

FAMILY INDEPENDENCE ADMINISTRATION

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POLICY DIRECTIVE #07-25-OPE

(This Policy Directive Replaces PD #05-32-OPE)

CHECK REPLACEMENT FOR RESTRICTED SHELTER PAYMENTS

Date: August 17, 2007	Subtopic(s): Check Replacements
August 17, 2007	
AUDIENCE	The instructions in this policy directive are for Job Center staff, Division of Check Reconciliation and Investigation (DCRI) staff, Office of Central Processing (OCP) staff and Landlord Ombudsman Services Unit (LOSU) staff. They are informational for all other staff.
REVISIONS TO PREVIOUS DIRECTIVE	 This policy directive has been revised to: inform Job Opportunity Specialists (JOS)/Workers to update the Paperless Office System (POS) Turn-Around Document (TAD) (LDSS-3517) with a new budget number after creating a new budget remove reference to participants informing the Bureau of Reconciliation and Control (BORAC) of a change in landlord/management agent provide the correct address of the Landlord Ombudsman Services Unit (LOSU) announce that the LOSU transmittals reflect LOSU's current floor provide instructions on processing case actions when the participant does not promptly notify the Agency of a change in address or shelter cost, resulting in duplicate rent payments to both the prior and new landlord/management agents indicate questions in the POS windows that must be addressed if a participant has rent arrears replace references to the Check Reconciliation and Tracking System (CRTS) screen with the Benefits Issued with Issuance Codes 08, 11, 05, 96 screen (NQCS5E) specify the types of checks that BORAC replaces inform JOS/Workers of the electronic Stop Payment System for making and approving requests to stop payment on a rent check
	remove reference to the Division of Automated Check Inventory

and Tracking (DACIT) confirmation memo

- remove reference to paper process for processing stop payments in the "Check Issued or Cancelled/Two-Party Check Replacement Process" section
- include the payment status code indicating a check was cashed
- rename the "Direct Vendor Process" section under Check Cashed to "Direct Vendor Process for Fraud/Forgery Processing"
- correct JOS/Worker instructions when processing fraud/forgery
- outline tasks of Fraud and Forgery Specialists
- provide instructions for issuing shelter allowance owed if a legal proceeding is pending
- provide instructions for replacing shelter allowance when the wrong landlord/management agent cashes the check(s) or the bank rejects the check endorsement
- provide instructions for replacing shelter allowance for one-shot deal cases.

POLICY

Public assistance grants can be issued to replace restricted (twoparty or direct vendor) payments that are lost, stolen or incorrectly issued (incorrect landlord name and/or address). If both the reported lost check and the replacement check have been cashed, the duplicated amount must be recouped.

REQUIRED ACTION Error Prevention

Take prompt action to process changes.

Issuing replacement checks raises the potential for duplication of benefits. Therefore, staff must promptly:

- process address changes
- ensure that the landlord/management agent's name and address are correctly entered in the rent restriction field on the Welfare Management System (WMS) budget
 - If a previous landlord/managing agent is owed rent, the vendor check was returned to the Job Center and the correct name and address appear on the check, contact the landlord/managing agent to come to the Center with proper identification to pick up the check. If s/he is unable to come in to the Center, the JOS/Worker must contact the Deputy Director/Admin. JOS I to authorize release of the check(s) to an agency representative for delivery.
- adjust changes to the shelter allowance, as required
- prepare and send appropriate notices to participants informing them of changes in the budget resulting from changes in address and shelter costs.

In addition, at Recertification, the JOS/Worker must ensure:

- all nonexempt households are placed on direct vendor rent restriction
- the participant's rent is up to date and no arrears exist
- the correct shelter allowance is being issued.

The following five sections outline the required actions for replacing direct vendor and two-party rent checks:

- Change in Landlord/Management Agent
 - Participant Informs the Agency
 - Landlord/Management Agent Informs the Agency
- Landlord's Nonreceipt of Restricted Shelter Payment
 - Check Not Issued
 - Check Issued or Cancelled
 - Check Cashed
- Landlord Unable to Redeem Check
 - Stale-Dated Checks
 - Endorsement Rejected
- Direct Vendor or Two-Party Check Replacements for One Shot Deal Cases

Participant Informs the Agency

When a participant informs the Agency that s/he has a new landlord, the JOS/Worker must:

- verify proof of ownership. (Acceptable documentation includes water or tax bill, current mortgage payment receipts or deed.) If the landlord has a designated management agent, ensure that the case record contains documented proof of the agent's name, address, telephone number and entitlement to collect rent on behalf of the landlord
- verify the amount of rent charged and ensure that the correct shelter allowance is budgeted
- update the Shelter window in the POS case with the new shelter and landlord information. Click OK to save the entries
- review the household's rent restriction status. If the household is receiving two-party rent payments but is not exempt from direct vendor restriction, take action to place the household on a direct vendor rent restriction and issue the Notice to Participant Receiving Restricted Rent Checks (Timely) (W-146A) and the Direct Vendor Rent Program letter (W-146Y)

Households with children may be entitled to a higher allowance.

Replacing Direct Vendor and Two-Party Rent Checks

New information

Change in Landlord/ Management Agent

- create a new budget in POS. Review the Household/Suffix
 Financial Needs window to verify the changes made in the
 Shelter window. Calculate and save the new budget to update
 the vendor rent restriction and rent amount
- update and save the budget number on the TAD
- notify the participant and landlord when there is a change in the rent amount, type of payment (e.g., from two-party to direct vendor or removal of restriction) or excess rent balance to be paid by the participant according to current procedure using the following notices:
 - Notice of Intent to Change Benefits: Part A Public Assistance, Food Stamps Benefits, Medical Assistance Coverage and Services (Timely and Adequate) (NYC) (LDSS-4015A NYC)
 - Notice to Participant Receiving Restricted Rent Checks (Timely) (**W-146A**)
 - Notice to Landlord/Primary Tenant of Rent Restriction Payment Status (**W-145A**)
- Landlord/Management Agent Informs the Agency

When the landlord/management agent informs the Agency, either in person or by mail, that the participant is no longer residing at the address of record or that the building is under new management, proceed as follows:

- If the notification is made by the landlord/management agent to Disbursement & Collection (D&C) and checks have been returned, the D&C Supervisor must:
 - cancel the check in accordance with current procedure
 - notify the designated Deputy Director/Administrative Job Opportunity Specialist I (Admin. JOS I) or his/her designee that the landlord/management agent has returned the checks
 - send all supporting information received from the landlord/management agent to the Deputy Director/Admin. JOS I for follow-up and control.

New information

The new information will not appear in WMS until the supervisor approves the activity in which the changes are made.

D&C notified that participant moved or landlord has changed Deputy Director/Admin. JOS I responsibilities

New Landlord/Management Agent

The Deputy Director/Admin. JOS I must ensure:

- the JOS/Worker updated the landlord/management agent and rent restriction information on the budget
- the check was properly cancelled in WMS
- the JOS/Worker reissued the vendor check to the correct landlord/management agent as a Special Grant Issuance Code 08 (Replacement of Cancelled Check)
- the release of the check to an Agency representative for delivery is authorized when the landlord/management agent is unable to report to the Center to pick up the check.

