

Department of Social Services

#### INVESTIGATION, REVENUE AND ENFORCEMENT ADMINISTRATION **BUREAU OF ELIGIBILITY VERIFICATION**

# NOTICE TO APPLICANT REFERRAL TO BUREAU OF ELIGIBILITY VERIFICATION

Job Center: Caseloa	ad:Date:
Case Type:	Suffix:
Case Name:	Case Number:
Reason For Office Visit	
Our review of your application will include an intervieus application. We may also need to visit your home. Enthey come to your home.	
A <b>MANDATORY</b> interview has been scheduled for:	Client Name
At:	Floor:
Date:	© Time:
For travel directions, please call the MTA at 7	718-330-1234 or visit <a href="http://www.mta.info">http://www.mta.info</a>

\*\*\* Please arrive ONLY at your scheduled time. \*\*\*

### At the Interview

The BEV Investigators will ask to look at some of your documents. They will use your documents to find out if you can get Cash Assistance. The documents they need to see are listed on pages 3-5. You must bring these documents to the interview.

The BEV Investigators also may contact other people and organizations to get information about your eligibility, residency, income, and resources. They will not share information about your case.

# Don't have documents we ask for?

If you cannot bring us these documents, we will look at the documents in your file before we make a decision on your case. You must comply with the BEV Review.

Conta	act Us
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Please call BEV at \_\_\_\_\_\_ ifyou cannot keep the BEV appointment. Please call before the appointment date.

# **Missed the Appointment**

If you miss this appointment, call your worker at the Job Center.

You must have a good reason for not keeping your appointment. You may be asked for proof of the reason. Listed below are **acceptable reasons** for not keeping your appointment.

Medical appointment
Court appointment
Child-related emergency
Death in the family
Unable to get that day off from work
Other emergencies

A medical or mental health condition or disability may make it hard for you to understand this
notice or to do what this notice is asking you to do. This kind of condition may make it hard for you to
get other services at HRA. <b>If this is true for you, we can help you.</b> Call us at You have a right to ask for this kind of help under the law.

### **Documents You Need to Show**

You must provide documents to verify your Identity, Social Security Number, and Residence.

Verify	Acceptable Documents	
Identity	One of the following: Valid Government Photo I.D.	Or Two of the following:
	Driver's license U.S. passport Naturalization certificate Hospital/Doctor's records Adoption papers	Statement from another person Birth/baptismal certificate Validated Social Security Number (SSN)
Social Security Number	One of the following: <ul><li>Social Security card</li><li>Official correspondence from SSA</li></ul>	1
Residence	One of the following: Statement from landlord/primary tenant Current rent receipt or lease Mortgage records Utility bill, Telephone bill	Or Two of the following: Statement from another person Current mail School records

You will have to give us proof if you have:

any of the resources or income listed in left column below.

not proved your citizenship status.

nealth insurance.

As proof, you need to give us one of the documents listed in the column to the right of that item.

Verify	Acceptable Documents
Resources	One of the following:
Bank Accounts: checking, savings, retirement (IRA and Keogh), credit union	
Stocks, bonds, certificates and mutual funds	Stock/bond certificate Statement from financial institution
Life insurance	Insurance policy Statement from insurance company
Burial trust or fund, burial plot, or funeral agreement	Burial agreement Burial plot deed Statement from funeral home

#### Verify

# **Acceptable Documents**

Income tax refund or Earned Income Tax Credit (EITC) Refund of EITC check Statement from tax office

Real estate other than residence

Statement from real estate broker

Broker's appraisal/estimate of current value by broker

Deed

Motor vehicle

Registration (older models)

Title of ownership

Appraisal of current value by dealer

Financing data

Lump sum payment

Statement from the source of payment Lump sum check

Other resources

Statement from household
Statement from nursing home
Household statement of current value
Sales slips
Insurance appraisal

**Earned Income** 

One of the following:

From employer

Current wage stubs and statements of tips
Pay envelopes

Contact with employer

On letterhead, rate of pay per hour, hours worked per week, first pay date, if

new and employer's phone number

From self-employment

Business records
Tax records

Records and related materials concerning self-employment earnings and

expenses

Income from rent or room/board

Current income tax return
Current contribution check
Statement from roomer, boarder, tenant

Income tax record

**Unearned Income** One of the following: Child Support Statement from Family Court Statement from person paying support Check stubs Official correspondence from the Child Support Enforcement Unit Unemployment Current award certificate Insurance Benefits Official correspondence with New York State Department of Labor (UIB) Current award certificate/letter **Social Security** benefits (including SSI) Current benefit check Official correspondence from SSA Veteran's benefits Veterans Administration official correspondence Current award certificate/letter Current benefit check Worker's Award certificate/letter Check stub Compensation Statement from school Education grants and loans Statement from bank Statement from agency administering grant/award letter Statement from bank or credit union Interest/dividends/royal ties Statement from broker/financial institution/agent Current award letter Private pension/annuity Current benefit check Official correspondence from source of income Contact with source of income Current contribution check Citizenship or One of the following: **Current Alien Status** Birth certificate Baptismal certificate/records Hospital records U.S. passport Military service records Naturalization certificate **USCIS** documentation Evidence of continuous U.S. residence since prior to 1/1/72 **Health Insurance** One of the following: Insurance policy/card Statement from provider of coverage

Medicare card
Separation or divorce agreement with court-ordered health coverage