Letter from Domestic Violence Services Provider granting permission to use C/O address

To IDNYC Program,

I write on behalf of _____ (Applicant) and her/his 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; provides services to survivors of domestic violence; and currently receives funding from the City of New York.

Service Provider's Name [Please fill in below]:

_____

Address: _____ City:_____

Zip Code: _____

This is a: ☐ **New York City Agency** ☐ **Nonprofit Organization** ☐ **Religious Institution**

I further confirm that the applicant is a survivor of domestic violence who has received services from this organization for the past 60 days; has security concerns about an address appearing on the card; and **is permitted to receive mail In Care Of the organization** [**choose <u>one</u>**]:

☐ at the address above, or ☐ at the address below:

Street: _____ City _____

Zip_____

Thank you,

_____ _____

Signature of Executive-level official or designee Print Name and Title

_____

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

_ _ / _ _ / _ _ _ _

Date signed (mm/dd/yyyy)

* This letter must be submitted at an IDNYC Enrollment Center **no more than 14 days** after the date signed. ** A card lacking a street address, or bearing a Care Of address, may not be accepted as valid ID by the New York City Police Department or financial institutions.

IDNYC-12

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