If the notification is made by the landlord/management agent directly to the JOS/Worker, the JOS/Worker must:

- forward any returned checks to D&C for cancellation
- check the case record to determine if the new landlord/management agent information is available. If not, contact the participant to verify the new landlord/managing agent information <u>and</u> send the Letter to Landlord – Request for Residence Verification form (W-147) and Two-Party Check Discrepancy form (W-147L) to retrieve the landlord/management agent's updated information
- upon receipt of the W-147 and W-147L with updated landlord/management agent information or proof of ownership submitted by the participant, reissue the returned check to the correct landlord/management agent as a Special Grant Issuance Code 08
- calculate and save a new budget to update the rent and restriction information. Authorization of the new budget will generate a Client Notice System (CNS) notice that is sent to the participant
- advise the Deputy Director/Admin. JOS I of the actions taken on the case.

If the notification is made by the landlord/management agent directly to the Bureau of Reconciliation and Control (BORAC) Cancellation Unit, the BORAC Worker must:

- cancel the returned check in accordance with current procedure
- forward the supporting documents (including a copy of the returned shelter payment) via inter-office mail to the Landlord Ombudsman Services Unit (LOSU) located at 180 Water St., <u>19th Floor</u>, New York, NY 10038.

JOS/Worker notified that landlord/management agent has changed

BORAC notified that landlord/management agent has changed

Revised information

Upon receipt of the documents the LOSU worker must:

- log in receipt of forwarded documents in the LOSU database
- scan the documents into the HRA Image Viewer
- perform the necessary corrective action to update the address and/or landlord/management agent information
- forward to the appropriate Center Director the Routing Control Sheet form (W-270) with either the:
 - Transmittal: Notice of Corrective Measures Needed (W-450Q) specifying actions to be completed by Job Center staff or
 - Transmittal: Notice of Corrective Measures Taken (**W-450R**) indicating the specific action taken.

Note: Staff must ensure to use the 3/1/07 version of Forms **W-450Q** and **W-450R** which reflect LOSU's current floor. Location heads must ensure that all prior versions of these forms are recycled.

nat Participant Moved

When a participant informs the JOS/Worker of a change in address in writing or in person, the JOS/Worker must process the change of address immediately regardless of whether or not documentation to verify the change is submitted at that time. The JOS/Worker must:

- begin a Change Case Data activity in POS
- when the Address Information window appears, enter the new address
- calculate and save a new budget with the updated landlord/management agent information
- inform the participant that the new address and shelter expense must be verified and submitted within ten (10) days or the case will be closed for failure to verify residence (using closing code V20).
 - If the participant fails to verify a reported change in shelter cost, remove the FS shelter cost, Standard Utility Allowance (SUA) and PA shelter allowance from the budget

JOS/Worker notified that participant has moved

- If the participant verifies the address change and shelter cost but fails to promptly verify the landlord/management agent's information, the JOS/Worker must remove only the PA shelter allowance from the budget until the information is provided.

If the request to change an address or shelter cost is made by telephone, the JOS/Worker must not take action until documentation to verify the change is submitted. When the required documentation is provided, the JOS/Worker must:

- enter the updated address information in the Address Information window as described above
- enter the shelter costs and restriction information on the Shelter (Housing) Expenses window by clicking Yes to the question Do You (or Anyone Who Lives With You) Have a Rent, Mortgage or Other Shelter Expense?

If the request to change an address or shelter cost is not made timely and duplicate rent payments (i.e., two separate rent payments covering the same period) are issued to both the prior and new landlord/management agents, the JOS/Worker must initiate a recoupment on the participant's case. A recoupment should not be initiated if the participant has a good cause reason for not reporting the change in a timely manner. Prior to initiating a recoupment, the JOS/Worker must discuss the issue with a Supervisor if fraudulent activity is suspected. If a fraud referral is required, the Supervisor will forward all available information to the Center Director's Administrative Assistant (AA) for referral to the Bureau of Fraud Investigation (BFI). The AA will follow the automated process to complete the Referral to Bureau of Fraud Investigation (**BFI-14**) and maintain a log of referrals on the BFI Fraud Referral Log (**W-400B**), then forward them to BFI.

Refer to <u>PB #04-93-ELI</u>, Verification of New Address and/or Shelter Cost

New information

Refer to <u>PB #07-99-OPE</u> for additional details.

Refer to <u>PD #07-03-OPE</u> for additional details on fraud referrals to BFI.

- BFI will record the information and refer the case to the Division of Claims and Collections for recovery of the rent payment from the prior landlord/management agent
- The JOS/Worker will initiate a recoupment to recover the duplicate rent payment by completing the PA Recoupment window
- The Division of Claims and Collections will:
 - request copies of the cancelled checks from BORAC
 - send a demand letter to the landlord/management agent
 - if the landlord/management agent does not respond within 10 business days, will prepare the claim for referral for civil litigation and pursue recovery of the rent through the court system
 - if the rent payment is recovered from the landlord/management agent, notify the appropriate Job Center by sending the Claims and Collections Response form (W-147FF).
- When the JOS/Worker receives the completed W-147FF from the Division of Claims and Collections, s/he will prepare the PA Recoupment Data Entry Form – WMS (LDSS-3573) to delete the recoupment previously initiated and the PA Single Issuance Authorization Form (LDSS-3575) to supplement the recouped benefits.

Prior landlord/management agent voluntarily returns shelter payments When the prior landlord/management agent has received and cashed shelter payments that were not due to him/her, the landlord/management agent may voluntarily return the shelter payments to HRA in the form of a money order and send the money order to:

> Ms. T. McKune Division of Accounts Receivable and Billing (DARB) 180 Water Street, 9th Floor New York, NY 10038

Landlord's Nonreceipt of Restricted Shelter Payment

When a participant or the landlord/management agent claims that s/he has not received a rent payment, the JOS/Worker must view the **Benefit Issuance** screen (**NQCS5A**) in WMS to determine the type of payment (direct vendor or two-party), whether the check was issued and the current payment status:

- Outstanding (Code **0**)
- Returned/cancelled (Code 2)
- Cashed (Code 3)
- Stale-dating (Code **S**)

Follow the steps below according to payment status.

Check Not Issued

If the **Benefit Issuance** screen indicates that the <u>check was not</u> <u>issued</u> (e.g., benefit not indicated in WMS), access the **Case Composition** screen (**NQCS3A**) to determine the case status.

- The JOS/Worker may also review the Household window in an activity to determine household composition, case status and individual status. The Household window is the first window to appear in all activities involving a possible change to the case and the second window to appear in the Review Case activity
- Case is active If the case is active: ensure that the household is entitled to the shelter allowance for the period in question verify the landlord/management agent's name and address if the landlord/management agent information is incorrect in WMS or the shelter allowance is not correctly budgeted, update the address and/or shelter cost information as described in the "Participant Moved" section on page 6, and calculate and save a new budget in accordance with current procedure **Revised** information on the Special Grants window, the JOS/Worker will answer the question, Need to Issue a Generic PA Benefit? Refer to PD #05-28-SYS If the shelter costs are in arrears, on the **Shelter (Housing)** for detailed instructions **Expenses** window the JOS/Worker will answer the on completing the SI question, Are there Rent Arrears? The JOS/Worker must Grant Requests Task List window. also complete the SI Grant Requests Task List window issue skipped assistance as a vendor rent payment by Annotate the W-111F if completing the Grants Data Entry window to prepare a the request is initiated by Public Assistance Single Issuance Authorization form the participant. (LDSS-3575). Use Special Grant Issuance Code 09 (Rent Only) Note: Issue two-party rent checks to households that are exempt from direct vendor rent restriction. print the LDSS-3575 in the Print Forms window make a detailed case record entry of the changes made. Case is closed If the case is closed, do not issue a replacement check, even if it is determined that the participant is entitled to the rent allowance for the period in question.

