

BIENNIAL AGENCY REPORT

**INSTRUCTIONS**

The Identifying Information Law requires City agencies to submit comprehensive biennial agency reports related to their collection, retention, and disclosure of identifying information and their privacy protection practices.

To complete the 2024 biennial agency report:

- Review Form 2s ([APO Designation of Collection and Disclosures as “Routine”](#)) made since the 2022 compliance cycle;
- Review Form 5s ([Agency Privacy Officer Approval of Collections and Disclosures on a “Non-Routine” Basis](#)) made since the 2022 compliance cycle;
- Use Forms 2 & 5 to complete [Worksheet 1](#) for all new and existing **collections** between 2022-2024;
- Use Forms 2 & 5 to complete [Worksheet 2](#) for all new and existing **disclosures** between 2022-2024.
- Complete the Biennial Agency Workbook;
- Submit the biennial agency report by **July 31, 2024**.

Submit the biennial agency report to:

- Mayor at [MOReports@cityhall.nyc.gov](mailto:MOReports@cityhall.nyc.gov)
- City Council Speaker at [reports@council.nyc.gov](mailto:reports@council.nyc.gov)
- Chief Privacy Officer and the Citywide Privacy Protection Committee at [ojp@oti.nyc.gov](mailto:ojp@oti.nyc.gov)
- Department of Records and Information Services (DORIS) online submission portal at <https://a860-gpp.nyc.gov>

**THIS REPORT IS PUBLIC. PREPARERS SHOULD CONSULT AGENCY COUNSEL OR THE CHIEF PRIVACY OFFICER TO ENSURE THE RESPONSES ARE PROVIDED ACCORDING TO APPLICABLE LAW AND CITY POLICY.**

**VERSION CONTROL**

<b>Version</b>	<b>Description of Change</b>	<b>Approver</b>	<b>Date</b>
4.0	New design for ease of use and technological enhancements, and miscellaneous clarifying revisions.	Michael Fitzpatrick Chief Privacy Officer, City of New York	April 2024
3.0	Updated completion date; miscellaneous clarifying revisions.	Aaron Friedman Principal Senior Counsel Office of Information Privacy	April 2022
2.0	Updated completion date; miscellaneous clarifying revisions.	Laura Negrón Chief Privacy Officer, City of New York	April 2020
1.0	First Version	Laura Negrón Chief Privacy Officer, City of New York	April 2018

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**BIENNIAL AGENCY REPORT  
(Due on or before July 31, 2024)**

1. Agency: Department of Veteran Services
  
2. APO Contact Details
  - a. Name: Glenda Y. Villareal
  - b. Title: Deputy Commissioner and General Counsel
  - c. Email: gvillareal@veterans.nyc.gov
  - d. Telephone: 6468919101

**COLLECTIONS**

3. How many collections does the agency have to describe?  
9
  
4. **COLLECTIONS.** Upload worksheet 1.



*- Proceed to the next page -*

5. For all **collections**, select the types of identifying information collected (check all that apply). See [Citywide Privacy Protection Policies and Protocols § 3.1](#).

