
DSS Policy Bulletin #2023-004

Date: February 6, 2023

DISTRIBUTION: ALL STAFF

TIME LIMITED ZIP-CODE BASED CITYFHEPS LANDLORD BONUS

Subtopic(s): CityFHEPS

■ INTRODUCTION

The NYC Department of Housing and Preservation & Development (HPD) has designated certain zip codes in NYC as expanded housing opportunity areas. Because rents tend to be higher in these zip codes, CityFHEPS is now offering a landlord bonus of one month's rent to landlords in these zip codes who accept a CityFHEPS voucher holder at their market rate rent. Stabilized rents already at or below the CityFHEPS maximum are not eligible for this bonus.

■ POLICY

CityFHEPS packages submitted for approval in one of the zip codes identified on the Time Limited Zip-Code Based CityFHEPS Landlord Bonus (**DSS-8u**) are eligible to receive a landlord bonus in the amount of one month's rent through June 30, 2023.

■ REQUIRED ACTION

Requesting the Landlord Bonus

The requesting program must select the request for the bonus on the coversheet (DSS-8h, DSS-8i, EIS-2b, or DSS-8m based on the requesting program) or in the Current system depending on how the package is submitted.

Department of Homeless Services (DHS) and Homebase Provider staff must select the "Landlord Bonus" checkbox on the CityFHEPS Packet Cover Sheet – Community (**DSS-8i**) to indicate that the landlord is requesting the bonus payment. The **DSS-8i** must be attached to all CityFHEPS packages that are submitted in Current or emailed to the Rental Assistance Program (RAP) apartment mailbox.

If the check request is submitted outside of Current, RAP must include the landlord bonus payment request on the check request form that is submitted to the Landlord Ombudsmen Service Unit (LOSU). If the check request is submitted through Current, RAP will process the bonus payment.

Processing the Landlord Bonus

When processing CityFHEPS approvals outside of Current, RAP staff must check the zip code of the submitted package against the **DSS-8u**. If the unit being approved is in one of those zip codes, RAP staff must include the landlord bonus on the check request submitted to LOSU.

If the check request includes the landlord bonus, LOSU staff must confirm that the unit is in one of the zip codes on the **DSS-8u** and if so, issue the landlord bonus (along with all other necessary payments). The landlord bonus must equal one month's rent and be issued using single issuance code **SA**.

If the request is made inside of Current, RAP must process the bonus check using single issuance code **SA**.

Effective Immediately

ATTACHMENTS:

DSS-8h	CityFHEPS Packet Cover Sheet - Shelter
DSS-8i	CityFHEPS Packet Cover Sheet – Community
DHS-8L	CityFHEPS Packet Transmittal from DHS
DSS-8m	CityFHEPS Packet Transmittal from APS
DSS-8u	Time Limited Zip-Code Based CityFHEPS Landlord Bonus
EIS-2b	CityFHEPS Packet Cover Sheet for EIS

RELATED ITEMS:

[DSS-PB-2023-003](#)

[DSS-PB-2021-009](#)



Department of Social Services

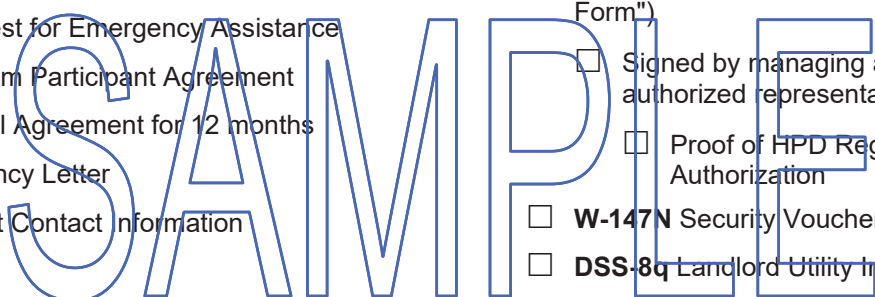
CityFHEPS Packet Cover Sheet – Shelter

Client's Information

Client's Name: _____ Social Security Number: _____
Agency Name: _____ Cash Assistance Case #: _____
Staff Contact: _____ Staff Phone #: _____
Staff e-Mail: _____
Program Analyst: _____ CARES ID: _____
Program Administrator: _____ Facility Code: _____

Did you include the following mandatory documents?