- Determine if the case was closed in error and should be reopened
- If the case was closed in error, reopen the case in accordance with current procedure and issue any skipped assistance.
- Check Issued or Cancelled

If the **Benefit Issuance** window indicates that the check was issued but not cashed (Code **0**) or cancelled (Code **2**), proceed as follows based on the type of check originally issued:

Direct Vendor Check Replacement Process

If a landlord/management agent requests a replacement of a direct vendor check, the JOS/Worker will:

- ensure that the landlord/management agent information on file is correct
- print the Benefits Issued with Issuance Codes 08, 11, 05, 96 screen (NQCS5E) in WMS that lists the check. On the screen printout:
 - print the JOS/Worker's name and phone number
 - circle the check in question
 - write the case name next to the check
- provide the landlord/management agent with a Landlord Request for Replacement of Direct Vendor Payment form (W-146) and the Benefits Issued printout. Scan and index the W-146 in the case record. Advise him/her to complete form W-146 and mail or fax it along with the printout to:

Bureau of Reconciliation and Control (BORAC) Check Replacement Unit 180 Water Street, 9th Floor New York, NY 10038 Fax: (212) 331-3723/3724; Telephone: (212) 331-3772

New information <u>Note</u>: In addition to direct vendor checks (**SP** prefix), BORAC also processes replacement requests for emergency checks (**EA** or **EM** prefixes) cashed at a check cashing establishment, but returned to the Check Cashier unpaid with fees. Upon request, BORAC will issue a replacement check made payable to the check cashing establishment.

Landlord/management agent request for replacement of direct vendor check

Print screen for check from WMS

Do not replace the vendor check(s) at the Job Center.

Landlord unwilling to cooperate with the direct vendor check replacement process

Case is closed (direct vendor check replacement process)

Revised information

Refer to the Stop Payments Module User Guide for specific instructions.

Paper process for preparing a stop payment on a check If the landlord is <u>unwilling to cooperate</u> with the direct vendor check replacement process, regardless of whether or not a legal action is pending (72-hour eviction), <u>do not</u> request that the landlord contact BORAC for a check replacement. Instead, access the **Case Composition** screen (**NQCS3A**) to determine the case status.

- Closed case (less than 30 days):
 - Determine if the case was closed in error and should be reopened. If the case was closed in error, reopen the case in accordance with current procedure and issue any skipped assistance
 - If the direct vendor check that was not previously issued is still outstanding, place a stop payment on the check using the electronic Stop Payment System. The electronic system is an alternative to the paper process of faxing the Stop Payment Order form (M-325c) to the Division of Automated Check Inventory and Tracking (DACIT) and MUST be used instead of the paper process. Refer to the Stop Payments Module User Manual on the FIAweb for detailed instructions and information on this system.
 - Once the case is activated, follow the instructions below.

Note: When the electronic Stop Payment System is unavailable, place a stop payment on the check by preparing the **M-325c**, completing and signing the form, obtaining the supervisor's signature and faxing it to (212) 331-6273/5341/5342. Additional fax numbers are provided on page 10 (see BORAC Check Replacement Unit).

<u>Reminder</u>: If the case was not closed in error, the vendor checks cannot be replaced until the case is reopened.

Case is active; landlord information is correct

Revised information

Case is active (DVP);

landlord information is

Revised information

incorrect.

- Case is active:
 - If the landlord/management agent's information on file is correct and the vendor check is still outstanding, initiate the stop payment using the electronic Stop Payment System. DACIT will check the electronic system and confirm that the stop payment is in effect. The Supervisor and JOS/Worker will both be notified electronically, regardless of the outcome
 - Upon confirmation that the stop payment is in effect, prepare an LDSS-3575 to replace the shelter allowance owed as a direct vendor check using Special Grant Issuance Code 07 (Replacement of Lost/Stolen/Undelivered Checks)
 - Prepare the Replacement of Direct Vendor Payments form (W-147A) and fax it to BORAC/Check Replacement Unit (see page 10), noting the checks that have been replaced.

Note: DACIT cannot provide documentation on Electronic Benefit Transfer reflecting routing code **E220** for Housing Preservation and Development or **E221** for New York City Housing Authority. These payments are electronically transmitted. However, the status of the payments is available on the All Benefits Issued screen (**NQCS5A**) in WMS using the case number and date range.

- If the landlord/management agent information is incorrect, the JOS/Worker will:
 - verify the landlord/management agent's name and mailing address for rent payments
 - update the incorrect information according to the instructions in the "Change in Landlord/Management Agent" section on page 3
 - calculate and save a new budget with the correct landlord/management agent information
 - authorize the budget in accordance with current procedure
 - upon confirmation that the stop payment is in effect, prepare an LDSS-3575 to replace the shelter allowance owed as a direct vendor check using Special Grant Issuance Code 07
 - when the electronic Stop Payment System is unavailable, follow the steps on page 11 that describe the paper process for completing a stop payment request.

Two-Party Check Replacement Process

Case is closed	If the case is <u>closed</u> , do not issue a replacement check, even if it is determined that the participant is entitled to the rent allowance for the period in question.
	 Determine if the case was closed in error and should be reopened If the case was closed in error, reopen the case in accordance with current procedure and issue any skipped assistance.
Case is active; landlord information is correct	If the case is <u>active</u> and the landlord/management agent's <u>information is correct</u> , check WMS and D&C to determine the status of the check:
	 If the check was returned to the Center and can be released – release the check to the participant If the check was returned to the Center and has been or should be cancelled – D&C stamp "Cancel" on the check, take the appropriate action to cancel the check in WMS and send the Information and Referral Notice (W-113E) with a copy of the cancelled check to the JOS/Worker indicating that the check is cancelled. Once the check has been cancelled, the JOS/Worker must replace it using Special Grant Issuance
Use of Code 99 requires the Center Director's approval	 Code 08. If the cancellation does not show in WMS the check can be replaced using Special Grant Issuance Code 99 (Other) If the check was lost or stolen prior to endorsement by the
Two-party check lost or stolen prior to endorsement	participant or landlord, not returned to the Center, or has not been cancelled and two or more days have elapsed since the expected delivery date of the check – the JOS/Worker must:
	 annotate the Client Request Control Card (W-111F) complete the Request for Emergency Assistance or Additional Allowance (For Participants Only) form (W-137A) in POS. The request for the replacement of the lost or stolen check is entered in Section II – "Other" – of the form
Revised information	- initiate an electronic request for stop payment.

