



**The City of New York  
Department of Investigation**  
80 Maiden Lane, 17<sup>th</sup> Floor  
New York, NY 10038  
(212) 825-5911

## Supplemental Financial Background Investigation Questionnaire

You are required to complete this questionnaire (in addition to the Background Investigation Questionnaire or Supplemental Background Investigation Questionnaire) **only** if your appointing entity has determined that you meet the criteria for which it is permissible for the Department of Investigation (DOI) to review and report your consumer credit history (pursuant to NYC Administrative Code §§ 8-102 and 8-107; 47 Rules of the City of New York §§ 2-01 and 2-05).

Your Terms and Conditions of Appointment will not be approved unless you provide all information requested and cooperate fully with this background investigation. If you fail to do so, you may incur disciplinary action, including the termination of your employment or removal from your appointment.

Department of Investigation (DOI) background investigations are detailed and thorough; information you provide will be verified during the investigation. A false statement or intentional omission made in this questionnaire, or in connection with this background investigation, may result in the imposition of disciplinary penalties, including but not limited to termination of employment or removal from appointment, disqualification from future employment or appointment, and criminal prosecution.

This Supplemental Financial Background Investigation Questionnaire is not a public document and cannot be obtained through a Freedom of Information Act request. However, this questionnaire may be provided, upon request, for use in another government agency's background investigation, or for the purposes of administrative action (e.g., disciplinary proceedings) by your agency, the City's Office of Administrative Trials and Hearings, the Conflicts of Interest Board, or others.

**DOI recommends that you keep a copy of this completed questionnaire for your personal records, and for reference in completing any future DOI Financial Background Investigation Questionnaires.**

<b>I have read and I understand this information.</b>	<b>Initial and date:</b> _____
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<b>For DOI Use Only:</b>	
Candidate's Name _____	Phone Number _____
Investigator _____	Interview Date _____
Supervisor _____	Review Date _____

**DEPARTMENT OF INVESTIGATION  
SUPPLEMENTAL FINANCIAL BACKGROUND INVESTIGATION QUESTIONNAIRE**

**INSTRUCTIONS**

- This questionnaire must be typed, or completed in blue or black ink.
- Every question must be answered completely and accurately.
- Do not leave any question blank. If a question does not apply to you, indicate "N/A" (not applicable).
- If you need more space to answer a question, use the addendum provided on page 8 (make copies if needed). Check the box at the bottom of the page on which the question appears, and note in the addendum the question and page number.
- This questionnaire is an affidavit. Upon completion, it must be signed and sworn to before a Notary Public or Commissioner of Deeds.

I have read and I understand these instructions.

Initial and date: \_\_\_\_\_

**PERSONAL INFORMATION**

<b>1.</b>	<b>Full Name</b>				
	Last Name	First Name	Middle Name	Jr., II, etc.	
			<input type="checkbox"/> N/A		<input type="checkbox"/> N/A

<b>2.</b>	<b>Date of Birth</b>				<b>3.</b>	<b>Place of Birth</b>		
	Month	Day	Year		City	State	Country	

<b>Outstanding Judgments</b>						
<b>4.</b>	List all judgments entered against you or your spouse or domestic partner that are outstanding ( <b>except tax judgments and liens, which should be disclosed in Question 5</b> ). Include documentation with your background paperwork.				<input type="checkbox"/> N/A	
	Name of Creditor and Court Where Judgment Was Filed	Date of Judgment (Month/Year)	Garnishment Yes/No		Original Amount	Amount Outstanding
			<input type="checkbox"/> Yes	<input type="checkbox"/> No		
			<input type="checkbox"/> Yes	<input type="checkbox"/> No		

Check here if additional information is provided in the addendum.

**Tax Judgments and Liens**

5. List all tax judgments and/or liens entered against you or your spouse or domestic partner within the **past seven years, even if they have been satisfied.**

**Candidates undergoing a background investigation must satisfy all outstanding tax judgments and liens with the appropriate tax authority, either by making full payment or by entering into a payment agreement.**

Include documentation of your **full payment** with your background paperwork (e.g., receipt, bank statement, canceled check, certificate of release of federal tax lien, satisfaction of judgment), or a copy of your **current installment payment agreement** and documentation of your three most recent payments.

N/A

Name of Tax Authority	Name of Responsible Taxpayer	Date of Judgment (Month/Year)	Original Amount	Amount Outstanding	Date Satisfied (Month/Year)
					<input type="checkbox"/> Not satisfied
					<input type="checkbox"/> Not satisfied
					<input type="checkbox"/> Not satisfied
					<input type="checkbox"/> Not satisfied
					<input type="checkbox"/> Not satisfied

**Money Owed to Tax Authorities**

6. Provide details below if you or your spouse or domestic partner owes money (not including tax judgments or liens) to federal or state tax authorities.

