Letter from Homeless Services Provider

[Use to omit address from card]

To IDNYC Program:

I write on behalf of _____ (Applicant) and his or her application for an IDNYC card. I affirm that I am an executive-level official (or designee thereof) at the organization named below, which is located within New York City; provides services to homeless individuals; and receives funding from the City of New York.

Please fill in the following information about your organization:

Name: _____

_____

Address City Zip Code

This is a [choose one] : □ New York City Agency □ Nonprofit Organization □ Religious Institution

I further affirm that the applicant has received services from this organization for the past 60 days; lacks a stable address; and may receive mail In Care Of the organization [**choose one**]:

□ at the address above, or □ at the address below:

Street: _____ City _____ Zip_____

Thank you,

_____ _____

Signature of Executive-level official or designee Print Name and Title

_____

Name, Telephone and Email of employee who can confirm the information in this letter

_ _ / _ _ / _ _ _ _

Date signed (mm/dd/yyyy)

* This letter must be submitted at an IDNYC Enrollment Center **no more than 14 days** after the date signed.

** A card lacking a street address, or bearing a Care Of address, may not be accepted as valid ID by the New York City Police Department or financial institutions.