<input checked="" type="checkbox"/> Name <input checked="" type="checkbox"/> Social security number (full or last 4 digits)* <input type="checkbox"/> Taxpayer ID number (full or last 4 digits)*	<b><u>Work-Related Information</u></b> <input checked="" type="checkbox"/> Employer information <input checked="" type="checkbox"/> Employment address
<b><u>Biometric Information</u></b> <input type="checkbox"/> Fingerprints <input type="checkbox"/> Photographs <input type="checkbox"/> Palm and handprints* <input type="checkbox"/> Retina and iris patterns* <input type="checkbox"/> Facial geometry* <input type="checkbox"/> Gait or movement patterns* <input type="checkbox"/> Voiceprints* <input type="checkbox"/> DNA sequences* <input type="checkbox"/> Height <input type="checkbox"/> Weight	<b><u>Government Program Information</u></b> <input checked="" type="checkbox"/> Any scheduled appointments with any employee, contractor, or subcontractor <input checked="" type="checkbox"/> Any scheduled court appearances <input checked="" type="checkbox"/> Eligibility for or receipt of public assistance or City services <input checked="" type="checkbox"/> Income tax information <input type="checkbox"/> Motor vehicle information
<b><u>Contact Information</u></b> <input checked="" type="checkbox"/> Current and/or previous home address <input checked="" type="checkbox"/> Email address <input checked="" type="checkbox"/> Phone number	<b><u>Law Enforcement Information</u></b> <input checked="" type="checkbox"/> Arrest record or criminal conviction <input type="checkbox"/> Date and/or time of release from custody of ACS, DOCS, or NYPD <input type="checkbox"/> Information obtained from any surveillance system operated by, for the benefit of, or at the direction of the NYPD
<b><u>Demographic Information</u></b> <input checked="" type="checkbox"/> Country of origin <input checked="" type="checkbox"/> Date of birth* <input checked="" type="checkbox"/> Gender identity <input checked="" type="checkbox"/> Languages spoken <input checked="" type="checkbox"/> Marital or partnership status <input checked="" type="checkbox"/> Nationality <input checked="" type="checkbox"/> Race <input checked="" type="checkbox"/> Religion <input type="checkbox"/> Sexual orientation	<b><u>Technology-Related Information</u></b> <input checked="" type="checkbox"/> Device identifier including media access control (MAC) address or Internet mobile equipment identity (IMEI)* <input checked="" type="checkbox"/> GPS-based location obtained or derived from a device that can be used to track or locate an individual* <input checked="" type="checkbox"/> Internet protocol (IP) address* <input type="checkbox"/> Social media account information
<b><u>Status information</u></b> <input checked="" type="checkbox"/> Citizenship or immigration status <input checked="" type="checkbox"/> Employment status <input type="checkbox"/> Status as a victim of domestic violence or sexual assault <input type="checkbox"/> Status as crime victim or witness	
<b><u>Other Types of Identifying Information</u></b> (list below):  	
<p>*Type of identifying information designated by the CPO (see <a href="#">CPO Policies &amp; Protocols, §3.1.1</a>).</p>	

**DISCLOSURES**

6. How many disclosures does the agency have to describe?

11

7. **DISCLOSURES.** Upload worksheet 2.



*- Proceed to the next page -*

8. For all **disclosures**, select the types of identifying information disclosed (check all that apply).  
See [Citywide Privacy Protection Policies and Protocols § 3.1](#).