Stop payment in effect If the stop payment is in effect: (two-party check); check not cashed prepare the Affidavit of Loss, Theft or Nonreceipt of Public Assistance Check (M-325t) in duplicate. Check the "M-325t" box on the left side at the top of the form. Be sure to include all check replacement information and have the form notarized. Scan and index one copy into the case record and forward the original to the Control Unit to be filed. A BFI referral is not required since no fraud is involved issue a check replacement using Special Grant Issuance Code **07**. Case is active (two-party If the landlord information is incorrect, verify the landlord's name, check): landlord address and rent amount, then calculate and save a new budget information is incorrect to enter the correct landlord's information, as described in the "Participant Moved" section on page 6. Stale-dated two-party Participant claims nonreceipt of a two-party check with an check issuance date over 180 days ago: Initiate an archive retrieval to obtain a copy of the benefit issuance history if the period is no longer visible in WMS If the check was not cashed, reissue the check as Special Grant Issuance Code 99. See page 18 for the Note: Case must be active (in SI or AC status) to issue a replacement process for replacement check. one shot deals. If the check was cashed, print the NQCS5E screen from WMS (refer to the instructions on page 10) and follow the instructions in the "Check Cashed" section of this policy directive (see below). Check Cashed If the **Benefit Issuance** screen indicates that the check was Revised information cashed (Code 3), the JOS/Worker must: Do not put a stop not put a stop payment on the check payment on cashed ensure that the landlord information on file is correct . checks. print the **NQCS5E** screen that lists the check . Landlord/agent states if the landlord states that the name and/or endorsement on endorsement is invalid the check is invalid, prepare the Request for Original or Copies of Checks form (M-160j) in duplicate and complete

the following steps:

	 Scan and index a copy of the M-160j in the case record. Forward the original M-160j and the screen printout(s) to:
	Division of Automated Check Inventory and Tracking 180 Water Street, 7th Floor New York, NY 10038 ATTN: Supervisor, Check Services Inventory Control Unit Fax: (212) 331-6273/5341/5342 Telephone: (212) 331-3575
	Note: Remember that when you request an original check, a messenger must pick it up from DACIT.
Revised information	Direct Vendor Process for Suspected Fraud/Forgery
	In addition to the above and upon receipt of the copy of the check from DACIT, the JOS/Worker must:
Do not replace the check at the Job Center.	 complete section 1 of the Affidavit of Improper Negotiation of Public Assistance Check (W-147Y). <u>Do not reissue the check</u> <u>make a copy of the W-147Y after completing section 1</u> give the landlord (or designated management agent) the original W-147Y and a copy of both sides of the vendor rent check:
Revised information	 The JOS/Worker will advise him/her to complete section 2 of the W-147Y when the name on the check <u>does not</u> correspond to the endorsement, submit the form to a notary public to be notarized, and mail the original W-147Y and a copy of the check(s) to:
	Bureau of Reconciliation and Control (BORAC) Fraud and Forgery Tracking Unit 180 Water Street, 9th Floor New York, NY 10038
Fraud and Forgery Specialist	 Upon receipt of the notarized W-147Y and copy of the check(s) from the landlord/management agent, the BORAC Fraud and Forgery Specialist will:
	 → examine the signatures on the check copies → submit the documents to the bank and await a determination → if the bank confirms that the money has been collected and credited back to the Family Independence Administration, process the LDSS-3575 to reissue the check

	→ if the check should not be replaced, forward the denial letter from the bank notifying the landlord/management agent the bank denied the check replacement.
Refer to <u>PD #07-03-OPE</u>	 scan and index copies of the W-147Y and check into the case through his or her supervisor, prepare the automated BFI-14 and submit to BFI. Send the W-147Y and a copy of the check to BFI under separate cover to:
	Bureau of Fraud Investigation 250 Church Street, 3rd Floor New York, NY 10013 ATTN: Information Control Division
New information	 If there is a rent demand, a court case, or a legal proceeding is pending, the JOS/Worker must issue the shelter allowance owed until a decision is received from BFI.
	 Do not forward the Landlord Request for Replacement of Direct Vendor Payment (W-146) to BORAC Reissue the check as a Special Grant Issuance Code 40 (Rent in Advance to Avoid Eviction) Initiate an automatic recoupment by entering the appropriate recoupment indicator on the LDSS-3575 If BFI has determined that the landlord/management agent redeemed the check, inform the landlord that the shelter allowance has already been paid to him.
	Two-Party Check Process for Suspected Fraud/Forgery
Make referral to BFI	 In addition to requesting a copy of the check(s), prepare the BFI-14 and attach the copy of the check. Forward packet to BFI for an investigation
Two-party check lost or stolen after participant's endorsement	If the participant or landlord claims that the two-party rent check was lost or stolen after the participant's endorsement, the check is considered lost cash and the participant must file a police report and furnish evidence of the police report (a stop payment order cannot be put on lost cash). If, in this instance, the participant requires shelter arrears payments to prevent an eviction, a referral to the Rental Assistant Unit (RAU) is required prior to authorizing an emergency check (E-
RAU approval required to issue Code 40	check). With RAU's approval an E-check can be issued as a Special Grant Issuance Code 40
Stop payment attempted on lost/stolen check that was cashed	 If the stop payment order was attempted because the check was originally reported as lost or stolen, but the check was cashed:

- determine if the participant or landlord received the check
- if the participant is pending eviction and the landlord did not cash the check, contact RAU for approval to reissue the rent
- if RAU approves the request, reissue the rent as a Special Grant Issuance Code **40**
- initiate an automatic recoupment by entering the appropriate recoupment indicator on the LDSS-3575.

Direct Vendor or Two-Party Check(s) Cashed By Wrong Landlord/Management Agent

If the landlord states that the former landlord/management agent cashed the check(s), upon receipt of the copy of the check from DACIT, the JOS/Worker must:

- verify with the current or new landlord/management agent that his/her name and address on file are correct
- <u>not</u> refer the new landlord to BORAC. This is not a direct vendor payment check replacement situation
- issue the shelter allowance owed to the correct landlord/management agent as an emergency allowance at the Job Center as a Special Grant Issuance Code 99 to reissue the check(s) and make a detailed case note in the electronic case record
- prepare form W-113E in duplicate and forward the original with a copy of the check(s) attached to:

Division of Claims and Collections 250 Church Street, 5th Floor New York, NY 10013 ATTN: Director

- The **W-113E** must include a notation that the wrong landlord cashed the original check(s), the participant's name, address, case number and the old landlord's name and address. Also include the amount of the rent payment and the periods covered.
- Landlord Unable to Stale-D Redeem Check
- Stale-Dated Checks

Direct Vendor Check Process

Check dated over 180 days prior to return date

 If the vendor check is returned to D&C after 180 days from the date of issuance:

Landlord/agent states former landlord/agent cashed check(s)

New information

- the D&C Supervisor must alert the JOS/Worker that the check has been returned
- the JOS/Worker must first determine if a replacement check has already been issued
- If the stale-dated check is returned to D&C but has not been replaced, the JOS/Worker must contact the landlord/management agent to come to the Center to retrieve the stale-dated check. Instruct the landlord/management agent to mail the W-146 form and the stale-dated check directly to BORAC (see address on page 10). BORAC will confirm the stale-dated check and reissue, if possible. Do not replace returned stale-dated direct vendor checks at the Job Centers.

