

FAMILY INDEPENDENCE ADMINISTRATION

Seth W. Diamond, Executive Deputy Commissioner



James K. Whelan, Deputy Commissioner Policy, Procedures, and Training

Lisa C. Fitzpatrick, Assistant Deputy Commissioner Office of Procedures

POLICY BULLETIN #08-58-ELI

(This PB Obsoletes PD #98-13 and is used with PD #07-28-ELI)

REMINDER TO STAFF REGARDING BROKER'S FEES

| | 0.1(| | | | |
|---|---|--|--|--|--|
| Date: | Subtopic(s): | | | | |
| June 2, 2008 | Cash Assistance | | | | |
| ☐ This procedure can now be accessed on the FIAweb. | The purpose of this policy bulletin is to remind staff at Job Centers of the policy regarding the issuance of broker's fees. | | | | |
| | Currently, the criteria for the issuance of broker's fees are: | | | | |
| | The applicant/participant must provide a separate Landlord/Managing Agent's Statement Form (W-147M) for each brokered apartment (minimum of three potential apartments, each apartment represented by a different landlord). The W-147M is to be completed by each landlord to confirm that he/she (or his/her management agent): | | | | |
| | is in no way associated with the management of the agency charging the broker's fee. will not receive any part of the broker's fee directly or indirectly from the broker. will not rent the unit without the services of the broker. The broker verifies the following: | | | | |
| | The broker verifies the following. The actual rental unit has a current and effective Certificate of Occupancy issued by the New York City Department of Buildings and that no change has been made in the occupancy or use of the unit that is inconsistent with the certification. The actual rental unit has no outstanding dangerous or hazardous violations. (A violation is issued by a government agency when there is an uncorrected hazardous condition.) He/she has a current broker's license in good standing. He/she is not the owner, controlling person or an affiliate of the owner of the actual rental unit. | | | | |

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

See <u>PD #07-28-ELI</u> for information on the Advantage programs.

 The amount of the broker's fee does not exceed one month's actual rent. However, issuances for the following rental assistance programs only may currently exceed this limit:

- Work Advantage
- Children Advantage
- Fixed Income Advantage
- Short-term Assistance Advantage

For these programs, staff may grant <u>up to</u> 15% of the total annual actual rent. For example, for an apartment that rents for \$1,050 per month, the maximum allowable broker's fee is:

1,050 (monthly rent) x 12 (months per year) x 0.15 = 1,890

The maximum allowable broker's fee for all other cases <u>remains</u> one month's actual rent.

 For broker's fee payments by voucher, the Broker's Fee Voucher Form (W-147P) must be signed and dated by the broker and the applicant/participant and returned to the Office of Central Processing (OCP) at the address indicated on the form.

Payments by check and fees in excess of one month's rent

Per current procedure, the following types of requests must be referred to the Rental Assistance Unit (RAU) for approval:

Payment of broker's fees by check instead of voucher -

For these requests, the Broker's Statement for Fee Payment by Check Form (**W-147JJ**) must be signed and dated by the broker.

 Broker's fees that exceed one month's actual rent (including Advantage programs)

Upon RAU approval, the JOS/Worker must issue a two-party check payable to the broker using Special Grant Code **42** (Broker's and Finder's Fees) on the PA Single Issuance Form (**LDSS-3575**).

Effective Immediately

Related Item:

PD #07-28-ELI

Attachments:

■ Please use Print on Demand to obtain copies of forms. W-147M Landlord/Managing Agent's Statement

(Rev. 6/2/2008)

W-147P Broker's Fee Voucher (Rev. 6/2/2008)

W-147JJ Broker's Statement for Fee Payment by Check

Form W-147M Rev. 6/2/08



Landlord/Managing Agent's Statement

| Center/DHS Site: | Date: |
|--|---|
| Case Name: | |
| Case Number: | JOS Worker/DHS Worker: |
| Telephone Number: | |
| | |
| I am (or we are) the Landlord (Managing Agent)_ | |
| , | Landlord's/Managing Agent's Name |
| of premises located at: | ress Apt. No |
| Addre | ress Apt. No |
| Borough | State Zip Code |
| procurement of the above premises. I (or we) agree that I (or we) will not receive any process. | way associated with the Agency charging a broker's fee for the part of all of the Broker's fee directly or indirectly from the Brokethe premises without the services of the Broker listed below: |
| | |
| Address | Telephone Number |
| | nts is punishable as a Class A Misdemeanor pursuant to nt for filing to a public office or a public servant). |
| Signature of Landlord/Managing Agent | Landlord's/Managing Agent's Phone Number |
| المالحة المحمدا | /Managing Agent's Address |