<input checked="" type="checkbox"/> Name <input checked="" type="checkbox"/> Social security number (full or last 4 digits)* <input type="checkbox"/> Taxpayer ID number (full or last 4 digits)*	<b><u>Work-Related Information</u></b> <input checked="" type="checkbox"/> Employer information <input checked="" type="checkbox"/> Employment address
<b><u>Biometric Information</u></b> <input type="checkbox"/> Fingerprints <input type="checkbox"/> Photographs <input type="checkbox"/> Palm and handprints* <input type="checkbox"/> Retina and iris patterns* <input type="checkbox"/> Facial geometry* <input type="checkbox"/> Gait or movement patterns* <input type="checkbox"/> Voiceprints* <input type="checkbox"/> DNA sequences* <input type="checkbox"/> Height <input type="checkbox"/> Weight	<b><u>Government Program Information</u></b> <input checked="" type="checkbox"/> Any scheduled appointments with any employee, contractor, or subcontractor <input checked="" type="checkbox"/> Any scheduled court appearances <input checked="" type="checkbox"/> Eligibility for or receipt of public assistance or City services <input checked="" type="checkbox"/> Income tax information <input type="checkbox"/> Motor vehicle information
<b><u>Contact Information</u></b> <input checked="" type="checkbox"/> Current and/or previous home address <input checked="" type="checkbox"/> Email address <input checked="" type="checkbox"/> Phone number	<b><u>Law Enforcement Information</u></b> <input checked="" type="checkbox"/> Arrest record or criminal conviction <input type="checkbox"/> Date and/or time of release from custody of ACS, DOCS, or NYPD <input type="checkbox"/> Information obtained from any surveillance system operated by, for the benefit of, or at the direction of the NYPD
<b><u>Demographic Information</u></b> <input checked="" type="checkbox"/> Country of origin <input checked="" type="checkbox"/> Date of birth* <input checked="" type="checkbox"/> Gender identity <input checked="" type="checkbox"/> Languages spoken <input checked="" type="checkbox"/> Marital or partnership status <input checked="" type="checkbox"/> Nationality <input checked="" type="checkbox"/> Race <input checked="" type="checkbox"/> Religion <input type="checkbox"/> Sexual orientation	<b><u>Technology-Related Information</u></b> <input checked="" type="checkbox"/> Device identifier including media access control (MAC) address or Internet mobile equipment identity (IMEI)* <input checked="" type="checkbox"/> GPS-based location obtained or derived from a device that can be used to track or locate an individual* <input checked="" type="checkbox"/> Internet protocol (IP) address* <input type="checkbox"/> Social media account information
<b><u>Status information</u></b> <input checked="" type="checkbox"/> Citizenship or immigration status <input checked="" type="checkbox"/> Employment status <input type="checkbox"/> Status as a victim of domestic violence or sexual assault <input type="checkbox"/> Status as crime victim or witness	
<b><u>Other Types of Identifying Information</u></b> (list below): State Government ID   Service Dates   Military ID   Military Discharge Type   Veterans ID   Disability (yes/no)   Ethn	
*Type of identifying information designated by the CPO (see <a href="#">CPO Policies &amp; Protocols, §3.1.1</a> ).	

9. Separate from the Citywide Privacy Protection Policies and Protocols, what are the agency's policies regarding requests for disclosures from other City agencies, local public authorities or local public benefit corporations, and third parties? Please **summarize or upload a copy of the policy**. See *N.Y.C. Admin. Code § 23-1205(a)(1)(c)(1)*.
10. Which divisions of employees within the agency make disclosures of identifying information following the approval of the privacy officer? See *§ N.Y.C Admin. Code § 23-1205(a)(1)(c)(4)*.
11. Which categories of employees within the agency make disclosures of identifying information following the approval of the privacy officer? See *§ N.Y.C Admin. Code § 23-1205(a)(1)(c)(4)*.
12. Do any of the agency's policies address **access** to identifying information by employees, contractors, and subcontractors? See *§ N.Y.C. Admin Code § 23-1205(a)(4)*.
- Yes – **GO TO QUESTION 13**
- No – **GO TO QUESTION 16**
13. Do these policies state that **access** to identifying information must be necessary for the employees, contractors, and subcontractors to perform their duties? See *N.Y.C. Admin Code § 23-1205(a)(4)*.
- Yes – **GO TO QUESTION 14**
- No – **GO TO QUESTION 16**
14. Are these policies implemented so that **access** is limited to the greatest extent possible, but also furthers the purpose or mission of the agency?
- Yes – **GO TO QUESTION 15**
- No – **GO TO QUESTION 16**



15. Describe how **access** is limited to the greatest extent possible while furthering the purpose or mission of the agency.

