

	OFFICE USE ONLY:		APPROVED		DENIED		PENDING
--	------------------	--	----------	--	--------	--	---------



# RENT FREEZE PROGRAM APPLICATION

## **DRIE: Disability Rent Increase Exemption**

#### **WHO CAN APPLY**

You may qualify for DRIE if you are at least 18 years old, the total combined income of all household members is \$50,000 or less, and you spend more than one-third of your monthly household income on rent.

You must live in the apartment and be named on the lease or rental agreement. The apartment must be a rent-controlled, rent-regulated, rent-stabilized, Mitchell-Lama, limited dividend, redevelopment company, Section 213, or Housing Development Fund Corporation apartment. Certain Battery Park City apartments may also be eligible.

You must have been awarded one of the following: Supplemental Security Income (SSI); Social Security Disability Insurance (SSDI); U.S. Department of Veterans Affairs disability pension or compensation; or disability-related Medicaid, if you have received either SSI or SSDI in the past.

#### **HOW TO APPLY**

- Online: Visit www.nyc.gov/nyctap.
- Mail: We encourage you to apply online. If you must apply by mail, complete this application and send it to: NYC Department of Finance, Rent Freeze Program, PO Box 3179, Union, NJ 07083

### **HOW TO GET HELP**

If you need help, call 311 or send us a message by visiting www.nyc.gov/contactdrie.

SECTION 1: APPLICANT AND HOUSEHOLD					
SELECT ONE:					
I am not currently receiving Rent Freeze benefits. (Initial application.)					
I am renewing my existing Rent Freeze benefits. Docket # (if you have it):					
Are you the only person living in your apartment?  Yes  No					
NAME OF APPLICANT			DATE		
DATE OF BIRTH		SOCIAL SECURITY	NUMBER* (IF AVAIL	ABLE)	
STREET ADDRESS				APT.	
CITY		STATE		ZIP	
EMAIL ADDRESS		TELEPHONE NUMBER ( ) —			
If you retired in the last year, please provide your retirement date:					
If anyone else lives in the apartment, complete the following information. Attach an additional sheet if necessary.					
NAME	RELATIONS	HIP TO APPLICANT	DATE OF BIRTH	SOCIAL SECURITY NUMBER	

NAME	RELATIONSHIP TO	APPLICANT	DATE OF BIRTH	SOCIAL SECURITY NUMBER		
10.002	TIZZ II TORIOTIII TO	7.1.1.2.07.1111	57.112 OF 5111111	COOME CECONITY NOMEEN		
Has anyone in your household ever served, or are Please select any that apply:  Self Spouse/Partner Child C	they currently serving, in Other (write in)					
SECTION 2: TENANT REPRESENTATIVE (OPT	TONAL)					
You can designate a representative to receive copi but recommended.	ies of the notices you red	eive from the	Rent Freeze Progra	am. This is optional,		
NAME	REL	ATIONSHIP TO	APPLICANT			
ORGANIZATION	TELI	TELEPHONE NUMBER  ( ) —				
STREET ADDRESS			AF	PT.		
СПУ	STA	Ē	ZI	Р		
EMAIL ADDRESS						
SECTION 3: CERTIFICATION						
Please read carefully and sign the cer	tification below. Yo	ır applicati	ion is not compl	ete if you do not sign.		
I hereby certify under penalties provided by law that provided is true and complete.	t I currently reside at the	address shov	vn in this applicatior	and that the information		
I understand and agree that if I fail to disclose all inc						
I may be held responsible to repay the City the full a I understand that my income is subject to verification	•		improperly, plus any	r interest charges.		
PRINT NAME OF APPLICANT	SIGNATURE OF APPLICANT DATE		DATE			
	SIGNATURE OF POWER OF ATTORNEY OR COURT-APPOINTED DATE GUARDIAN, IF ANY		ED DATE			

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.

