

Client Contact Information and Language Update

HPD needs current contact information on file to communicate with you about your subsidy. Please use this form to update your contact information and/or language preference and submit it to HPD by using:

- **DTR Document Portal:** www.nyc.gov/dtrportal
- **Email:** DTRAI@hpd.nyc.gov

Contact Information

1. Name of the head of household: _____
2. Address of the assisted unit (include apartment number):

3. Can HPD email you? YES NO Email address: _____

4. List all current phone numbers that you would like HPD to use and mark the type:

_____ Cell Home Work Emergency
_____ Cell Home Work Emergency
_____ Cell Home Work Emergency
_____ Cell Home Work Emergency

Do you use a Power of Attorney (POA) or legal guardian to communicate with HPD? YES NO

Name: _____ Email: _____ Phone: _____

Language Preference

5. Can HPD communicate with you in English?
 Yes, written and spoken Yes, written only Yes, spoken only No
6. Do you need HPD to provide translation or interpretation, when available? Yes No

If yes, which language:

Español/Spanish Français/French Kreyòl Ayisyen/Haitian Creole
 Русский/ Russian Polski/ Polish বাংলা/ Bengali
 廣東話/ Cantonese 普通话/ Mandarin 한국어/ Korean
 Other: _____

Signature: _____ **Date:** _____