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| LOCAL COMMISSIONERS MEMORANDUM |  
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DSS-4037EL (Rev. 9/89)

Transmittal No: 96 LCM-97

Date: October 18, 1996

Division: Temporary Assistance

TO: Local District Commissioners

SUBJECT: HEAP 1996-97 Public Hearings on the Proposed 1996-97 State  
Plan

ATTACHMENTS: Attachment A - Notice of Public Hearings - available  
on-line  
Attachment B - Registration Form - available on-line

The New York State Department of Social Services will be conducting two public hearings on the proposed New York State Plan for the 1996-97 Home Energy Assistance Program (HEAP).

The hearings will be held on the dates and locations listed below:

New York City - Friday, November 1, 1996 from 10:30 A.M. to 12:30 P.M.,  
6th Floor, Room 603B, 80 Maiden Lane.

Albany - Monday, November 4, 1996 from 10:30 A.M. to 12:30 P.M., 40  
North Pearl Street, 7th Floor Conference Room.

If you or a member of your staff are interested in testifying, please refer to the enclosed notice and registration form for details.

Written comments are also encouraged. Three copies of your written comments should be sent to:

Steve Ptak, HEAP Coordinator  
New York State Department of Social Services  
40 North Pearl Street - 7B  
Albany, New York 12243

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Written comments must be submitted by November 6, 1996.

If you have any questions about the hearings please call Charles Giambalvo at (518) 486-6362.

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Patricia A. Stevens  
Deputy Commissioner  
Division of Temporary Assistance

NEW YORK STATE DEPARTMENT OF SOCIAL SERVICES

PUBLIC NOTICE

1996-97 Home Energy Assistance Program (HEAP)

PROPOSED STATE PLAN

In accordance with the Low-Income Home Energy Assistance Act of 1981, the State of New York is making available for public review and comment the 1996-97 proposed Home Energy Assistance Program State Plan.

REVIEWING OR OBTAINING THE PROPOSED STATE PLAN: The 1996-97 proposed State Plan will be available for inspection at local department of social services' offices. Copies of the proposed State Plan may be requested by calling, toll-free, 1 (800) 343-8859, extension 3-0332 or by writing to the Division of Temporary Assistance, New York State Department of Social Services, 40 North Pearl Street-7A, Albany, New York 12243, ATTN: Steve Ptak.

PUBLIC HEARINGS: Public Hearings on the proposed State Plan will be conducted in:

- o New York City - Friday, November 1, 1996 from 10:30 A.M. - 12:30 P.M., 6th Floor, Room 603B, 80 Maiden Lane, New York, New York 10038.
- o Albany, New York - Monday, November 4, 1996 from 10:30 A.M. - 12:30 P.M., 7th Floor Conference Room, 40 North Pearl Street, Albany, New York 12243

Individuals/organizations wishing to present their views at these hearings should register by calling 1 (800) 343-8859, extension 3-0332. Persons who have pre-registered will be called upon to speak first. Others will be called in the order in which they register.

Testimony is limited to five (5) minutes. Speakers must submit three (3) written copies of their statements.

There will be no photocopying facilities available at this hearing.

WRITTEN COMMENTS: Written comments on the proposed plan will be accepted no later than November 6, 1996 and should be addressed to:

Steve Ptak, HEAP Coordinator  
New York State Department of Social Services  
40 North Pearl Street - 7A  
Albany, NY 12243

Written comments received by the Department will be available for public inspection.

NEW YORK STATE DEPARTMENT OF SOCIAL SERVICES

PUBLIC HEARING  
TO  
PROVIDE FOR PUBLIC COMMENT ON  
NEW YORK STATE'S  
PROPOSED 1996-97 HOME ENERGY ASSISTANCE PROGRAM (HEAP) STATE PLAN

New York City, Friday, November 1, 1996 from 10:30 A.M. to 12:30 P.M. in Room 603B, 6th Floor, 80 Maiden Lane, New York, New York 10038.

Albany, Monday, November 4, 1996 from 10:30 A.M. to 12:30 P.M. in the 7th floor conference room, 40 N. Pearl St., Albany, New York 12243.

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Persons wishing to present their views at any of these hearings are requested to complete this reply form as soon as possible and mail to:

Mr. Steve Ptak Telephone: 1-800-342-8859  
HEAP Unit Extension 3-0332  
Division of Temporary Assistance  
New York State Department of  
Social Services  
40 North Pearl Street  
7th Floor, Section A  
Albany, New York 12243

To assure your pre-registration, please respond three days prior to the scheduled hearing date, or call the above number if you have any questions.

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I plan to attend the public hearing in (please check):

\_\_\_\_\_ New York City (November 1, 1996)

\_\_\_\_\_ Albany (November 4, 1996)

I plan to make a public statement at the hearing. I will limit my statement to a maximum of five minutes and I will provide three copies of my prepared statement.

NOTE: There will not be any photocopying facilities available at the hearing.

NAME \_\_\_\_\_  
TELEPHONE \_\_\_\_\_  
TITLE \_\_\_\_\_  
AFFILIATION \_\_\_\_\_  
ADDRESS \_\_\_\_\_