

From: Keepsake Village at Greenpoint

123 Sanitized St

Liverpool, NY 13088

PH:

Fax: (224) 379-2386

Requested By: Support, ALIS

To: test fax

Fax: (972) 532-9272

Date: 02/19/2026 2:06 PM

Subject: testing fax

Page Count: 2

Message:

test to see if it delivers



hearth
management

Veteran Status Consent Form

New York State law requires Adult Care/Assisted Living communities to ask you for your, and if applicable, your spouse's, veteran status, and only if you consent, to provide your contact information to the Division of Veterans Affairs. This is according to Public Health Law section 2805-0 and Social Services Law Title 2 of Article 7. <https://www.nysenate.gov/legislation/laws/PBH/2805-0>. This new law is intended to ensure that the Division of Veterans Affairs can ensure that US veterans are aware of the various veterans' benefits for which they may be eligible. Accordingly, we are required by law to ask you:

"Have you or your spouse ever served in the United States military?" Please check the choices below

I ☐ have ☒ have not served in the US Military

My spouse ☐ has ☒ has not served in the US Military

Name and address of spouse who served N/A

Please select one of the choices below

☐ I GIVE CONSENT for the Hearth Management Community to transmit my (and/or my spouse's) veteran's status, name(s), mailing address(s), email address(s) (if available) and telephone number(s) to the NYS Division of Veterans Services.

☐ DON'T GIVE CONSENT for Hearth Management Community to transmit my (and/or my spouse's) veteran's status, name(s), mailing address(s), email address(s) (if available) and telephone number(s) to the NYS Division of Veterans Services.

In addition, if you or your spouse have served in the US Military, we are required to share with you the contact information to the NYS Division of Veterans Affairs the following, which is available here <https://veterans.ny.gov/content/contact-division-veterans-services>.

☐ I confirm that I have received from the Hearth Community the following information:

- The name, address, and telephone number of the New York State Division of Veterans' Services.
2 Empire State Plaza, 17th floor, Albany, NY 12229 (518) 474-0402
- The nearest Division of Veterans' Services office: 844 E. Washington St, #430, Syracuse NY 13202
- The nearest county or city Veterans' Service agency: 421 Montgomery St, 10th floor, Syracuse NY 13202; and
- The nearest accredited veterans' service officer: 344 W. Genesee St, #208, Syracuse NY 13202.

Printed Name of Resident N/A

Resident's Date of Birth N/A

Signature of Resident or Resident's Legal Representative (if applicable) _____

Print name of Resident's Legal Representative (if applicable) _____