- DSS-7 or DSS-7b ("Shopping Letter")
- DSS-7a or DSS-7c ("Household Share Letter")
- Proof of last 30 days of Income (for everyone in the household 18+)
- W-137A Request for Emergency Assistance
- DSS-7p Program Participant Agreement
- Lease or Rental Agreement for 12 months
- Shelter Residency Letter
- DSS-8b Tenant Contact Information
- Landlord W9
- Proof of Apartment/Room Preclearance
- DSS-10a Apartment Review Checklist
- Deed/Proof of Ownership
- DSS-8f or DSS-8g ("Landlord Information Form")
- Signed by managing agent or other authorized representative? If checked,
- Proof of HPD Registration or Authorization
- W-147N Security Voucher
- DSS-8q Landlord Utility Information



Check the rental type and associated forms included. Also check which landlord incentives apply, if any:

- Room Rental?
 - DSS-8d Room Allocation Form
- Apartment/SRO Rental?
 - HRA-145 Unit Hold Incentive Voucher
 - Landlord Bonus (availability based on zip code)
 - CityFHEPS Rental Assistance Supplement
 - 1 month **OR** 3 months

If a Broker was used, did you include the following documents?

- HRA-121 Broker's Request for Enhanced Fee Payment by Check
- Broker License (if broker fee)

Comments: _____

SUPERVISORY REVIEW (Director of Social Services or higher)

Name

Title

Email Address

Telephone Number

Signature

Date

SAMPLE



**Department of
Social Services**

CityFHEPS Packet Cover Sheet - Community

Client's Information

Client's Name: _____

Social Security Number: _____ Cash Assistance Case #: _____

Agency Name: _____ Staff Contact: _____

Staff Phone #: _____ Staff e-Mail: _____

Did you include the following mandatory documents?

- | | |
|---|---|
| <input type="checkbox"/> DSS-7a or DSS-7c ("Household Share Letter") | <input type="checkbox"/> Landlord W9 |
| <input type="checkbox"/> DSS-8e CityFHEPS Verification of Eligibility | <input type="checkbox"/> Deed/Landlord Proof of Ownership |
| <input type="checkbox"/> DSS-7o or DSS-7q ("Application for CityFHEPS") | <input type="checkbox"/> DSS-8f or DSS-8g ("Landlord Information Form") |
| <input type="checkbox"/> Proof of last 30 days of Income (for everyone in the household 18+) | <input type="checkbox"/> Signed by managing agent or other authorized representative? If checked, |
| <input type="checkbox"/> W-137A Request for Emergency Assistance | <input type="checkbox"/> Proof of HPD Registration or Authorization |
| <input type="checkbox"/> DSS-7p Program Participant Agreement | <input type="checkbox"/> W-147N Security Voucher (new units only) |
| <input type="checkbox"/> Lease or Rental Agreement for 12 months | <input type="checkbox"/> DSS-8g Landlord Utility Information |
| <input type="checkbox"/> Proof of eligibility (veteran status, APS letter, eviction, transfer approval, vacate) | |
| <input type="checkbox"/> DSS-8b Tenant Contact Information | |



Is the household remaining in place or moving to a new unit?

- | | |
|--|---|
| <input type="checkbox"/> Remaining in Place | <input type="checkbox"/> New Unit |
| <input type="checkbox"/> Arrears Documents (court stipulation, rent breakdown, etc.) | <input type="checkbox"/> DSS-7 or DSS-7b ("Shopping Letter") |
| <input type="checkbox"/> Emergency Assistance to Needy Families (EAF) Agreement to Repay Excess Shelter Arrears (W-147KK) | <input type="checkbox"/> Proof of Apartment/Room Preclearance |
| <input type="checkbox"/> Emergency Safety Net Assistance (ESNA) Shelter Arrears Repayment Agreement (W-147H) | <input type="checkbox"/> DSS-10a Apartment Review Checklist |

Check the rental type and associated forms included. Also check which landlord incentives apply, if any:

- | | |
|---|--|
| <input type="checkbox"/> Room Rental? | <input type="checkbox"/> Apartment/SRO Rental? |
| <input type="checkbox"/> DSS-8d Room Allocation Form | <input type="checkbox"/> HRA-145 Unit Hold Incentive Voucher |
| | <input type="checkbox"/> Landlord Bonus (availability based on zip code) |
| | <input type="checkbox"/> CityFHEPS Rental Assistance Supplement |
| | <input type="checkbox"/> 1 month OR <input type="checkbox"/> 3 months |

Do any of the following situations apply?

