

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 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

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

Page Intentionally Blank

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

1. Agency: Department of Consumer and Worker Protection

2. APO Contact Details
 - a. Name: Cynthia Stallard
 - b. Title: Associate General Counsel
 - c. Email: cstallard@dcwp.nyc.gov
 - d. Telephone: 212-436-0156

COLLECTIONS

3. How many collections does the agency have to describe?
92

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 checked="" type="checkbox"/> Taxpayer ID number (full or last 4 digits)*	<u>Work-Related Information</u> <input checked="" type="checkbox"/> Employer information <input checked="" type="checkbox"/> Employment address
<u>Biometric Information</u> <input type="checkbox"/> Fingerprints <input checked="" 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 checked="" type="checkbox"/> Height <input checked="" type="checkbox"/> Weight	<u>Government Program Information</u> <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 checked="" type="checkbox"/> Motor vehicle information
<u>Contact Information</u> <input checked="" type="checkbox"/> Current and/or previous home address <input checked="" type="checkbox"/> Email address <input checked="" type="checkbox"/> Phone number	<u>Law Enforcement Information</u> <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 checked="" type="checkbox"/> Information obtained from any surveillance system operated by, for the benefit of, or at the direction of the NYPD
<u>Demographic Information</u> <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	<u>Technology-Related Information</u> <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 checked="" type="checkbox"/> Social media account information
<u>Status information</u> <input checked="" type="checkbox"/> Citizenship or immigration status <input checked="" type="checkbox"/> Employment status <input checked="" type="checkbox"/> Status as a victim of domestic violence or sexual assault <input checked="" type="checkbox"/> Status as crime victim or witness	
<u>Other Types of Identifying Information</u> (list below): 	
<p>*Type of identifying information designated by the CPO (see CPO Policies & Protocols, §3.1.1).</p>	

DISCLOSURES

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

77

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 checked="" type="checkbox"/> Taxpayer ID number (full or last 4 digits)*	<u>Work-Related Information</u> <input checked="" type="checkbox"/> Employer information <input checked="" type="checkbox"/> Employment address
<u>Biometric Information</u> <input type="checkbox"/> Fingerprints <input checked="" 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 checked="" type="checkbox"/> Height <input checked="" type="checkbox"/> Weight	<u>Government Program Information</u> <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 checked="" type="checkbox"/> Motor vehicle information
<u>Contact Information</u> <input checked="" type="checkbox"/> Current and/or previous home address <input checked="" type="checkbox"/> Email address <input checked="" type="checkbox"/> Phone number	<u>Law Enforcement Information</u> <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 checked="" type="checkbox"/> Information obtained from any surveillance system operated by, for the benefit of, or at the direction of the NYPD
<u>Demographic Information</u> <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	<u>Technology-Related Information</u> <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 checked="" type="checkbox"/> Social media account information
<u>Status information</u> <input checked="" type="checkbox"/> Citizenship or immigration status <input checked="" type="checkbox"/> Employment status <input checked="" type="checkbox"/> Status as a victim of domestic violence or sexual assault <input checked="" type="checkbox"/> Status as crime victim or witness	
<u>Other Types of Identifying Information</u> (list below): Other identifying information disclosed during the work of various divisions to further DCWP's mission.	
*Type of identifying information designated by the CPO (see CPO Policies & Protocols, §3.1.1).	

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).*

- Proceed to the next page -

APPROVAL SIGNATURE FOR AGENCY REPORT

PREPARER OF AGENCY REPORT

Name: Cynthia Stallard
Title: Associate General Counsel
Email: cstallard@dcwp.nyc.gov
Phone: 212-436-0156

ELECTRONIC SIGNATURE OF AGENCY HEAD OR DESIGNEE REQUIRED BELOW

Name: Michael Tiger
Title: General Counsel
Email: mtiger@dcwp.nyc.gov
Phone: 212-436-0175

Signature: *Michael Tiger*
Michael Tiger (Jul 31, 2024 09:14 EDT)

Date: 07/31/2024

Worksheet has been sent separately due to upload being too large.

Worksheet has been sent separately due to upload being too large.