



**NEW YORK STATE  
OFFICE OF TEMPORARY AND DISABILITY  
ASSISTANCE**

40 NORTH PEARL STREET  
ALBANY, NY 12243-0001

**David A. Paterson**  
*Governor*

**Informational Letter**

**Section 1**

<b>Transmittal:</b>	10-INF-16
<b>To:</b>	Local District Commissioners
<b>Issuing Division/Office:</b>	Center for Employment and Economic Supports
<b>Date:</b>	August 3, 2010
<b>Subject:</b>	Revised LDSS-3152: "Action Taken on Your FS Benefit Case"
<b>Suggested Distribution:</b>	Food Stamp Benefits Staff Temporary Assistance Staff MA Directors CAP Coordinators Employment Coordinators WMS Coordinators Staff Development Coordinators
<b>Contact Person(s):</b>	Policy Questions: Food Stamp Bureau @ 1-800-343-8859, ext. 473-1469 Forms Questions: Kelly Whitney @ 1-800-343-8859, ext. 3-7991
<b>Attachments:</b>	<a href="#">Attachment 1: LDSS-3152</a> <a href="#">Attachment 2: LDSS-3152 NYC</a>
<b>Attachment Available On – Line:</b>	<input checked="" type="checkbox"/>

**Filing References**

<b>Previous ADMs/INFs</b>	<b>Releases Cancelled</b>	<b>Dept. Regs.</b>	<b>Soc. Serv. Law &amp; Other Legal Ref.</b>	<b>Manual Ref.</b>	<b>Misc. Ref.</b>

## Section 2

### I. Purpose

The purpose of this INF is to notify local districts about changes to the English and Spanish versions of the LDSS-3152 and LDSS-3152 NYC, “*Action Taken on Your FS Benefit Case*”.

### II. Background

The LDSS-3152 is issued to households who have received an expedited issuance of food stamp benefits but for which submission of the verification necessary to establish ongoing eligibility has been pended. The notice language is being revised to clarify that the change in FS benefits referred to in the notice also includes a determination of ineligibility.

### III. Program Implications

The language under #5 of the “Approved” section of the notice formerly read as follows: “*If your Food Stamp Benefits change due to this proof, you will not be notified.*”

It has been changed to read: “*If your Food Stamp Benefits change or your household is determined ineligible for Food Stamp Benefits due to this proof, you will not be notified.*”

### IV. Forms Ordering Information

- The revised English version of the LDSS-3152: “*Action Taken on Your FS Benefit Case*” and the Spanish version of the LDSS-3152-SP (Spanish) are State printed. However, local districts are being asked to use up the current stock of this form.
- The above referenced documents have also been posted on the OTDA Intranet website at [http://otda.state.nyenet/ldss\\_eforms/default.htm](http://otda.state.nyenet/ldss_eforms/default.htm) and are available for downloading by local districts for reproduction locally.
- Any future written requests for master camera ready copies of the English and “other than English” versions of the documents, should be submitted on OTDA-876: “*Request for Forms or Publications*”, and should be sent to:

Office of Temporary and Disability Assistance  
BMS Document Services and Operational Support  
PO Box 1990  
Albany, NY 12201

- Questions concerning ordering forms should be directed to BMS Document Services at 1-800-343-8859, ext. 4-9522.

- Master camera ready copies of the documents may also be ordered through Outlook. To order a master camera ready copy you must obtain an OTDA-876 electronically by going to the OTDA Intranet Website at <http://otda.state.nyenet/> then to Division of Operations and Program Support page, then to PSQI E-forms page (this page contains the electronic OTDA-876).
- For those who do not have Outlook but who have Internet access for sending and receiving e-mail, the Internet e-mail address is: [gg7359@dfa.state.ny.us](mailto:gg7359@dfa.state.ny.us) . For a complete list of available forms, please refer to the OTDA Intranet site: [http://otda.state.nyenet/ldss\\_eforms/default.htm](http://otda.state.nyenet/ldss_eforms/default.htm) .

**Issued By**

**Name: Russell Sykes**

**Title: Deputy Commissioner**

**Division/Office: Center for Employment and Economic Supports**