HRA-146p Domestic Violence Action Form

Broker? If checked,

HRA-121 Broker's Request for
Enhanced Fee Payment by Check

Broker License (if broker fee)

Comments: _____

SAMPLE



Department of Social Services

DSS-8L (E) 01/31/2023 (page 1 of 2)

CityFHEPS Packet Transmittal from DHS

Date: _____

CA Case #: _____

To: RAP

From: _____
(OCR Staff Name)

Telephone #: _____

For: CityFHEPS Applicant

(Applicant Name)

(Social Security Number)

REQUESTING THE FOLLOWING:

CityFHEPS Rental Assistance Supplement?

- 1 month 3 months

Requesting Furniture? Yes No

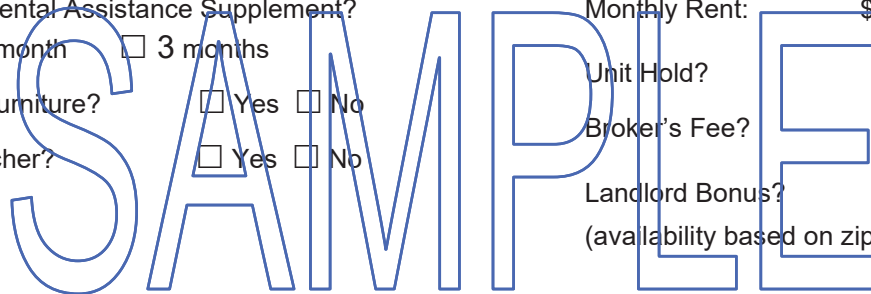
Security Voucher? Yes No

Monthly Rent: \$ _____

Unit Hold? Yes No

Broker's Fee? Yes No

Landlord Bonus? Yes No
(availability based on zip code)



DOCUMENTS ATTACHED:

- DSS-7 or DSS-7b** ("Shopping Letter")
- DSS-7a or DSS-7c** ("Household Share Letter")
- Proof of last 30 days of Income (for everyone in the household 18+)
- W-137A** Request for Emergency Assistance
- DSS-7p** Program Participant Agreement
- Lease or Rental Agreement for 12 months
- Shelter Residency Letter
- DSS-8b** Tenant Contact Information
- Landlord W9
- Proof of Apartment/Room Preclearance
- DSS-10a** Apartment Review Checklist
- Deed/Proof of Ownership

- DSS-8f or DSS-8g** ("Landlord Information Form")
- Signed by managing agent or other authorized representative? If checked,
 - Proof of HPD Registration or Authorization
- W-147N** Security Voucher
- HRA-121** Broker's Request for Enhanced Fee Payment by Check
- Broker License (if broker fee)
- DSS-8d** Room Allocation Form (Room Rental only)
- HRA-145** Unit Hold Incentive Voucher (Apartments/SROs Only)
- DSS-8q** Landlord Utility Information

(Turn page)

COMMENTS:

SAMPLE



Department of Social Services

DSS-8m (E) 01/18/2023 (page 1 of 2)

CityFHEPS Packet Transmittal from APS

To: RAP Date: _____
APS Staff Name: _____ Telephone: _____
CityFHEPS Applicant Name: _____
Social Security Number: _____ CA Case : _____

REQUESTING THE FOLLOWING:

- Request Type: To Move To Stay Requesting Furniture? Yes No
- Housing Type: Apartment SRO Room Security Voucher? Yes No
- CityFHEPS Rental Assistance Supplement? Unit Hold? Yes No
- 1 month OR 3 months Broker's Fee? Yes No
- Monthly Rent: \$ _____ Landlord Bonus? Yes No
- Arrears Amount: \$ _____ (availability based on zip code and is only for Apartment/SRO Rental)

DOCUMENTS ATTACHED:

Client's Documents

- DSS-8b Tenant Contact Information APS W-101 (Notice of Eligibility Determination Form)
- Other Documents (ID, Birth Certificate, Social Security Card) Proof of last 30 days of Income (for everyone in the household 18+)
- DSS-7p Program Participant Agreement HRA-146p Domestic Violence Action Form

