



REQUEST FOR SECONDARY REVIEW

INSTRUCTIONS

If you believe that your application was denied in error and you wish to request a secondary review of your application, please complete the form below and submit it by mail to the following address:

IDNYC
P.O. Box 24866
Brooklyn, NY 11201
ATTN: Secondary Review

Please keep a copy of the denial letter and this request for your records.

Please do not submit any additional identity or residency documents (originals or copies) for this secondary review. However, you may submit documents supporting or clarifying those already submitted. If instead, you would like to submit a new application based on any new or alternate identity or residency documents, please reapply at an enrollment center.

REQUIRED INFORMATION

Applicant Name: _____

Date and Borough of Original Application:

Reason for Request:

I hereby request a secondary review of my application by the IDNYC Program. I understand that the decision of this secondary review will be final and based upon the original application and/or supporting documents in addition to the information provided above as well as any additional information appended to this request. However, additional identity and residency documents will not be considered as part of the secondary review process.

Signature

Printed Name

Date of Signature

The IDNYC Program shall respond to all requests for secondary review within 30 days of receipt of the request. In the event that the IDNYC Program does not respond within 30 days, then the determination under review shall be the agency's final decision on the application.