



To IDNYC Program,

I write on behalf of [Applicant's name] and their application for an IDNYC card. I confirm that the applicant has received services from this organization for the past 60 days, the applicant may use the organization's address for mailing purposes (a "Care-of Address"), and the applicant lacks a home address or is a survivor of violence and has security concerns about an address appearing on the IDNYC card.

Organization Name: \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ Zip Code: \_\_\_\_\_

As the signatory of this letter, I confirm that I am an executive-level official at the organization listed above. I confirm that my organization is located within New York City, serves homeless individuals or survivors of domestic violence, currently receives City funding, and is one of the following [check box]:

- Nonprofit Organization
- Religious Institution

Thank you,

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Title

\_\_/\_\_/\_\_\_\_\_  
Date (mm/dd/yyyy)

\_\_\_\_\_  
Telephone

\_\_\_\_\_  
Email Address

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

\*\*The IDNYC card will not include a home address for the cardholder but rather a "Care-of Address." A card lacking a home address may not be accepted as valid ID by the New York City Police Department or financial institutions.