<sup>\*</sup>You must provide your Social Security or ITIN number, if you have such a number, in order to apply for the Rent Freeze Program. We are asking for this information to make sure that our records are accurate, and that you have submitted accurate information. Our right to require this information is described in Section 11-102.1 of the Administrative Code.

#### **SECTION 4: REQUIRED DOCUMENTS**

Submit copies of the following for yourself and every other member of the household. (We will contact you if we need additional information to process your application.) Please note that you do not need to submit this page, only the information requested below.

- 1. Proof of your age, such as a driver's license or other government-issued photo ID.
- 2. <u>Proof of income</u>: Your federal or state income tax return from last year, with any schedules and 1099 forms, including 1099-R forms. (If you were in the Rent Freeze Program prior to July 1, 2024, you also have the option to provide copies of all of your individual sources of income. To learn more, visit www.nyc.gov/rentfreeze. Click on the "Other Forms" tab at the top of the page, then click on "Income Worksheet." You can provide copies of all sources of income listed in the worksheet.)
- 3. Proof of disability: Your Social Security Disability Insurance (SSDI); Supplemental Security Income (SSI); disability pension; disability compensation benefits provided by the United States Department of Veterans Affairs; certain disability pension or disability compensation benefits provided by the United States Postal Service or those previously eligible by virtue of receiving disability benefits under the Supplemental Security Income program or the Social Security Disability program and currently receiving medical assistance benefits based upon determination of disability as provided in Section 366 of the Social Services Law.
- 4. <u>Power of attorney, if applicable</u>: If someone else has signed on behalf of the applicant, documentation for a power of attorney or guardianship is required.
- 5. <u>Proof of rent</u>, per the table below. (Identify the type of apartment you live in, and provide the required documents listed to the right. To see documentation examples, visit www.nyc.gov/rentfreeze and click on the "Other Forms" tab at the top of the page, then click on "Rent Freeze Application Documentation Guide.")

If you live in a:	Submit a copy of:
Rent-stabilized apartment	<ul> <li>If you are not currently receiving Rent Freeze benefits: Your current and prior lease or rental agreement.</li> <li>If you are renewing your current Rent Freeze benefits: Your current lease or rental agreement.</li> </ul>
Rent-controlled apartment	<ul> <li>If you are not currently receiving Rent Freeze benefits: Your current and prior Notice of Maximum Base Rent (DHCR Form RN-26 or RN26-S).</li> <li>If you are renewing your current Rent Freeze benefits: Your current and prior Notice of Maximum Base Rent (DHCR Form RN-26 or RN26-S).</li> </ul>
Rent-regulated hotel / single room occupancy (SRO)	<ul> <li>A letter from management or owner indicating current and prior rent amounts.</li> <li>If you are not currently receiving Rent Freeze benefits: Division of Housing and Community Renewal (DHCR) annual apartment registration for current and prior year.</li> </ul>
Mitchell-Lama, Limited Dividend, Redevelopment, Housing Development Fund Corporation (HDFC) Cooperative, Section 213 Cooperative	<ul> <li>Rent history printout or letter from your management office specifying the date of your last rent increase and the amount you paid before and after the increase. If this is your first rent increase, specify the date you moved into your apartment.</li> <li>Affidavit of household income for the calendar year immediately preceding the date you are filing this application, if applicable.</li> </ul>
Former Mitchell-Lama	Your signed regulatory agreement with the landlord reflecting established Rent Guidelines Board increases for the lifetime of the tenancy.
Eligible Battery Park City property	Submit your contractual agreement with the Battery Park City Authority and the lease, sublease, or regulatory agreement with the landlord.

#### **Additional documents:**

- Please provide copies of any orders for Major Capital Improvements (MCIs) or Rent Reduction that you have received from your landlord.
- If you submitted income information for a household member on a prior application and that person no longer lives in the apartment, please provide proof of relocation, such as their new lease, new government-issued ID, or death certificate.