Two-Party Check Process

- If the two-party check is returned to D&C after 180 days from the date of issuance:
 - the D&C Supervisor must alert the JOS/Worker that the check has been returned
 - the JOS/Worker must check the Benefits Issuance screens to determine if the benefit has already been replaced. If the benefit is no longer visible in WMS, request an archive retrieval to obtain a copy of the benefit issuance history
 - if the case is active and the check has been cancelled, issue the replacement check with Special Grant Issuance Code 08. If the cancellation does not show in WMS the check can be replaced using Special Grant Issuance Code 99
- If a participant returns a two-party check that has not been cashed because the issuance date was more than 30 days (but less than 180 days) ago, advise the participant that the landlord can deposit the check and that the bank will issue payment. <u>Do not replace the check</u>.

Two-party checks are valid when presented within 179 days of the check date.

Endorsement Rejected

- If a landlord/management agent informs the JOS/Worker that a two-party check was rejected by the bank because of a thirdparty endorsement, the JOS/Worker must;
 - <u>not</u> refer the landlord/management agent to BFI. This is not a fraud situation since the two-party check was not cashed by the third-party
 - forward the returned check to D&C for cancellation
 - once the check has been cancelled, replace it using Special Grant Issuance Code 08. If the cancellation does not show in WMS the check can be replaced using Special Grant Issuance Code 99
 - advise the Deputy Director/Admin. JOS I of the actions taken on the case.
 - Upon receipt of the returned check, D&C will:
 - stamp "Cancel" on the check
 - take the appropriate action to cancel the check in WMS
 - send the Information and Referral Notice form (W-113E) with a copy of the cancelled check to the JOS/Worker indicating that the check is cancelled.

Note: If the landlord/management agent returns the rejected check directly to D&C, the D&C Supervisor must take action as described in the "Landlord/Management Agent Informs the Agency" section (see page 4).

If a former PA/FS participant whose case is currently closed requests replacement of a direct vendor or two-party rent check that was lost or cashed by the wrong landlord, to prevent an eviction the JOS/Worker must:

- verify the new landlord/managing agent information
- open a one-shot deal case (PA in SI status and FS in AP or NA status) using PA opening code Y39 (Case accepted only for emergency shelter and/or emergency utility arrears with no repayment agreement) since a repayment agreement is not required for the emergency shelter arrears payment,
- upon verification, reissue the rent check using PA Special Grant Issuance Code 40
- suppress the recoupment by entering 05 (No Recoupment or Restriction) in the Shelter/Recoup IND field on the PA Single Issue Data Entry Screen (NSI002).

Revised information

"Third-party endorsement" refers to a signature of someone other than the primary tenant or landlord/management agent.

D&C Staff

Direct Vendor or Two-Party Check Replacements for One-Shot Deal Cases

New information

Rent check(s) cannot be issued on closed cases.

Code **40** is used for administrative purposes only to issue a replacement check for one-shot deal cases. <u>Note</u>: Special Grant Issuance Codes **08** and **99** cannot be used to issue the replacement check for one shot deal cases opened using PA Opening Codes **Y38** or **Y39**.

PROGRAM IMPLICATIONS

Paperless Office System (POS) Implications

Print and/or scan required forms as necessary.

JOS/Workers will print forms **W-147** and **LDSS-3575** from the **Print Forms** window and send the **W-147** to the landlord for completion. When the completed **W-147** is returned to the JOS/Worker, scan the form and all other documentation required to comply with this directive into the electronic case record.

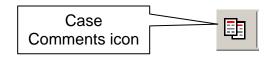
Note: The JOS/Worker must also scan all non-POS-generated forms and notices signed by the individual <u>except domestic violence-</u><u>related documents</u> into the electronic case record.

WMS Inquiry The JOS/Worker may view the inquiry screens **NQCS3A** and **NQCS5A** by highlighting the case in the Case Manager Queue and then clicking on the WMS button below the queue list, which will display the **Inquiry** browser. If the JOS/Worker has the case open in an activity, the **Inquiry** browser may also be brought up by clicking on the WMS Inquiry icon (magnifying glass) (shown below) in the menu bar.



If the JOS/Worker does not have the case open in an activity or the case is not in the Worker's queue, the JOS/Worker may use the **Review Case** activity to review all information needed to comply with this policy directive.

Enter a case comment for all actions performed on a case by clicking on the Case Comments icon (shown below). As an alternative, enter comments by pressing <ALT>M on the keyboard.



Enter and save the new budget number on the TAD.

At any time a new budget is saved, be sure to update the budget number in the POS TAD and run the TAD rules to save the budget information.

Model Center Implications	The processes described in this policy directive for JOS/Workers must be conducted by JOS/Workers during Recertification Interviews. Exceptions to this circumstance are outlined below.
Participant informs the Agency	When a participant reports to the Agency to provide information regarding a new landlord, the participant will receive a lavender numbered ticket from the Front Door Receptionist and be routed to the Customer Service Information Center (CSIC). The JOS/Worker in CSIC will gather the necessary information/documents and forward them to the Processing Unit. Staff in the Processing Unit must perform the steps described in the "Participant Informs the Agency" section on page 3.
Landlord/management agent informs the Agency	When a landlord/management agent reports to the Agency to provide information that a participant no longer resides at the address of record or that the building is under new management, the Front Door Receptionist must not perform a case search since the landlord/management agent will not have an active case in WMS. The Front Door Receptionist must provide the landlord/management agent with a lavender numbered ticket and route him/her to the CSIC. The JOS/Worker in CSIC will gather the necessary information/documents and forward them to the Processing Unit. Staff in the Processing Unit must perform the steps described in the "Landlord/Management Agent Informs the Agency" section on pages 4 and 5.
	When a landlord/management agent or applicant/participant reports to the Agency to return a direct vendor or two-party check, the Front Door Receptionist must provide the individual with a lavender numbered ticket and route him/her to D&C.
	All documents received via mail at the Model Center must be routed to the Processing Unit, not the JOS/Worker. Checks that are returned to the CSIC for cancellation must be sent to the Processing Unit with the W-113E indicating that the check must be cancelled.
Food Stamp Implications	There are no Food Stamp implications.
Medicaid Implications	There are no Medicaid implications.

LIMITED ENGLISH SPEAKING ABILITY (LESA) AND HEARING-IMPAIRED IMPLICATIONS

FAIR HEARING

Avoidance/ Resolution For Limited English Speaking Ability (LESA) participants and hearing-impaired applicants/participants, make sure to obtain appropriate interpreter services in accordance with <u>PD #06-12-OPE</u> and <u>PD #06-13-OPE</u>.

Ensure that all case actions are processed in accordance with current procedures and that electronic case files are kept up to date. Remember that applicants/participants must receive either adequate or timely and adequate notification of all actions taken on their case.

Conferences A participant can request and receive a conference with a Fair Hearing and Conference (FH&C) AJOS/Supervisor I at any time. If a participant comes to the Job Center requesting a conference, the Receptionist must alert the FH&C Unit that the individual is waiting to be seen. In Model Offices, the Receptionist at Main Reception will issue an FH&C ticket to the applicant/participant to route him/her to the FH&C Unit and does not need to verbally alert the FH&C Unit staff.

The FH&C AJOS/Supervisor I will listen to and evaluate any material presented by the participant, review the case file and discuss the issue(s) with the JOS/Worker responsible for the case and/or the JOS/Worker's Supervisor. The AJOS/Supervisor I will explain the reason for the Agency's action(s) to the participant.

