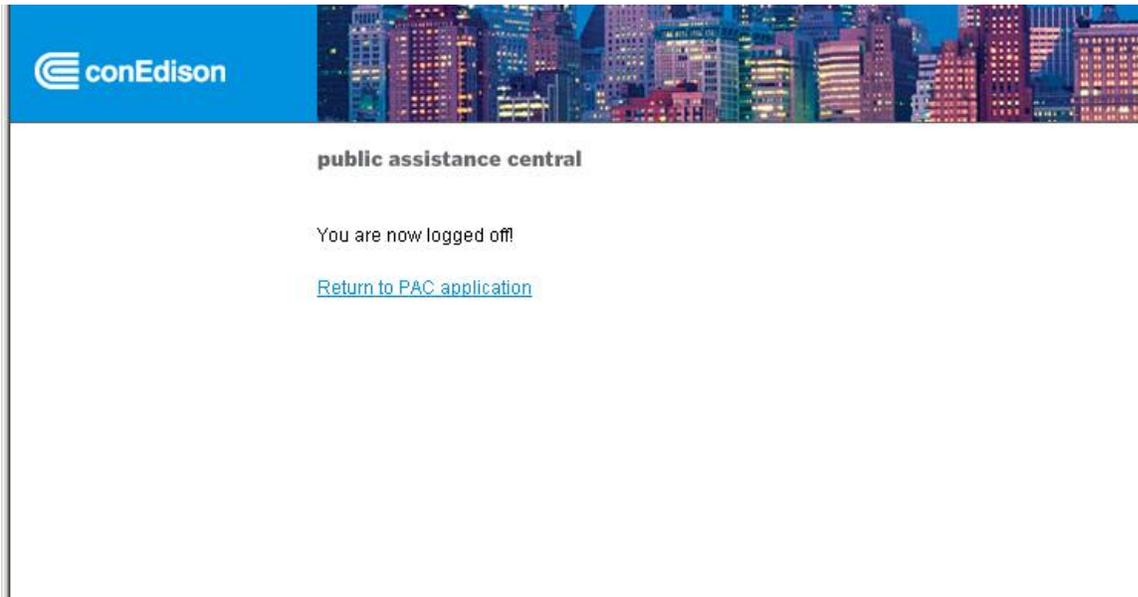
If there is no input activity for 15 minutes, the system will automatically log you off.

## Attachment A

# LOG OFF

To log off, click on the **LOG OFF** selection.

You will arrive at the following screen:



# IF YOU NEED CLEARANCE INFORMATION

Please call the Con Edison general number at (212) 780-6565 for clearance information.