

Date: 3/15/2023
 Case Number: 00037131797F
 Case Name: Merced Belen
 Center: _____

Security Voucher

This security voucher guarantees that the Human Resources Administration (HRA) will pay up to the equivalent of one month's rent if it is verified that the tenant who occupied the apartment failed to pay his/her rent and/or caused damage to it. The landlord must submit proof of the unpaid rent and/or damage along with the Landlord's Claim For Security Voucher Payment (on the back page) within three months after the tenant has vacated the apartment. The Agency will only make a payment if the claim is submitted within three months after the tenant has vacated the apartment and a review of the documentation submitted by the landlord confirms that the tenant failed to pay his/her rent and/or damaged the apartment. This Security Voucher will not be honored until the front and back pages have been completed, signed, notarized, and returned to HRA.

The Human Resources Administration (HRA) does not issue cash security deposits. Instead, the Agency is issuing this Security Voucher. Please be advised that refusal to accept this voucher in lieu of a security deposit may constitute source of income discrimination under the NYC Human Rights Law Sec. 8-107(5)(a)(1)-(2).

This Security Voucher is issued by the New York City Department of Social Services (NYCDSS), having its principal offices at 150 Greenwich Street, New York, NY 10007, to:

Name of Landlord: Vermilyea 153, LLC
 Landlord's Address: 108-18 Queens Blvd
 City: Forest Hills State: NY Zip: 11375

as Landlord of the premises to be rented to the participant/tenant located at: (include proof of ownership):

Address: 153 Vermilyea Avenue
 Apt. 5B
 City: New York State: NY Zip: 10034

regarding the participant/tenant listed below:

Participant/tenant: Merced Belen

This Security Voucher is being issued pursuant to Social Services Law Sec. 143-c and 18 NYCRR 352.6 and 381.3, to secure the landlord against non-payment of rent and/or damages as a condition of renting the above-identified premises ("Premises") to the above-named Cash Assistance participant/tenant ("Participant/Tenant"). A claim for the payment of this Security Voucher by the landlord must be made after, and within three months of, the participant/tenant vacating the premises. The claim must be made by the full completion and execution of the Claim on page two of this form and cannot exceed the amount of the Tenant's monthly rent which is \$ 2450.00.

Landlord, please acknowledge your acceptance of the Security Voucher in lieu of a cash security deposit by signing this form below:

Landlord's/Authorized Agent's Name (print): Jessica Shenners

Landlord's/Authorized Agent's Signature: Jessica Shenners Date: 03/13/2023
 (This voucher is not valid until it has been fully completed and authorized in the "For HRA Use Only" section b)

For HRA Use Only:

Supervisor's Name (Print): M. Terrier

Supervisor's Signature: [Signature] Date: 4/19/23

(Turn page)

THIS DOCUMENT CONTAINS A TRUE WATERMARK - THERMOCHROMATIC INK ON BACKER

PUBLIC ASSISTANCE
 ACCOUNTS
 THE CITY OF NEW YORK

THE CITY OF NEW YORK
 DEPARTMENT OF SOCIAL SERVICES
 CASH THIS CHECK AT ONCE

BANK OF AMERICA

52-153
 112

43565774

PO BOX 181
 NEW YORK NY 10274-0181
 SP 47430612 38141 0 38959325 5472

DATE: APR 22, 2023
 AMOUNT: *****\$784.00

PAY***Seven Hundred Eighty-Four And NO/100 Dollars

39-RENT IN ADVANCE TO SECURE APARTMENT
 FOR 2023/04/01 THRU 2023/04/30
 00037131797F-01 23 FA 0001

PAY TO THE ORDER OF
 VERMILYEA 153 LLC/BELEN
 108-18 QUEENS BLVD
 FOREST HILLS, NY 11375

[Signature]

THIS DOCUMENT CONTAINS A TRUE WATERMARK - THERMOCHROMATIC INK ON BACKER

PUBLIC ASSISTANCE
ACCOUNTS
THE CITY OF NEW YORK
DEPARTMENT OF SOCIAL SERVICES
CASH THIS CHECK AT ONCE

BANK OF AMERICA
32-153
117
43565772

PUBLIC ASSISTANCE
ACCOUNTS
THE CITY OF NEW YORK
DEPARTMENT OF SOCIAL SERVICES
CASH THIS CHECK AT ONCE

BANK OF AMERICA
32-153
117
43565773

PAY***Eight Hundred Eighty-Two And NO/100 Dollars

DATE
APR 22, 2023
AMOUNT
*****\$882.00

42-BROKERS FEE

00037131797F-01 23 FA D001

PAY TO THE ORDER OF
MNS/BELEN
40 NORTH 6TH ST
BROOKLYN, NY 11249

PAY TO THE ORDER OF
MNS/BELEN
40 NORTH 6TH ST
BROOKLYN, NY 11249

42-BROKERS FEE
00037131797F-01 23 FA D001

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THIS DOCUMENT CONTAINS A TRUE WATERMARK - THERMOCHROMATIC INK ON BACKER

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ACCOUNTS
THE CITY OF NEW YORK
DEPARTMENT OF SOCIAL SERVICES
CASH THIS CHECK AT ONCE

BANK OF AMERICA

32-153
117
43565771

PO BOX 181
NEW YORK
SP 4743069 38141 0 NY 10274-0181
38959322 5469

DATE
APR 22, 2023
AMOUNT
*****\$882.00

PAY***Eight Hundred Eighty-Two And NO/100 Dollars

42-BROKERS FEE

00037131797F-01 23 FA D001

PAY TO THE ORDER OF
MNS/BELEN
40 NORTH 6TH ST
BROOKLYN, NY 11249

MNS

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PUBLIC ASSISTANCE
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BANK OF AMERICA

32-153
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43565765

PO BOX 181
NEW YORK
SP 4743067 38141 0 NY 10274-0181
38959320 5467

DATE
APR 22, 2023
AMOUNT
*****\$882.00

PAY***Eight Hundred Eighty-Two And NO/100 Dollars

42-BROKERS FEE

00037131797F-01 23 FA D001

PAY TO THE ORDER OF
MNS/BELEN
40 NORTH 6TH ST
BROOKLYN, NY 11249

MNS

43565771 40112015391 002220015556

TRUE WATERMARK - THERMOCHROMATIC INK ON BACKER

43565769 40112015391 002220015556

PUBLIC ASSISTANCE
ACCOUNTS
THE CITY OF NEW YORK
DEPARTMENT OF SOCIAL SERVICES
CASH THIS CHECK AT ONCE

PAY***Eight Hundred Eighty-Two And NO/100 Dollars

PO BOX 181
NEW YORK
SP 4743068 38141 0 NY 10274-0181
38959321 5468

BANK OF AMERICA

32-153
117
43565770

DATE
APR 22, 2023
AMOUNT
*****\$882.00

PAY TO THE ORDER OF
MNS/BELEN
40 NORTH 6TH ST
BROOKLYN, NY 11249

42-BROKERS FEE
00037131797F-01 23 FA D001

MNS