

## Residency Attestation

Case Number (If applicable): \_\_\_\_\_ Date: \_\_\_\_\_

**Please only complete this form if you are applying for child care assistance, and DO NOT have other proof of New York City residency:**

**Note:** You should not complete this form if you have other proof of New York City residency (such as IDNYC, Utility Bill, Section 8 Award Letter, Driver's License, Rent Receipt, or NYCHA Certificate).

### Section A: Parent/Caretaker Information – Please print clearly in ink

Parent/Caretaker Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_

Home Address: \_\_\_\_\_ Apt: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone Number: \_\_\_\_\_ Work Phone Number: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Email: \_\_\_\_\_

### Section B: Primary Resident/Tenant Information – Please print clearly in ink

Primary Resident/Tenant Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_

Phone: \_\_\_\_\_

### Section C: Consents and Signature

#### To be completed by the Parent/Caretaker:

I, \_\_\_\_\_, the parent/caretaker of (Insert child's name) \_\_\_\_\_ hereby affirm that

I am residing with \_\_\_\_\_ at the following  
(Insert name of Primary Leaseholder/tenant)  
address (Insert address) \_\_\_\_\_.

I agree to cooperate fully with any efforts to confirm the information I have given. I will provide more information if asked.

In the event that my residency changes, I agree to notify ACS immediately and present new proof of address.

Parent /Caretaker Signature: \_\_\_\_\_