If the participant has in fact presented good cause for the infraction or shown that the outstanding Notice of Intent needs to be withdrawn for other reasons, the FH&C AJOS/Supervisor I will settle in conference (SIC), enter detailed case notes in NYCWAY and forward all verifying documentation submitted by the applicant/participant to the appropriate JOS/Worker for corrective action to be taken. In addition, if the adverse case action still shows on the "Pending" (**08**) screen in WMS, the AJOS/Supervisor I must prepare and submit a Fair Hearing/Case Update Data Entry Form (LDSS-3722), change the **02** to an **01** if the case has been granted aid continuing (ATC), or prepare and submit a PA Recoupment Data Entry Form – WMS (LDSS-3573) to delete a recoupment. The AJOS/Supervisor I must complete a Conference Report (<u>M-186a</u>). If the participant fails to show good cause for the infraction or if it is determined that the Agency's action(s) should stand, then the AJOS/Supervisor I will explain to the participant why s/he cannot settle the issue(s) in conference (SIC). The AJOS/Supervisor I must complete an <u>M-186a</u>.

Evidence Packets Should the participant elect to continue his/her appeal by requesting a Fair Hearing or proceeding to a Hearing already requested, the FH&C AJOS/Supervisor I is responsible for ensuring that further appeal is properly controlled and that appropriate follow-up action is taken in all phases of the Fair Hearing process.

All Evidence Packets must contain a detailed history, copies of relevant WMS screen printouts, other documentation relevant to the action taken and copies of NYCWAY "Case Notes" screens as appropriate.

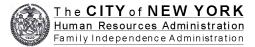
RELATED ITEMS PB #04-93-ELI PB #07-99-OPE PD #07-03-OPE Stop Payments Module User Manual

REFERENCES <u>Temporary Assistance Source Book</u>, Chapter 21, sections A and B

ATTACHMENTS

ATTACHWENTS		
Please use Print on	M-160j	Request for Original or Copy of Checks (Rev. 1/21/05)
Demand to obtain copies	M-325c	Stop Payment Order (Rev. 9/1/05)
of forms.	M-325t	Affidavit of Loss, Theft or Nonreceipt of Public
		Assistance Check (Rev. 9/1/05)
	M-325t (S)	Affidavit of Loss, Theft or Nonreceipt of Public Assistance Check (Spanish)
	W-146	Landlord Request for Replacement of Direct Vendor Payment (Rev. 1/21/05)
	W-147	Letter to Landlord – Request for Residence
		Verification (Rev. 9/1/05)
	W-147 (S)	Letter to Landlord – Request for Residence
		Verification (Spanish)
	W-147A	Replacement of Direct Vendor Payments (Rev. 1/21/05)
	W-147L	Two-Party Check Discrepancy (Rev. 9/1/05)
	W-147Y	Affidavit of Improper Negotiation of Public Assistance Check (Rev. 1/21/05)
	W-450Q	Transmittal: Notice of Corrective Measures Needed (Rev. 3/1/07)
	W-450R	Transmittal: Notice of Corrective Measures Taken (Rev. 3/1/07)

Form	M-160j
Rev.	1/21/05



Case Number: ____

Case Name: _

Request for Original or Copy of Checks

Division of Automated Check Inventory and Tracking/BORAC/FO Transmittal

To: Division of Automated Check Inventory and Tracking (DACIT) 180 Water Street, 7th Floor New York, NY 10038

From:

Site Name and Number

Please provide a copy of checks identified by check number on the attached printouts.



Request for Original or Copy of Checks

Division of Automated Check Inventory and Tracking/BORAC/FO Transmittal

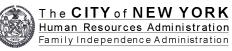
To:	Division of Automated Check Inventory and Tracking (DACIT
	180 Water Street, 7th Floor
	New York, NY 10038

From:

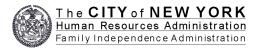
Site Name and Number

Please provide a copy of checks identified by check number on the attached printouts.

To be completed by <u>Requestor</u> : Date of Request:	To be completed by <u>CSICU</u> : Date Received:
Requestor's Name:	Date Check Sent to Requestor:
Telephone Number:	Work Completed by:
Fax Number:	
Date Response Required:	



	Payme	TOP nt Order ACIT)	
Date: Center Name and Number: Participant's Name: Case Number:			To: Division of Automated Check Inventory and Tracking (DACIT 180 Water Street, 7th Floor New York, NY 10038 Fax: (212) 331-6273/5341/534
Check Number Reason for the Stop:		Date	\$ Dollar Amount
Worker Signature	Date	Telephone	Number
Supervisor Signature Form M-325c Rev. 4/20/05	Date	Telephone	Number The CITY of NEW YORK Human Resources Administration Family Independence Administration
	Payme	nt Order	
Date: Center Name and Number: Participant's Name: Case Number:			To: Division of Automated Check Inventory and Tracking (DACIT 180 Water Street, 7th Floor New York, NY 10038 Fax: (212) 331-6273/5341/534
			\$
Check Number Reason for the Stop:		Date	Dollar Amount
Worker Signature	Date	Telephone	Number
Supervisor Signature	Date	Telephone	Number