16. **Summarize or upload** the agency's current policies for handling **proposals for disclosures to other** City agencies, local public authorities, or local public benefit corporations, and third parties. *See N.Y.C Admin Code § 23-1205(a)(1)(c)(2).*

17. **Summarize or upload** the agency's current policies regarding the classification of **disclosures** as necessitated by the existence of **exigent circumstances or as routine**. *See N.Y.C Admin Code § 23-1205(a)(1)(c)(3).*

18. Since 2022, has the agency **considered or implemented**, where applicable, policies that minimize the collection, retention, and disclosure of identifying information to the greatest extent possible while furthering the purpose or mission of the agency? *See N.Y.C Admin Code § 23-1205(a)(3).*

Yes – **GO TO QUESTION 19**

No – **GO TO QUESTION 20**

19. Summarize the policies that the agency has **considered or implemented** regarding data minimization for the collection, retention, and disclosure of identifying information. *See N.Y.C Admin Code § 23-1205(a)(4).*

20. Summarize the agency's use of agreements for any use or disclosure of identifying information. *See N.Y.C Admin Code § 23-1205 (a)(1)(d).*
21. Since 2022, describe the impact of the Identifying Information Law and any other local, state, or federal laws upon your agency's practices in relation to the collection, retention, and disclosure of identifying information (i.e., if such practices would differ in the absence of these laws). The impact can be positive or negative. *See N.Y.C Admin Code § 23-1205(a)(2).*
22. Describe how the current privacy policies and protocols issued by the Chief Privacy Officer, or the guidance issued by the Citywide Privacy Protection Committee affected your agency's practices in relation to the collection, retention, and disclosure of identifying information. The effects can be positive or negative. *See N.Y.C Admin Code § 23-1205(a)(2).*

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**APPROVAL SIGNATURE FOR AGENCY REPORT**

**PREPARER OF AGENCY REPORT**

Name: Glenda Y. Villareal  
Title: Deputy Commissioner and General Counsel  
Email: gvillareal@veterans.nyc.gov  
Phone: 6468919101

**ELECTRONIC SIGNATURE OF AGENCY HEAD OR DESIGNEE REQUIRED BELOW**

Name: James Hendon  
Title: Commissioner  
Email: jhendon@veterans.nyc.gov  
Phone: 646-483-0783

Signature: *James Hendon*  
James Hendon (Jul 18, 2024 13:12 EDT)

Date: 07/18/2024

Describe the following types of collections. Note, you may have multiple collections of the same type.

COLLECTIONS				
	Type of Collection	Describe the Specific Activity	Classification	Describe the agency purpose or mission served by this Collection.
1	Human Resources and other Personnel Matters	Collect data of job candidates and employees	Pre-approved as routine	Agency Administration
2	Legal Matters or Proceeding	Collect data of prior or current personnel	Approved by the APO on a case-by-case basis	Respond to legal matters as needed
3	Client or Customer Service	Collect data of veterans, or families of veterans for referrals, direct services, and for other public entities such as the VA, DOD, HRA, NYCHA, DSS, DHS	Pre-approved as routine	Utilize information to refer clients to service providers, provide direct services, and apply for benefits with other agencies
4	Social Services	Collect data of veterans, or families of veterans for referrals, direct services, and for other public entities such as the VA, DOD, HRA, NYCHA, DSS, DHS	Pre-approved as routine	Utilize information to refer clients to service providers, provide direct services, and apply for benefits with other agencies
5	Housing	Collect data of veterans, or families of veterans for referrals, direct services, and for other public entities such as the VA, DOD, HRA, NYCHA, DSS, DHS	Pre-approved as routine	Utilize information to refer clients to service providers, provide direct services, and apply for benefits with other agencies
6	Incident Management	Collect data of individuals involved in workplace incidents	Approved by the APO on a case-by-case basis	Agency Administration.
7	Strategic Initiatives	Collect contact information of veterans in NYC through MOUs with other city agencies or public entities.	Approved by the APO on a case-by-case basis	Utilize information to disseminate information to veterans across the City about

				DVS services, benefits, programs and partnerships.
8	Finance	Collect employee data for personnel transactions	Pre-approved as routine	Utilize information for employee personnel transactions with OMB.
9	Technology	Collect Device identifier including media access control MAC address or Internet mobile equipment identity (IMEI); and GPS-based location obtained or derived from a device that can be used to track or locate an individual	Pre-approved as routine	Agency administration and compliance with OTI protocols.
10	Choose an item.		Choose an item.	
11	Choose an item.		Choose an item.	
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13	Choose an item.		Choose an item.	
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21	Choose an item.		Choose an item.	
22	Choose an item.		Choose an item.	