CityFHEPS Forms

- DSS-8e (CityFHEPS Verification of Eligibility) W-137A Request for Emergency Assistance
- DSS-7o or DSS-7q ("Application for CityFHEPS") W-147H Shelter Arrears Repayment Agreement
- DSS-7 or DSS-7b ("Shopping Letter") Arrears Document (Landlord Breakdown)
- Proof of Apartment/Room Preclearance Court Documents (Stipulation, Eviction, Filing, Marshal's Notice)
- DSS-10a Apartment Review Checklist

Move Package (Landlord & Broker Forms)

- Lease or Rental Agreement for 12 months DSS-8d Room Allocation Form (Room Rental only)
- Landlord W9 W-147N Security Voucher
- Deed/Landlord Proof of Ownership HRA-145 Unit Hold
- DSS-8f or DSS-8g ("Landlord Information Form") HRA-121 Broker's Request for Enhanced Fee Payment by Check
- Signed by managing agent or other authorized representative? If checked, Proof of HPD Registration or Authorization Broker License (if broker fee)
- DSS-8q Landlord Utility Information

Time Limited Zip-Code Based CityFHEPS Landlord Bonus

HPD has designated certain zip codes in NYC as expanded housing opportunity zip codes. Because rents tend to be higher in these zip codes, CityFHEPS is now offering a landlord bonus of one month's rent to landlords who successfully lease a unit to a CityFHEPS voucher holder.

This bonus will be offered through 6/30/2023.

The bonus can be applied to moves in the following zip codes:

CityFHEPS Landlord Bonus Zip Codes	
Brooklyn	11204, 11209, 11211, 11214, 11215, 11217, 11218, 11219, 11220, 11222, 11223, 11224, 11228, 11229, 11230, 11231, 11232, 11234, 11238
Bronx	10461, 10462, 10463, 10464, 10465, 10471
Manhattan	10001, 10003, 10004, 10005, 10006, 10007, 10010, 10011, 10012, 10013, 10014, 10016, 10017, 10018, 10019, 10020, 10021, 10022, 10023, 10024, 10025, 10026, 10028, 10033, 10034, 10036, 10038, 10040, 10044, 10065, 10069, 10075, 10103, 10110, 10111, 10112, 10115, 10119, 10128, 10152, 10153, 10154, 10162, 10165, 10167, 10168, 10169, 10170, 10171, 10172, 10173, 10174, 10177, 10199, 10271, 10278, 10279, 10280, 10282
Queens	11004, 11005, 11103, 11104, 11105, 11109, 11351, 11354, 11355, 11356, 11357, 11358, 11359, 11360, 11361, 11362, 11363, 11364, 11365, 11366, 11367, 11373, 11374, 11375, 11377, 11378, 11379, 11411, 11412, 11413, 11414, 11415, 11422, 11425, 11426, 11427, 11432, 11694, 11697
Staten Island	10304, 10305, 10306, 10307, 10308, 10309, 10312, 13014



Department of Social Services

CityFHEPS Packet Cover Sheet for EIS

Client's Information

Client's Name: _____ Cash Assistance Case #: _____
Shelter Name: _____ Facility Code: _____
Staff Contact: _____ Staff Phone #: _____
Staff e-Mail: _____

Did you include the following mandatory documents?

- DSS-7 or DSS-7b ("Shopping Letter")
- DSS-7a or DSS-7c ("Household Share Letter")
- Proof of last 30 days of Income (for everyone in the household 18+)
- W-137A Request for Emergency Assistance
- EIS-1g Program Participant Agreement
- Lease or Agreement for 12 months
- DSS-8b Tenant Contact Information
- Shelter Residency Letter
- Landlord W9
- Deed/Proof of Ownership
- DSS-8f or DSS-8g ("Landlord Information Form")
- Signed by managing agent or other authorized representative? If checked,
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- W-147N Security Voucher
- HRA-146p Domestic Violence Action Form (if applicable)
- DSS-8q Landlord Utility Information



Check the rental type and associated forms included. Also check which landlord incentives apply, if any:

- Room Rental?
 - DSS-8d Room Allocation Form
- Apartment/SRO Rental?
 - HRA-145 Unit Hold Incentive Voucher (apartments only)
 - Landlord Bonus (availability based on zip code)
 - CityFHEPS Rental Assistance Supplement
 - 1 month OR 3 months

If a Broker was used, did you include the following documents?

- HRA-121 Broker's Request for Enhanced Fee Payment by Check
- Broker License (if broker fee)

Comments: _____

