

## 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 [oip@oti.nyc.gov](mailto: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: Rent Guidelines Board
  
2. APO Contact Details
  - a. Name: Andrew McLaughlin
  - b. Title: Executive Director
  - c. Email: amclaughlin@rgb.nyc.gov
  - d. Telephone: 212-669-7482

**COLLECTIONS**

3. How many collections does the agency have to describe?  
5
  
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 type="checkbox"/> Employer information <input 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 type="checkbox"/> Any scheduled appointments with any employee, contractor, or subcontractor <input type="checkbox"/> Any scheduled court appearances <input type="checkbox"/> Eligibility for or receipt of public assistance or City services <input 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 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 type="checkbox"/> Gender identity <input type="checkbox"/> Languages spoken <input checked="" type="checkbox"/> Marital or partnership status <input type="checkbox"/> Nationality <input type="checkbox"/> Race <input type="checkbox"/> Religion <input type="checkbox"/> Sexual orientation	<b><u>Technology-Related Information</u></b> <input type="checkbox"/> Device identifier including media access control (MAC) address or Internet mobile equipment identity (IMEI)* <input type="checkbox"/> GPS-based location obtained or derived from a device that can be used to track or locate an individual* <input 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):  	
*Type of identifying information designated by the CPO (see <a href="#">CPO Policies &amp; Protocols, §3.1.1</a> ).	

**DISCLOSURES**

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

6

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



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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 type="checkbox"/> Name <input 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 type="checkbox"/> Employer information <input 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 type="checkbox"/> Any scheduled appointments with any employee, contractor, or subcontractor <input type="checkbox"/> Any scheduled court appearances <input type="checkbox"/> Eligibility for or receipt of public assistance or City services <input type="checkbox"/> Income tax information <input type="checkbox"/> Motor vehicle information
<b><u>Contact Information</u></b> <input type="checkbox"/> Current and/or previous home address <input type="checkbox"/> Email address <input type="checkbox"/> Phone number	<b><u>Law Enforcement Information</u></b> <input 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 type="checkbox"/> Country of origin <input type="checkbox"/> Date of birth* <input type="checkbox"/> Gender identity <input type="checkbox"/> Languages spoken <input type="checkbox"/> Marital or partnership status <input type="checkbox"/> Nationality <input type="checkbox"/> Race <input type="checkbox"/> Religion <input type="checkbox"/> Sexual orientation	<b><u>Technology-Related Information</u></b> <input type="checkbox"/> Device identifier including media access control (MAC) address or Internet mobile equipment identity (IMEI)* <input type="checkbox"/> GPS-based location obtained or derived from a device that can be used to track or locate an individual* <input type="checkbox"/> Internet protocol (IP) address* <input type="checkbox"/> Social media account information
<b><u>Status information</u></b> <input type="checkbox"/> Citizenship or immigration status <input 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):  	
*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: Andrew McLaughlin

Title: Executive Director

Email: amclaughlin@rgb.nyc.gov

Phone: 212-669-2934

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

Name: Nestor Davidson

Title: Chair

Email: ndavidson@law.fordham.edu

Phone: 303-746-6310

Signature:   
Nestor Davidson (Jul 30, 2024 14:34 EDT)

Date: 07/30/2024

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	Research	A survey to collect data from owners of rent stabilized units regarding costs for insurance, non-union labor and management fees.	Pre-approved as routine	Used to help the board members to set lease adjustments for rent stabilized units in NYC.
2	Research	A survey of lenders that finance mortgages for rent stabilized properties regarding financing availability and terms, underwriting criteria, and non-performing loans and foreclosures.	Pre-approved as routine	Used to help the board members to set lease adjustments for rent stabilized units in NYC.
3	None of the above	Collections of names for those speaking at public hearings	Pre-approved as routine	Speakers are required to register to speak at RGB public hearings. Hearings are required by the Rent Stabilization Law and the City Charter.
4	Human Resources and other Personnel Matters	Collection of employee personal information	Approved by the APO on a case-by-case basis	Used for payroll and employee benefits
5	Client or Customer Service	Requests for submissions	Pre-approved as routine	Submission for comments on proposed lease guidelines as required by the Rent Stabilization Law and the City Charter.
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	<i>Type of Collection</i>	<i>Describe the Specific Activity</i>	<i>Classification</i>	<i>Describe the agency purpose or mission served by this Collection.</i>
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	<i>Type of Collection</i>	<i>Describe the Specific Activity</i>	<i>Classification</i>	<i>Describe the agency purpose or mission served by this Collection.</i>
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	<i>Type of Collection</i>	<i>Describe the Specific Activity</i>	<i>Classification</i>	<i>Describe the agency purpose or mission served by this Collection.</i>
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*Please add additional rows, if needed*



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

DISCLOSURES					
	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?
1	Office Administration	Daily Correspondence - Disclosure of employees names and work contact information.	Pre-approved as routine	To allow correspondence between members of the board and staff as well as other government agencies and the general public.	Yes
2	Office Administration	Scheduling of Meetings – Disclosure of employees names and work contact information	Pre-approved as routine	To allow for the scheduling of Board meetings, meetings with government agencies and the general public in order to fulfill the RGB's mandate.	Yes
3	Office Administration	General Administrative Matters - Disclosure of employees names and work contact information	Pre-approved as routine	To run the day-to-day operations such as answering general housing questions from the public, notifying the public of the Board's meetings and purchasing supplies for the office	Yes
4	Human Resources and other Personnel Matters	Personnel benefits and payroll information	Approved by the APO on a case-by-case basis	Collection and disclosure of employees contact information, home address, gender,	Yes

				employment status and date of birth in order to provide employee benefits and process payroll.	
5	Human Resources and other Personnel Matters	Disclosure of Employee SSN for Payroll and Benefit Processing	Approved by the APO on a case-by-case basis	Disclosure of Social Security Numbers are approved by the executive director or RGB chair on a case-by-case basis. In general SSNs are disclosed to entities for the purposes of payroll and employee benefits.	Yes
6	None of the above	Disclosure of the names of speakers at public hearings	Pre-approved as routine	Names are made public via live video stream and meeting transcripts	No

*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.

	Type of Entity	Name of Entity
1	Healthcare Organization	EmblemHealth – (health insurance)
2	Other Private Sector Company	Benefit Consulting Group (401k)
3	Other Private Sector Company	Standard Security Insurance (life and PFL insurance)
4	Other Private Sector Company	Berkshire Insurance (disability insurance)
5	Other Private Sector Company	Guardian (dental Insurance)
6	Other Private Sector Company	Hanover Insurance (liability insurance for public meetings)
7	Other Private Sector Company	ADP (payroll)
8	City Agency	Housing Preservation and Development (HPD)
9	Other Private Sector Company	Citizens bank
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**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>
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	<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>
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	<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>
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*Please add additional rows, if needed*