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 | INFORMATIONAL LETTER |  
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TRANSMITTAL: 94 INF-38

TO: Commissioners of  
 Social Services

DIVISION: Economic  
 Security

DATE: August 3, 1994

SUBJECT: Revision of "Shelter Verification" Form (DSS-3668)

SUGGESTED

DISTRIBUTION: Income Maintenance Directors  
 Food Stamp Directors  
 Medical Assistance Directors  
 WMS Coordinators  
 Forms Coordinators  
 Staff Development Coordinators

CONTACT PERSON: Bob Gullie  
 IM/WMS Program Operations, at 1-800-343-8859,  
 extension 4-6501 (AV1060)

ATTACHMENTS: DSS-3668 (Rev. 5/94): "Shelter Verification" - not  
 available on-line

FILING REFERENCES

Previous ADMs/INFs	Releases Cancelled	Dept. Regs.	Soc. Serv. Law & Other Legal Ref.	Manual Ref.	Misc. Ref.
93 ADM-29 93 INF-2	93 INF-2			<u>PASB</u> IV-C-3 XIII-D-all iv-31.4 and 31.5 <u>FSSB</u> V-E-1.1 thru 1.4 v-9.4-9.5 v-9.9	

The purpose of this release is to introduce the revised DSS-3668: "Shelter Verification" form , commonly known as the "Landlord Clearance".

The DSS-3668 is designed to be mailed directly to a landlord: (1) at the time of application, (2) when a change in residence occurs or (3) at recertification. Its purpose is to verify residency and shelter expenses where appropriate and, when included in the case record, provide documentation for these eligibility factors.

The use of the DSS-3668 is optional, but its routine use is strongly urged and many local districts have utilized this form since 1985. As a result of their experience with it, local districts and State staff have suggested enhancements which have been incorporated into this version. This latest revision of the DSS-3668 is dated 5/94 (copy attached) and will be available for use by the local districts in September 1994. Below is a detailed summary of the changes from the 11/92 version which were incorporated into this revision.

I. FACE

A. The revision date was changed to 5/94.

B. SECTION A. SHELTER DESCRIPTION -

In an effort to clarify eligibility for the "standard utility allowance" (roomer vs. non roomer), the following new question and checkbox was added directly below the "ARE MEALS INCLUDED?" question:

IS RENT FOR ROOM ONLY AND <u>NO</u> PART IS USED FOR HEAT OR UTILITIES?	
+++	+++
+++ YES	+++ NO

II. REVERSE PAGE

A. The revision date was changed to 5/94.

B. SECTION B. SHELTER EXPENSES -

The question that asks about heating was changed to include stove, along with furnace, as a source of heat:

DOES THE FURNACE/STOVE HEAT:

C. SECTION C. HOUSEHOLD COMPOSITION -

1. The following new question with checkboxes was added directly below the question, "WAS A LEASE SIGNED?":

DOES LANDLORD LIVE IN THE SAME APARTMENT/RENTAL UNIT AS THE TENANT(S)?	
+++	+++
+++ YES	+++ NO

2. The box heading at the bottom of the page, above the LANDLORD/AGENT SIGNATURE box, was changed to read:

NAME(S) OF LANDLORD(S) (Please print):

Delivery of the revised DSS-3668 to the Albany Warehouse is expected in September 1994. Your district will not automatically receive copies. Requests for the DSS-3668 should be submitted on Form WMS-47 (Rev. 9/89): "WMS Order Form" and should be sent to:

New York State Department of Social Services  
Welfare Management System  
P.O. Box 1990  
Albany, New York 12201

Attention: Office of Systems Development (OSD)

You may continue to use the previous (11/92) version of this form until your stock is depleted or until December 1994, whichever occurs first. Reorders will be filled with the 5/94 version.

Questions concerning ordering forms should be directed to the Office of Systems Development by calling 1-800-343-8859, extension 6-6223.

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Oscar R. Best, Jr.  
Deputy Commissioner  
Division of Economic Security