ASSISTING INDIVIDUALS IN APPLYING FOR SNAP ON ACCESS HRA

Instructions for Advocates

During the COVID-19 crisis, there may be individuals who will not be able to complete a SNAP application in a SNAP Center and may not be able to complete a SNAP application remotely using ACCESS HRA, either due to lack of capacity or lack of access to technology.

An advocate can assist the individual by obtaining a signed copy of the attached Supplemental Nutrition Assistance Program (SNAP) Authorized Representative Request Form (LDSS-4942) and then completing the application on the individual's behalf on ACCESS-HRA by doing the following:

Step One: Once you have the signed and completed authorization in hand, create an account for the individual at nyc.gov/accesshra by selecting a username (this could be a username or email address), password and answering one security question. If the individual does not have an e-mail address, please select the User Name option. *

Step Two: During the course of completing the SNAP application (Step 6 of 6), you will be asked to indicate if an Authorized Representative has been appointed to represent the individual. Indicate “Yes” and enter the information requested. (See attached screenshot: ACCESS HRA SNAP Online Application: Step 6 of 6 Authorized Representative)

Step Three: At the end of the application, you will initial the application as the authorized representative, using your own initials.

Step Four: After submitting the SNAP application, IMMEDIATELY download the HRA Mobile Application at nyc.gov/accesshramobile. Using the same credentials that you used to login to the website, upload the completed and signed Authorized Representative Request Form referenced above, connecting it to the pending case. The form must be complete, signed and dated by both parties. If this step is not completed appropriately, the application will not be able to be processed. If you are unable to immediately link to the case, please note that application registration only occurs on business days and there is occasionally a delay in the Application Registration process, so the application may have not been registered yet. Please try again later.

(TURN PAGE FOR SCREENSHOTS)

* Providers should use a User Name when creating a client account on AHRA because provider email addresses are used as the provider log-in on the provider portal. A provider cannot use their email address to log in to both the provider portal and the ‘client’ portal.
ACCESS HRA SNAP Online Application: Step 6 of 6 Authorized Representative

Authorized Representative

Have you appointed someone to be your authorized representative? Required

Yes
No

You've told us that you have asked someone to be your Authorized Representative. Once you have appointed this person, he or she can apply for you.

To appoint someone as your Authorized Representative, an Authorized Representative Request form must be completed and signed by you and your Authorized Representative. Please submit this form to HRA once completed.

Provide the following information about your Authorized Representative.

First Name: Required

Middle Initial:

Last Name: Required

Phone Number and Extension

+1 212-555-6666 ext 1234

Authorized Representative Address

Bldg #:

Street Name:

Apt/Suite:

City:

State:

ZIP Code:

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