



Rent Freeze Program Change Form

Instructions: Please use this form to notify the Department of Finance of a change in your household or select a new tenant representative. Mail the completed form with supporting documentation (if applicable) to:

NYC Department of Finance, Attn: Rent Freeze Program, P.O. Box 3179, Union, NJ 07083.

SECTION 1 – APPLICANT INFORMATION

Who is submitting this change request?

I am the SCRIE tenant | I am the DRIE tenant | I am a tenant representative | Other: _____

APPLICANT NAME:

APPLICANT PHONE:

DOCKET NUMBER:

TENANT ADDRESS: (Street Number and Name)

APT:

CITY:

STATE:

ZIP CODE:

SECTION 2 – REASON FOR CHANGE

Reason for submitting this form (check all that apply):

- The primary tenant has moved.** (If you check this box, please attach a statement with the date of the move. Your benefit will be terminated on the first day of the month following the move. If you wish to transfer your benefit to another rent-regulated apartment, do not submit this form. Submit an apartment benefit transfer application, available at www.nyc.gov/rentfreeze.)
- The primary tenant has vacated the apartment due to a fire or renovation.** (If you check this box, please attach a statement describing what happened, including the date. Your benefit will be suspended on the first day of the following month. You must notify the Department of Finance when you move back in.)
- The primary tenant is deceased or has moved permanently to a nursing home.** (If you check this box, please attach a statement with the date of the move. Your benefit will be terminated on the first day of the following month, unless you are remaining in the apartment and qualify to take over the benefit. To take over the benefit, do not submit this application. Instead, submit a benefit takeover application, available at www.nyc.gov/rentfreeze.)
- Request to discontinue Rent Freeze benefit.** (If you check this box, please attach a statement explaining why you wish to discontinue the benefit and the date on which you would like the termination to take effect.)
- The household has sustained a permanent drop in income of 20% or more** since the most recent application. (If you check this box, do not submit this application. Instead, submit a redetermination application, available at www.nyc.gov/rentfreeze.)
- New phone number or email address.** Please provide the updated information in section 1 of this form.
- New tenant representative.** Please provide the updated information in section 4 of this form.
- An additional household member has moved into the apartment** and should be added to the application submitted to the Department of Finance. (If you check this box, please complete section 3 of this form. In your next renewal application, you will need to provide the income of the new household member.)
- A household member has moved out of the apartment** and should be removed from the application submitted to the Department of Finance. (If you check this box, please complete section 3 of this form. In your next renewal application, you may be asked to provide documentation of the move.)
- OTHER.** Please attach details in a separate statement.

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SECTION 3 – HOUSEHOLD CHANGE

List any new household members who currently reside in your apartment.

NAME:	DOB:	SSN:	DATE MOVED IN:
NAME:	DOB:	SSN:	DATE MOVED IN:
NAME:	DOB:	SSN:	DATE MOVED IN:

List any household members who have moved out of your apartment since your last application.

NAME:	DATE MOVED OUT:
NAME:	DATE MOVED OUT:
NAME:	DATE MOVED OUT:

SECTION 4 – TENANT REPRESENTATIVE (Complete only if you would like to add a new representative.)

NAME	RELATIONSHIP	PHONE () —
STREET ADDRESS	CITY	STATE ZIP
EMAIL		

SECTION 5 – CERTIFICATION

I hereby affirm under the penalties provided by law that the statements within this application are true, correct, and complete to the best of my knowledge.

SIGNATURE OF APPLICANT	DATE
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MORE INFORMATION & HOW TO GET HELP

Requesting Applications: All applications are available at www.nyc.gov/rentfreeze. You may also request applications by calling 311 or visiting www.nyc.gov/311.

General Information and Assistance: To learn more about the Rent Freeze Program, visit www.nyc.gov/rentfreeze. You may also send us questions via www.nyc.gov/contactscie or www.nyc.gov/contactdrie, or call 311. We offer in-person assistance Monday through Friday, 8:30 a.m. to 4:30 p.m., at our Rent Freeze customer assistance center, located at 66 John Street, 3rd Floor, New York, NY 10038.

If due to a disability you need an accommodation in order to apply for and receive a service or participate in a program offered by the Department of Finance, please contact the Disability Service Facilitator at www.nyc.gov/contactdofeeo or by calling 311.