Describe the following types of disclosures. *Note, you may have multiple disclosures of the same type.*

DISCLOSURES					
	<i>Type of Disclosure</i>	<i>Describe the Specific Activity</i>	<i>Classification</i>	<i>Describe the agency purpose or mission served by this Disclosure.</i>	<i>Was this disclosure made pursuant to an external request?</i>
1	Human Resources and other Personnel Matters	Disclose employee data to NYCAPS, DCAS, FISA, OPA	Pre-approved as routine	Agency Administration	Yes
2	Legal Matters or Proceeding	Disclose personnel data in response to litigation or legal matters	Approved by the APO on a case-by-case basis	Agency response to legal matters	Yes
3	Client or Customer Service	Disclose data of veteran or their families for referrals to service providers.	Pre-approved as routine	Perform intakes, referrals and application of benefits of constituents	Yes
4	Social Services	Disclose data of veteran or their families for referrals to service providers.	Pre-approved as routine	Perform intakes, referrals, application of benefits, and housing placements of constituents	Yes
5	Housing	Disclose data of veteran or their families for referrals to service providers.	Pre-approved as routine	Perform intakes, referrals, application of benefits, and housing placements of constituents	Yes
6	Incident Management	Disclose data of individuals involved in workplace incidents to authorities or law enforcement	Approved by the APO on a case-by-case basis	Agency administration	No

7	Strategic Initiatives	Disclose contact information of veterans to other City agencies or public entities through MOUs with them.	Approved by the APO on a case-by-case basis	Disseminate information to veterans and their families about DVS services and veteran benefits.	No
8	Finance	Disclose employee data for personnel transactions	Pre-approved as routine	Collect employee data for personnel transactions with OMB	Yes
9	Response to a Request or Demand	Disclose certain data, e.g. name, DOB and DOD of veterans pursuant to FOIL requests	Approved by the APO on a case-by-case basis	Compliance with FOIL laws.	Yes
10	Procurement	Disclose veteran data to vendors to identify demographics of veterans, such as council district data.	Approved by the APO on a case-by-case basis	Disseminate information to veterans and their families about DVS services and veteran benefits.	No
11	Technology	Collect Device identifier including media access control MAC address or Internet mobile equipment identity (IMEI); and GPS-based location obtained or derived from a device that can be used to track or locate an individual	Pre-approved as routine	Agency administration and compliance with OTI protocols.	Yes

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	<i>Type of Disclosure</i>	<i>Describe the Specific Activity</i>	<i>Classification</i>	<i>Describe the agency purpose or mission served by this Disclosure.</i>	<i>Was this disclosure made pursuant to an external request?</i>
25	Choose an item.	[free text]	Choose an item.	[free text]	Choose an item.
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	<i>Type of Disclosure</i>	<i>Describe the Specific Activity</i>	<i>Classification</i>	<i>Describe the agency purpose or mission served by this Disclosure.</i>	<i>Was this disclosure made pursuant to an external request?</i>
52	Choose an item.	[free text]	Choose an item.	[free text]	Choose an item.
53	Choose an item.		Choose an item.		Choose an item.
54	Choose an item.		Choose an item.		Choose an item.
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78	Choose an item.		Choose an item.		Choose an item.
	<i>Type of Disclosure</i>	<i>Describe the Specific Activity</i>	<i>Classification</i>	<i>Describe the agency purpose or mission served by this Disclosure.</i>	<i>Was this disclosure made pursuant to an external request?</i>
79	Choose an item.	[free text]	Choose an item.	[free text]	Choose an item.
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81	Choose an item.		Choose an item.		Choose an item.
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98	Choose an item.		Choose an item.		Choose an item.
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100	Choose an item.		Choose an item.		Choose an item.