Form W-147P (page 1) Rev. 6/2/08

Supervisor's Signature



| Job Center/DHS Site: | Date: | | | | |
|--|--|---------------------------------|-------------|------------|-----------------------|
| Case Name: | | | | | |
| İ | | Participant's Telephone Number: | | | |
| (Original to participan | Broker's Fee Vou | | tronic case | e record) | |
| The Human Resources Administration (H Assistance participant is otherwise eligible | | | | broker's | fee only if the Cash |
| • The Broker has verified that the actual rental unit has a current, effective certificate of occupancy issued by the New York City Department of Buildings. | | | | | |
| No change has been made in the occertificate of occupancy. | No change has been made in the occupancy or use of an existing apartment that is inconsistent with the last issued certificate of occupancy. | | | | |
| No dangerous or hazardous violations | are present on the premises | | | | |
| The Broker has a current broker's license in good standing. | | | | | |
| The Broker is not the owner, controlling | g person or an affiliate of the | owner of the | actual ren | tal unit. | |
| This voucher hereby authorizes located at: | portant Information f | Or Broker | | | Zip Code |
| to receive the sum of \$ | _ upon the actual physical p | oossession by | the above | e named p | articipants of the |
| premises known as: | | | | Apt | i. No: |
| Borou | ugh | | State | | Zip Code |
| This voucher is for services rendered as the | ne Broker of the above prem | ises. | | | |
| In no event is this amount to be greater participant is not responsible for any monitorial to the control of th | | | | s the enti | re broker's fee. The |
| This voucher shall be submitted by the E possession of the above premises by the p | | e of Central | Processin | g within 3 | 0 days after physical |
| Failure to provide true and accurate sta 175.30 (offering a false instrument for fi | | | | anor purs | uant to Penal Law § |
| JOS/DHS Worker's Signature | JOS/DHS Worker's Name (Pri | nt) | Tel | ephone Nun | nber |

Supervisor's Name (Print)

Telephone Number

| ave actually moved int | o the premises described abov | e and have possession of the r | leys. |
|-------------------------|-------------------------------|--|---|
| | | Date | |
| criteria listed above a | | | |
| Date | License Number | | |
| | nt: I (we) certify that the | nt: I (we) certify that the participant has taken posse criteria listed above at the time the participant took | ent: I (we) certify that the participant has taken possession of the above described pre- e criteria listed above at the time the participant took possession, and hereby reques |

If corporation, name of officer and corporate seal

For payment, mail this form signed by the Broker and participant to:

Office of Central Processing P.O. Box 02-9121 Brooklyn, New York 11202-9121



If corporation, name of officer and corporate seal



| Job Center/DHS Site: | Date: | | | | |
|---|--|--|--|--|--|
| Case Name: | Case Number: | | | | |
| JOS Worker/DHS Worker: | Participant's Telephone Number: | | | | |
| Broker's Statement for Fee Payment by Check (Original to participant, copy scanned and indexed into the electronic case record) | | | | | |
| if the Cash Assistance participant is otherwise eligible The Broker has verified that the actual rental issued by the New York City Department of Bu No change has been made in the occupancy the last issued Certificate of Occupancy. No dangerous or hazardous violations are presented by the Broker has a current broker's license in go The Broker is not the owner, controlling persor | unit has a current, effective Certificate of Occupancy illdings. or use of an existing apartment that is inconsistent with sent on the premises. | | | | |
| | Address Apartment Number | | | | |
| Borough State Zip Code This amount represents the entire broker's fee. The participant is not responsible for any monies in excess of the amount issued by NYCDSS. | | | | | |
| I (we), as the Broker of the above-named premises, certify that this rental apartment meets all of the criteria listed above and hereby request payment in the amount indicated above for services rendered. | | | | | |
| I (we) agree to promptly refund to the HRA the Broker's fee paid hereunder if the participant fails to move into the above-described premises or equivalent premises acceptable to the participant. | | | | | |
| Failure to provide true and accurate statements is punishable as a Class A Misdemeanor pursuant to Penal Law § 175.30 (offering a false instrument for filing to a public office or a public servant). | | | | | |
| Broker's Signature Date | License Number Telephone Number | | | | |