**NYC OTI**
**Information Privacy**

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
- City Council Speaker at reports@council.nyc.gov
- Chief Privacy Officer and the Citywide Privacy Protection Committee at oip@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**

| Version | Description of Change | Approver | Date |
|---|---|---|---|
| 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 Sanitation

2. APO Contact Details

   a. Name:   Ellen Cooper

   b. Title:    Agency Privacy Officer/Senior Counsel

   c. Email:   ecooper@dsny.nyc.gov

   d. Telephone:  646-885-4989

**COLLECTIONS**

3. How many collections does the agency have to describe?

   3

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.

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

| DISCLOSURES |
| --- |

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

   2

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.

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

9.  <u>Separate from the Citywide Privacy Protection Policies and Protocols</u>, 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:    Ellen Cooper

Title:    Agency Privacy Officer/Senior Counsel

Email:    ecooper@dsny.nyc.gov

Phone:    646-885-4989

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

Name:    Robert Orlin

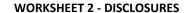Title:    Deputy Commissioner

Email:    rorlin@dsny.nyc.gov

Phone:    (646) 885-5006

Signature:    *Robert Orlin*                Date: 10/18/2024
Robert Orlin (Oct 18, 2024 07:59 EDT)

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

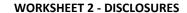| | Type of Disclosure | Describe the Specific Activity | Classification | Describe the agency purpose or mission served by this Disclosure. | Was this disclosure made pursuant to an external request? |
|---|---|---|---|---|---|
| | | | **DISCLOSURES** | | |
| 1 | Response to a Request or Demand | Responding to subpoenas/FOIL requests | Pre-approved as routine | DSNY may share personal identifying information pursuant to Freedom of Information law requests or in response to a subpoena or properly executed employment records request. | Yes |
| 2 | Office Administration | Interagency Record Sharing | Pre-approved as routine | DSNY may share personal identifying information with other city agencies. Typically, such information is shared pursuant to an information sharing agreement. | No |
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| | *Type of Disclosure* | *Describe the Specific Activity* | *Classification* | *Describe the agency purpose or mission served by this Disclosure.* | *Was this disclosure made pursuant to an external request?* |
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| | Type of Disclosure | Describe the Specific Activity | Classification | Describe the agency purpose or mission served by this Disclosure. | Was this disclosure made pursuant to an external request? |
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| | *Type of Disclosure* | *Describe the Specific Activity* | *Classification* | *Describe the agency purpose or mission served by this Disclosure.* | *Was this disclosure made pursuant to an external request?* |
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| | Type of Disclosure | Describe the Specific Activity | Classification | Describe the agency purpose or mission served by this Disclosure. | Was this disclosure made pursuant to an external request? |
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| | *Type of Disclosure* | *Describe the Specific Activity* | *Classification* | *Describe the agency purpose or mission served by this Disclosure.* | *Was this disclosure made pursuant to an external request?* |
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*Please add additional rows, if needed*

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

| | *Type of Entity* | *Name of Entity* |
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| 1 | Federal Agency | [free text] |
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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.

|    | Type of Entity that Requested the Identifying Information | Name of the Entity | Reason for the Request | Description of Agency's Rationale for Rejection |
|----|----------------------------------------------------------|--------------------|------------------------|-------------------------------------------------|
| 1  | Choose an item. | [free text] | [free text] | [free text] |
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| | Type of Entity that Requested the Identifying Information | Name of the Entity | Reason for the Request | Description of Agency's Rationale for Rejection |
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| 26 | Choose an item. | [free text] | [free text] | [free text] |
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| | Type of Entity that Requested the Identifying Information | Name of the Entity | Reason for the Request | Description of Agency's Rationale for Rejection |
|---|---|---|---|---|
| 54 | Choose an item. | [free text] | [free text] | [free text] |
| 55 | Choose an item. | | | |
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| 81 | Choose an item. | | | |

| | Type of Entity that Requested the Identifying Information | Name of the Entity | Reason for the Request | Description of Agency's Rationale for Rejection |
|---|---|---|---|---|
| 82 | Choose an item. | [free text] | [free text] | [free text] |
| 83 | Choose an item. | | | |
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| 100 | Choose an item. | | | |

*Please add additional rows, if needed*

**NYC OTI Information Privacy**

**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 | Office Administration | Operations Collections | Pre-approved as routine | DSNY collects certain information (namely, employee names) as a tracking method for the forms it uses to ensure that its core agency functions are properly completed. DSNY collects identifying information to administer agency programs and to ensure garbage and recycling removal street cleaning and snow and ice removal are properly completed. |
| 2 | Public Safety and Health | Enforcement Collections | Pre-approved as routine | DSNY collects information from the public in order to enforce its laws and rules. Namely, DSNY may collect names, addresses and motor vehicle information. |
| 3 | Office Administration | Personnel Collections | Pre-approved as routine | DSNY collects identifying information in order to process new hires or appoint personnel to certain positions. DSNY further collects identifying information for timekeeping and identification purposes. |
| 4 | Choose an item. | | Choose an item. | |

| | Type of Collection | Describe the Specific Activity | Classification | Describe the agency purpose or mission served by this Collection. |
|----|----|----|----|----|
| 5 | Choose an item. | | Choose an item. | |
| 6 | Choose an item. | | Choose an item. | |
| 7 | Choose an item. | | Choose an item. | |
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| 24 | Choose an item. | | Choose an item. | |
| | *Type of Collection* | *Describe the Specific Activity* | *Classification* | *Describe the agency purpose or mission served by this Collection.* |
| 25 | Choose an item. | [free text] | Choose an item. | [free text] |
| 26 | Choose an item. | | Choose an item. | |
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| 51 | Choose an item. | | Choose an item. | |
| | *Type of Collection* | *Describe the Specific Activity* | *Classification* | *Describe the agency purpose or mission served by this Collection.* |
| 52 | Choose an item. | [free text] | Choose an item. | [free text] |
| 53 | Choose an item. | | Choose an item. | |
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| 78 | Choose an item. | | Choose an item. | |
| | *Type of Collection* | *Describe the Specific Activity* | *Classification* | *Describe the agency purpose or mission served by this Collection.* |
| 79 | Choose an item. | [free text] | Choose an item. | [free text] |
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*Please add additional rows, if needed*