**Include documentation (e.g., installment payment agreement) with your background paperwork.**

N/A

Name of Tax Authority	Name of Responsible Taxpayer	Tax Year	Amount Outstanding	Details of Most Recent Payment	Anticipated Date of Satisfaction
				Date	
				Amount	
				Date	
				Amount	

**Bankruptcies**

7. Provide details below if you or your spouse or domestic partner has filed a petition under any chapter of the bankruptcy code, or has been the subject of a bankruptcy or reorganization proceeding, within the past **five years**.

**Provide a copy of the bankruptcy discharge documents, including a list of creditors, with your background paperwork.**

N/A

Name of filer	Bankruptcy petition type <input type="checkbox"/> Chapter 7 <input type="checkbox"/> Chapter 11 <input type="checkbox"/> Chapter 13
Name of court	
Date filed (month/year)	Date discharged (month/year)
Total debt discharged	
Detailed explanation of the reason for filing for bankruptcy	

**Civil Litigation and Lawsuits**

<b>8.</b> If you have been involved as a plaintiff, defendant, or respondent in any civil litigation or lawsuit commenced within the past <b>five years</b> , provide details below.				<input type="checkbox"/> <b>N/A</b>
Title of Action and Date Commenced (Month/Year)	Status or Outcome of Litigation	Amount You Owed or Were Awarded	Date Paid (Month/Year)	
				<input type="checkbox"/> <b>N/A</b>
				<input type="checkbox"/> <b>N/A</b>
				<input type="checkbox"/> <b>N/A</b>

**Administrative Proceedings**

<b>9.</b> If you have been involved as a party to, or have been the subject of, an administrative proceeding (e.g., disciplinary proceeding, censure, Conflicts of Interest Board enforcement action) commenced within the past <b>five years</b> , provide details below. <b>Do not include any Equal Employment Opportunity or whistleblower matters you have reported.</b>				<input type="checkbox"/> <b>N/A</b>
Disposition (Month/Year)	Government Agency Involved	Fine or Penalty Imposed	Status of Fine or Penalty	
				<input type="checkbox"/> <b>N/A</b>
				<input type="checkbox"/> <b>N/A</b>
				<input type="checkbox"/> <b>N/A</b>

Check here if additional information is provided in the addendum.

**Debtor Employment/Business with the City of New York**

**10.** Provide details below if any person or entity who owes money to you or your spouse or domestic partner is **employed by the City of New York** (or any of its agencies) or **does business with the City of New York** (or any of its agencies).

**Doing business with the City** includes receiving funds from the City, having contracts with the City, providing materials or services to the City, having matters pending before the City, or holding any franchise, license, permit, or other privilege from the City.

**N/A**

Debtor's Full Name and Relationship to You	Debtor's City Agency or Nature of Business with the City	Debtor's Title/Position

**Financial Arrangements (Potential Conflicts of Interest)**

**11.** List any financial arrangements that may present a potential conflict of interest with your City employment.

**N/A**

Description of the Financial Arrangement	Name of Other Involved Party	Basis of Potential Conflict of Interest	Your Plan to Resolve the Potential Conflict of Interest (e.g., advice from COIB, resignation, divestiture, recusal)

**CERTIFICATION AND SIGNATURE**

**This Questionnaire must be signed and sworn to by you before a  
Notary Public or Commissioner of Deeds.**

I, \_\_\_\_\_, being duly sworn, state that I have read and I understand all of the questions and answers contained in the foregoing six (6) pages of this questionnaire and the \_\_\_\_\_ page(s) of the addendum that I have attached hereto; that I have supplied full and complete information in answer to each question herein to the best of my knowledge, information and belief; and that all information I have supplied is true.

I further understand that a false statement or intentional omission made in this report or in connection with this background investigation may result in the imposition of disciplinary penalties, including but not limited to termination of employment or removal from appointment, disqualification from future employment or appointment, and criminal prosecution.

\_\_\_\_\_  
Candidate's Signature

State of \_\_\_\_\_

County of \_\_\_\_\_

Subscribed and sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_\_

\_\_\_\_\_  
Notary Public or Commissioner of Deeds

## ADDENDUM

Question \_\_\_\_\_ Page \_\_\_\_\_

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Question \_\_\_\_\_ Page \_\_\_\_\_

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Last Name: \_\_\_\_\_ Last four digits of SSN: \_\_\_\_\_ Date: \_\_\_\_\_



## Supplemental Financial Background Investigation Questionnaire Document Checklist

Use this checklist to help you organize your background investigation paperwork prior to submitting it to DOI.

Include copies of the documents listed below only if they apply to you.

<input type="checkbox"/>	Documentation of outstanding judgments (Question 4)
<input type="checkbox"/>	Documentation of full payment of tax judgments and liens (e.g., receipt, bank statement, canceled check, certificate of release of federal tax lien, satisfaction of judgment) (Question 5)
<input type="checkbox"/>	Current installment payment agreement for outstanding tax judgments and liens, and documentation of your three most recent payments. (Question 5)
<input type="checkbox"/>	Documentation (e.g., installment payment agreement) of money owed to tax authorities (Question 6)
<input type="checkbox"/>	Bankruptcy discharge documents, including a list of creditors (Question 7)