Affidavit of Loss, Theft or Nonreceipt of Public Assistance Check

First Name M.I. Last Name Center:	Type of Affidavit: M-325t An	nended Status Code	Reamended	Status Code	
Center:	Participant Name (as appears on roll):				
Category:					
CHECK INFORMATION Original Check Number: Date Check Issued: Amount Check Issued For: STATE OF NEW YORK COUNTY OF NEW YORK COUNTY OF NEW YORK Ssc: COUNTY OF NEW YORK COUNTY OF NEW YORK Ssc: COUNTY OF NEW YORK COUNTY OF NEW YORK COUNTY OF NEW YORK COUNTY OF NEW YORK Ssc: COUNTY OF NEW YORK COUNTY OF NEW YORK Ssc: COUNTY OF NEW YORK COUNTY OF NEW YORK Ssc: COUNTY SSC: COUNTY SSC: COUNTY SSC: COUNTY SSC: COUNTY SS	Center:	Case Num	ber:	Suffix	
Original Check Number: Date Check Issued: Amount Check Issued For: \$ \$ STATE OF NEW YORK); S COUNTY OF NEW YORK)ss: Image: State of the second	Category:				
STATE OF NEW YORK) S COUNTY OF NEW YORK)ss: Intervention I, the undersigned, being duly sworn, depose and say: That I am the public assistance participant identified above; that I have been informed by said Job Center that the above referenced check was issued by said Administration; that I have not received said check or the proceeds thereof directly or indirectly: that I did not place an endorsement thereon or authorize anyone to do so. If this check comes into my possession, I will return it immediately to this Center. I AGREE NOT TO ENDORSE AND NOT TO CASH THIS CHECK. I have been advised and know that the Administration is relying on my statement to issue replacement monies and that if make any false statement or misrepresentation. I will be subject to criminal penalties. I am also aware that if any duplication of public assistance results from any false statement or misrepresentation by me, the replacement check will be considered an advance of future monies due me, and the amount of duplication will be recouped by reduction of my next checks. Subscribed and sworn before me	CHECK INFORMATION				
STATE OF NEW YORK) COUNTY OF NEW YORK)ss: I, the undersigned, being duly sworn, depose and say: That I am the public assistance participant identified above; that I have been informed by said Job Center that the above referenced check was issued by said Administration; that I have not received said check or the proceeds thereof directly or indirectly; that I did not place an endorsement thereon or authorize anyohe to do so. If this oheck comes into my possession, I will return it immediately to this Center I AGREE NOT TO ENDORSE AND NOT TO CASH THIS CHECK. I have been advised and know that the Administration is relying on my statement to issue replacement monies and that if any duplication of public assistance results from any false statement or misrepresentation, I will be subject to criminal penalties. I am also aware that if any duplication of public assistance fresults from any false statement or misrepresentation by me, the replacement check will be considered an advance of future monies due me, and the amount of duplication will be recouped by reduction of my next checks. Subscribed and sworn before me This Day of , 20 Notary Public Participant Signature Name of Form Preparer Roll Number of Original Check	Original Check Number:	Date Chec	ck Issued:	Amount Check Issued For	
STATE OF NEW YORK) COUNTY OF NEW YORK)ss: I, the undersigned, being duly sworn, depose and say: That I am the public assistance participant identified above; that I have not received said Job Center that the above referenced check was issued by said Administration; that I have not received said check or the proceeds thereof directly or indirectly; that I did not place an endorsement thereon or authorize anyone to do so. If this check comes into my possession, I will return it immediately to this Center. I AGREE NOT TO ENDORSE AND NOT TO CASH THIS CHECK. I have been advised and know that the Administration is relying on my statement to issue replacement monies and that if I make any false statement or misrepresentation. I will be subject to criminal penalties. I am also aware that if any duplication of public assistance results from any false statement or misrepresentation by me, the replacement check will be considered an advance of future monies due me, and the amount of duplication will be recouped by reduction of my next checks. Subscribed and sworn before me This Day of, 20				\$	
This Day of, 20 Notary Public Participant Signature Name of Form Preparer Roll Number of Original Check	above; that I have been informed by said Ju Administration; that I have not received said place an endorsement thereon or authorize return it immediately to this Center. I AGREE I I have been advised and know that the Admin and that if I make any false statement or misre I am also aware that if any duplication of publi by me, the replacement check will be consid duplication will be recouped by reduction of m	ob Center that the above check or the proceeds th anyone to do so. If this of NOT TO ENDORSE AND istration is relying on my s presentation, I will be sub c assistance results from dered an advance of fut	e referenced check lereof directly or ind check comes into r NOT TO CASH TH statement to issue r oject to criminal pen any false statement	was issued by said directly; that I did not ny possession, I will IS CHECK. eplacement monies alties.	oll Number Check Numb
Notary Public Participant Signature Name of Form Preparer Roll Number of Original Check					
	I his Day of,		y Public	Participant Sign	ature
Name of Interpreter Reconciliation Number	Name of Form Preparer	Rc	Il Number of Origin	al Check	
	Name of Interpreter	Re	Reconciliation Number		

Interpreter's Address (If Employee, State Center Address)

Replacement for Initial Check Authorized

The aforementioned information has been verified and this check has not been canceled to date by the Control Unit or FCU.

Date:	Head Control Clerk:		
REPLACEMENT C	HECK INFORMATION		
Replacement Checl	k Number:	Date of Replacement Check:	Amount of Replacement Check:
			\$
FCU	Use Only: Determination R	egarding Original Check	<
		rsed by participant and landlor	d.
FCU Supervisor Seal	NO REPLACEMENT – Endo from landlord or credit for rer		nt; if replaced already, get refund
(and	NO REPLACEMENT – Endo	rsed by participant, not landlor	d. If replaced, RECOUP.
comments)		ED (or VALIDATED if done alr	ready)
	FORGERY – Both endorsem		
	REPLACEMENT AUTHORIZ	ED – Photocopy NIF. Send thi	is form back to FCU with
			does not app <mark>ea</mark> r on FCU tape.
	Send this form back to FCU	with replacement information.	
Signature	Date Signed	Location	
Print Name	Title		

A Landlord Affidavit, stating that the landlord in the case has not received any of the proceeds of the check in question, has been obtained and is attached.

A Landlord Affidavit could not be obtained.

Initials Location

Date



Affidavit of Loss, Theft or Nonreceipt of Public Assistance Check

Type of Affidavit: M-325t	nended Status Code	Reamended Status Code
Participant Name (as appears on roll): First Name Center: Category: CHECK INFORMATION Original Check Number: ESTADO DE NUEVA YORK) CONDADO DE NUEVA YORK) ss: Yo, el subscrito, habiendo prestado juramento, testifico	Case Number: Date Check Issued: 	Amount Check Issued For: \$ Total Action of the second seco
pública y que soy la persona identificada más arriba; que antemencionado cheque fue emitido por dicha Admi antemencionado; que no he recibido beneficio alguno direc lo he endosado ni autorizado a persona alguna para a devolveré inmediatamente a este Centro. ACCEDO A NO Se me ha notificado y así lo he entendido, que el departam reemplazar el dinero y que si presto testimonio falso o tergi También tengo conciencia de que si a causa de testimonio asistencia pública, el cheque reemplazado será consider cantidad duplicada será deducida de mis próximos cheque	inistración; que yo no he rec to o indirecto procedente de dich así hacerlo. Si este cheque lleg ENDOSAR NI HACER EFECTIVO nento se está basando en mis deo iversado, estaré sujeto a pena cri falso o tergiversación se produce rado un anticipo del dinero que	cibido el cheque no cheque; que no pa a mi poder, lo D ESTE CHEQUE. claraciones para minal.
Subscribed and sworn before me		
This Day of, 20 N	lotary Public	Participant Signature (<i>Firma del Participante</i>)
Name of Form Preparer	Roll Number of Origina	al Check
Name of Interpreter	Reconciliation Number	

Interpreter's Address (If Employee, State Center Address)

Replacement for Initial Check Authorized

The aforementioned information has been verified and this check has not been canceled to date by the Control Unit or FCU.

Date:	Head Control Clerk:			
REPLACEMENT C	HECK INFORMATION			
Replacement Check	k Number:	Date of Replacement Check:	Amount of Replacement Check:	
			\$	
FCU	Use Only: Determination R	Regarding Original Chec	:k	
[]	NO REPLACEMENT – Ende	orsed by participant and landlo	ord.	
FCU Supervisor Seal	NO REPLACEMENT – Ender refund from landlord or cred	orsed by landlord, not participa it for rent.	ant; if replaced already, get	
(and	NO REPLACEMENT – Ende	ACEMENT – Endorsed by participant, not landlord. If replaced, RECOUP.		
comments)	already)			
C	replacement information.		ck does not appear on FCU tape	
	Send this form back to FCU	with replacement information		
Signature	Date Signed	Location		
Print Name	Title			
	fidavit, stating that the landlord in t n question, has been obtained and		of the proceeds	

A Landlord Affidavit could not be obtained.

Initials Loo

Location

Date



Landlord Request for Replacement of Direct Vendor Payment

Instructions to Center Staff: Please provide the Landlord with this form (W-146) and a printout of the WMS Benefit Issuance Screen NQCS5E for DVP replacement check(s).

Instructions to Landlord: Please fill out this form and return it to the Bureau of Reconciliation and Control (BORAC) at the address listed below along with the printout of the WMS benefit issuance screen that you received from the agency. BORAC will process your request and replace the check within nine (9) months of the issuance date, pending their investigation.

Please keep a copy of this form for your records.

