



SNOW BELT HOUSING COMPANY, INC.

7500 SOUTH STATE STREET | LOWVILLE | NY 13367
PH: 315-376-2639 | NYS RELAY SERVICE NO. TTD: (800) 662-1220

RIGHTS AND RESPONSIBILITIES

CONSUMER RIGHTS

As a consumer of one or more Snow Belt Housing Company, Inc. programs or services, you are entitled to the following rights:

- a. The right to privacy, security, and respect of property.
- b. Right to file grievance and request the correction of a record that is inaccurate, irrelevant, untimely, or incomplete:

Mailing:

ATTN: Administration, Snow Belt Housing Company, Inc., 7500 S State Street, Lowville, NY 13367

Emailing:

Information@snowbelt.org

Be informed about why information is being collected and how it is going to be used (consent forms).

- c. Be assured that information is accurate, relevant, complete and up-to-date before disclosure to others.
- d. Request information about the disclosure of your records to other agencies or persons.
- e. The right for protection from abuse, neglect, retaliation, humiliation, exploitation.
- f. The right to have access to, review, and obtain copies of pertinent information needed to make decision regarding services in a timely manner.
- g. The rights to informed consent or refusal or expression of choice regarding participation in program services.
- h. The right to investigation and resolution of alleged infringements of rights.
- i. The right to equal access to services and humane care for all persons in need regardless of race, color, national origin, religion, sex, age, familial status, disability and without regard to actual or perceived sexual orientation, gender identity, marital status, intellectual disability or mental illness.
- j. The right to a grievance procedure that includes the rights to: initiate grievance, be informed of appeal procedures, initiate appeals, have access to the grievance procedures posted in a conspicuous place, receive a decision in writing, and appeal to an unbiased source.
- k. The individual/legally responsible person has the right to consent to, or refuse any services offered by the agency and consent to participate in services may be withdrawn at any time.

CONSUMER RESPONSIBILITIES

As a consumer of one or more SBHCI programs or services, you agree to assume the below listed responsibilities:

- a. Violation of the following responsibilities may result in termination from services.
- n. The responsibility to maintain consistent in communication with SBHCI service provider (s) and remain compliant as outlined by program requirements. Repetitive and consistent failure to meet for scheduled appointments will be defined as non-compliance.
- o. The responsibility to provide correct, complete and accurate information required to qualify for program.
- p. The responsibility to refrain from violence, threats of violence, or other illegal conduct. Any threat or act of violence directed toward staff, property, other consumers, or visitor(s) is grounds for immediate dismissal from SBHCI program and/or services. Any individual dismissed under these circumstances will be barred from reentry for one (1) year and must have written approval from the Executive Director prior to returning. Known or suspected child abuse or neglect will be reported immediately.
- q. The responsibility to adhere to the rules of the property owner while residing in a short term shelter options (hotel/motel) which are financially supported by SBHCI programs. Any program participant that is removed from or barred from a short term shelter due to aggressive or illegal behavior will no longer be eligible for continued short term placement. Overnight guests and/or visitors are not allowed at the premises unless they are duly enrolled in and qualified for the program. For homeless prevention programs, if you have income you may be asked to contribute 30% of your family's gross income towards the cost of your shelter; failure to pay the agreed upon portion without just cause may disqualify you from future short term shelter options.

ACKNOWLEDGEMENT STATEMENT

I have reviewed and have had the above "CONSUMER RIGHTS and CONSUMER RESPONSIBILITIES" explained to me. By signing this document I acknowledge that I understand the statements above. Furthermore, I acknowledge and understand that I have the right to file a grievance with the without fear of retaliation.

Consumer Printed Name

Consumer Signature

Date

Employee Witness Signature

Date

This institution is an equal opportunity provider and employer.

If you wish to file a Civil Rights program complaint of discrimination, complete the USDA Program Discrimination Complaint Form, found online at http://www.ascr.usda.gov/complaint_filing_cust.html, or at any USDA office, or call (866) 632-9992 to request the form. You may also write a letter containing all of the information requested in the form. Send your completed complaint form or letter to us by mail at U.S. Department of Agriculture, Director, Office of Adjudication, 1400 Independence Avenue, S.W., Washington, D.C. 20250-9410, by fax (202) 690-7442 or email at program.intake@usda.gov.

