



*Letter from Domestic Violence Services Provider*

*[Use to omit address from card]*

To IDNYC Program,

I write on behalf of \_\_\_\_\_ (Applicant) and his/her application for an IDNYC card. I confirm that I am an executive-level official (or designee thereof) at the organization named below, which is located within New York City and provides services to survivors of domestic violence.

<p><b>Service Provider's Name [Please fill in below]:</b></p> <p>_____</p> <p>Address: _____ City: _____</p> <p>Zip Code: _____</p> <p>This is a: <input type="checkbox"/> <b>New York City Agency</b>      <input type="checkbox"/> <b>Nonprofit Organization</b>      <input type="checkbox"/> <b>Religious Institution</b></p>
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I further confirm that the applicant is a survivor of domestic violence; has lived in New York City for at least 15 days; and has security concerns about an address appearing on the IDNYC card.

Thank you,

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Print Name and Title

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

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

\* This letter must be submitted at an IDNYC Enrollment Center **no more than 30 days** after the date signed.

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