Date:	
To:	Bureau of Reconciliation and Control (BORAC)
	Check Replacement Unit
	180 Water Street, 9th Floor
	New York, NY 10038
	Fax: (212) 331-3723/3724 Phone: (212) 331-3772

I, the undersigned landlord (or agent), hereby request replacement of the Direct Vendor Payment rent check on behalf of:

Participant's First Na	me M.I.	Participant's Last Nan	ne	
Case Number:		Category:	Suffix:	_
-	Address Line 1			
-	Address Line 2 City	Reason Check Replace	State Zip Code	
	t applies to your Direct	Vendor check:	eccipt Other:	
Lost Stol	accompany f	orm)		
Check Number	Check Date	Check Amount	Jo	b Center

Landlord or Authorized Agent Name (print)		Signature of Landlord or Authorized Agent	
Date		Telephone Number	
Landlord's Mailing Address	Address Line 1		
	Address Line 2		
	City	State Zip Code	

Form W-147	
Rev. 9/1/05	

on

The CITY of NEW YORK
Human Resources Administration
Family Independence Administration

Case Number:

Case Name: _____

Letter to Landlord – Request for Residence Verification

(Prepare in Duplicate)

Section A: Request for Household/Residence Verification

We are presently reviewing the public assistance application/case of: ________

		applicant/participant name
who resides at		
	address	apartment number

We would appreciate you providing the information requested below as soon as possible. Thank you for your cooperation.

Worker Name		Telephone Number
Se Se	ection B: Reply by Land	llord
Name on lease:		
Date lease signed:		
Amount of rent charged per month: \$	Last date rent paid:	Number of persons in household:
Tenant's financial references:		
Names of persons in household:		
Does		reside at the above address? \square Yes \square No
Building Supt./Managing agent:		Telephone Number:
Signature of Landlord		Date
	For Office Use Only	У
Telephone contact made with		

at telephone number



Fecha:		

Número del Caso: _____ Nombre del Caso: _____

Carta al Casero – Petición para Verificación de Residencia

(Preparar en Duplicado)

Sección A: Petición para Verificación de Casa/Residencia

Nosotros estamos actualmente revisando la solicitud de asistencia pública/caso de: ____

		nombre del solicitante/participante
quien reside en		
	dirección	número de apartamento
Le agredecemos que usted nos pro	ovea la información peticionada m	ás abajo tan pronto como le sea posible. Gracias
por su cooperación.		

Nombre del Trabajador	Section B: Respuesta del	Número de Teléfono Casero
Nombre en el contrato de arrendami	ento:	
Fecha en que se firmó el contrato de	arrendamiento:	
Cantidad de alquiler mensual \$	Última fechaque el alquiler fue pagado:	Número de personas en el hogar:
Referencias financieras del inquilino:		
Nombres de personas en el hogar:		
¿Reside		_ en la dirección antedicha? 🗌 Sí 🛛 🗌 No
Superintendente del Edificio/ Agente Administrador:	I	Número de Teléfono:
Firma del Casero		Fecha

For Office Use Only

Telephone contact made with	
on	at telephone number



Replacement of Direct Vendor Payments (Complete this form and fax to BORAC)

Date	:		
To:	Bureau of Reconciliation and Control (BORAC) Fraud and Forgery Tracking Unit 180 Water Street, 9th Floor, New York, NY 10038 Fax: (212) 331-3723/24 Phone: (212) 331-3772		
	nave replaced the following DVP check(s) on an eme		listed below:
	e Name:		
Case	e Number:		
Or	iginal Check Number:	Date:	Amount:
Re	eplacement Check Number:	Date:	Amount:
La	ndlord Name:	Last Name	
Sp	pecial Grant Code of Replacement:*		
O	iginal Check Number:	Date:	Amount:
Re	eplacement Check Number:	Date:	Amount:
La	ndlord Name: First Name	Last Name	_
	pecial Grant Code of Replacement.*		
Or	iginal Check Number:	Date:	Amount:
Re	eplacement Check Number:	Date:	Amount:
La	ndlord Name:	Last Name	_
	pecial Grant Code of Replacement.*		
Or	iginal Check Number:	Date:	Amount:
Re	eplacement Check Number:	Date:	Amount:
La	ndlord Name: First Name	Last Name	_
Sp	pecial Grant Code of Replacement:*		

* Special Grant Code of Replacement must be 07 or 08.

Form W-147L Rev. 9/1/05



Two-Party Check Discrepancy

Dear Sir/Madam:

Our records indicate that check number	issued for two-party rent for	through	for:
		(start date)	(end date)
	who resides at		
(Participant's Name)		(Address)	
did not clear the bank because the landlord/managing	g agent name on the check does not	match the endorsement	or the name of the
account in which you deposited the check.			
You must either provide us with information to correct	ct our records or change the name	on the account to match	the information you
have given us.			
To be completed by the landlord:	n the owner or designated managing	agent for	
· · · · · · · · · · · · · · · · ·			Address)
I further certify that	resides at		
(Participant's Name)		(Address)	
and pays \$ monthly for rent. All ren (Amount)	nt checks should be made payable to	r.	
Landlord Name:			
Address:			

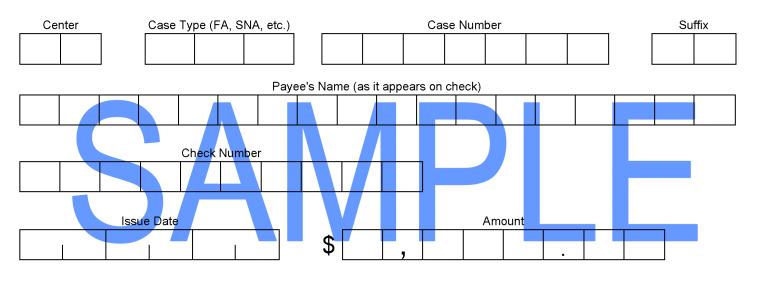


Affidavit of Improper Negotiation of Public Assistance Check

Instructions to the Landlord/Managing Agent: If the endorsement on the enclosed copy of the check(s) is not yours, complete Section 2 of this affidavit, have it notarized and send it with the copy of the check(s) to:

> BORAC Attn: Supervisor, Forged Check Unit 180 Water Street, 9th Floor New York, NY 10038

Section 1 To be completed by Center staff



Section 2 To be completed by Landlord/Managing Agent

l,(comp	any name, if applicable)	, the undersigned, being duly swor	n, depose and say: That I am the
landlord/agent of		My add	dress/phone number is as follows:
check and the endo	-	ter and required my endorsement to be valio state that none of the endorsements were n s of said check.	
Signature of Landlord/	Managing Agent		-
Suscribed and sworn t	o before me:		
	This	Day of	, 20

Ombudsman



Date

Landlord Ombudsman Services Unit Transmittal: Notice of Corrective Measures Needed



Transmittal: Notice of Corrective Measures Taken

Date:
To Center:
From: Landlord Ombudsman Services Unit (LOSU) 180 Water Street, 19th Floor, New York, NY 10038 (212) 331-5927
The Landlord Ombudsman Services Unit (LOSU) has reviewed and taken <u>corrective measures</u> on the Returned Direct Vendor check for the case listed below
Case Number:
Case Name: U U U U U U U U
Corrective action completed:
Landlord's name and address corrected
Rent check(s) replaced
Other:
Ombudsman Date