*Please add additional rows, if needed*

For each **disclosure**, select the type of entity **and** provide the name of the entity that received the identifying information.

	<i>Type of Entity</i>	<i>Name of Entity</i>
1	Choose an item.	[free text]
2	Federal Agency	
3	Choose an item.	
4	Choose an item.	
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	<i>Type of Entity</i>	<i>Name of Entity</i>
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	<i>Type of Entity</i>	<i>Name of Entity</i>
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	<i>Type of Entity</i>	<i>Name of Entity</i>
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*Please add additional rows, if needed*

**OPTIONAL QUESTION:** Using the table below, describe any proposals for disclosures of identifying information that your agency declined to approve.

	<i>Type of Entity that Requested the Identifying Information</i>	<i>Name of the Entity</i>	<i>Reason for the Request</i>	<i>Description of Agency's Rationale for Rejection</i>
1	Choose an item.	[free text]	[free text]	[free text]
2	Choose an item.			
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4	Choose an item.			
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7	Choose an item.			
8	Choose an item.			
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10	Choose an item.			
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22	Choose an item.			
23	Choose an item.			
24	Choose an item.			
25	Choose an item.			



	<i>Type of Entity that Requested the Identifying Information</i>	<i>Name of the Entity</i>	<i>Reason for the Request</i>	<i>Description of Agency's Rationale for Rejection</i>
26	Choose an item.	[free text]	[free text]	[free text]
27	Choose an item.			
28	Choose an item.			
29	Choose an item.			
30	Choose an item.			
31	Choose an item.			
32	Choose an item.			
33	Choose an item.			
34	Choose an item.			
35	Choose an item.			
36	Choose an item.			
37	Choose an item.			
38	Choose an item.			
39	Choose an item.			
40	Choose an item.			
41	Choose an item.			
42	Choose an item.			
43	Choose an item.			
44	Choose an item.			
45	Choose an item.			
46	Choose an item.			
47	Choose an item.			
48	Choose an item.			
49	Choose an item.			
50	Choose an item.			
51	Choose an item.			
52	Choose an item.			
53	Choose an item.			

	<i>Type of Entity that Requested the Identifying Information</i>	<i>Name of the Entity</i>	<i>Reason for the Request</i>	<i>Description of Agency's Rationale for Rejection</i>
54	Choose an item.	[free text]	[free text]	[free text]
55	Choose an item.			
56	Choose an item.			
57	Choose an item.			
58	Choose an item.			
59	Choose an item.			
60	Choose an item.			
61	Choose an item.			
62	Choose an item.			
63	Choose an item.			
64	Choose an item.			
65	Choose an item.			
66	Choose an item.			
67	Choose an item.			
68	Choose an item.			
69	Choose an item.			
70	Choose an item.			
71	Choose an item.			
72	Choose an item.			
73	Choose an item.			
74	Choose an item.			
75	Choose an item.			
76	Choose an item.			
77	Choose an item.			
78	Choose an item.			
79	Choose an item.			
80	Choose an item.			
81	Choose an item.			

	<i>Type of Entity that Requested the Identifying Information</i>	<i>Name of the Entity</i>	<i>Reason for the Request</i>	<i>Description of Agency's Rationale for Rejection</i>
82	Choose an item.	[free text]	[free text]	[free text]
83	Choose an item.			
84	Choose an item.			
85	Choose an item.			
86	Choose an item.			
87	Choose an item.			
88	Choose an item.			
89	Choose an item.			
90	Choose an item.			
91	Choose an item.			
92	Choose an item.			
93	Choose an item.			
94	Choose an item.			
95	Choose an item.			
96	Choose an item.			
97	Choose an item.			
98	Choose an item.			
99	Choose an item.			
100	Choose an item.			

*Please add additional rows, if needed*