



Address Confidentiality Program EOHLC Office Hours November 22, 2024

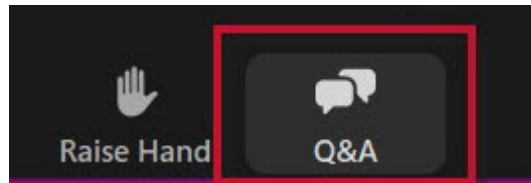


WELCOME

Asking Questions

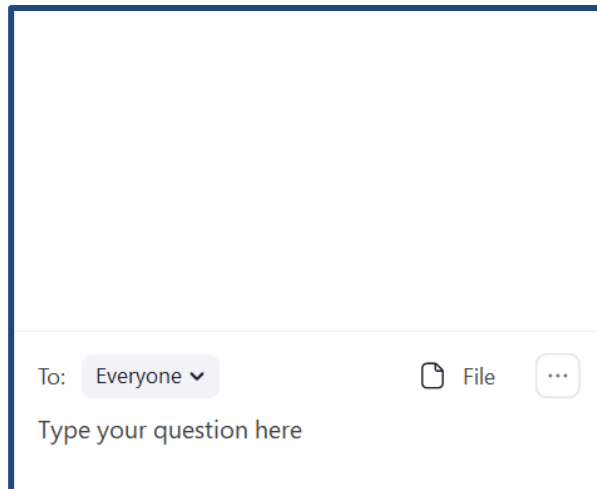
We will be monitoring the Q&A for questions

1



Click “Q&A” to submit a question (or “Raise Hand” to share a verbal question at designated breaks)

2

A screenshot of a Q&A submission form. It features a large white text area for entering a question. Below the text area, there is a 'To:' dropdown menu set to 'Everyone', a 'File' button with a document icon, and a three-dot menu button. At the bottom, there is a placeholder text 'Type your question here'.

Enter your question into the “Q&A” box

We will follow up with answers to any questions that we don’t get to during the session

THIS CALL IS BEING RECORDED





Address Confidentiality Program

William Francis Galvin
Secretary of the Commonwealth





- Program introduction
- Responsibilities of Participants and agencies
- Statute and Regulations
- Eligibility and application process
- Questions

Helps promote survivor safety by using a safe address when interacting with government agencies and creating public records

- Safe address is the Participant's legal address in MA
- Confidential mail forwarding service
- Assistance with MA RMV
- Confidential Voter Registration
- Agent for service of process
- Certification is valid for 4 years with option to renew, unless cancelled prior to expiration
- Participants receive an ACP ID card with proof of Program participation

Do use the Safe Address for:

- Work
- School
- Public Assistance
- Social Security payments
- All state/local agencies
- Civil court cases

Do not use the Safe Address for:

- Federal agencies
- Private agencies
- Private utility companies
- Mail ordering
- Newspapers, magazines, etc.

Responsibilities of a Program Participant



- May not disclose any address other than the applicable designated address to any state or local (city/town) agency;
- May not disclose his or her residential address to the batterer, stalker or perpetrator of the domestic violence, sexual assault, rape or stalking.
- Must maintain a telephone number where the ACP staff can contact them directly and leave a voicemail message.
- Must notify the Program in writing of a change in the Program participant's contact information (address and/or phone #) at least 7 days in advance, or immediately thereafter if such change is necessitated by an emergency or other unforeseen event;
- Must return the ACP ID card to the Program immediately upon withdrawal or cancellation of participation in the Program; and
- Must promptly disclose in writing to the Program any civil, criminal or administrative proceeding in which participant is a witness or party and any court order including, but not limited to, divorce proceedings, child support, child custody and visitation orders.

- At the time of creation of a new record must use a substitute address designated by the ACP as their residential or mailing address
- Shall accept a Program Participant's original identification card that includes the substitute address and use this address in lieu of their actual location
- May contact the Program manager to verify a Participant's certification
- May make a photocopy of the identification card and immediately return the original card
- Must accept the applicable designated substitute address unless the agency has received a written record exemption determination from the Program
- May not question the Program participant about the details or circumstances of their inclusion in the Program

The Address Confidentiality Program (ACP) was established by Chapter 409 of the Acts of 2000.

- Statutory authority- M.G.L. c.9A

An act providing address confidentiality for victims or domestic abuse, rape, sexual assault and stalking

- Regulatory authority- 950 CMR 130.00

Administration of Address Confidentiality Program

Applicant Eligibility



An eligible applicant:

- Is a victim of domestic violence, sexual assault, rape or stalking as defined by M.G.L. c.9A
- Is a resident of Massachusetts and has a MA residential address to be protected
- Has a photo I.D. and includes a copy of I.D. in application
- Has documentation that disclosure of their address is a threat to their safety, including:
 - Restraining order
 - Court documents
 - Police reports
 - Letter of support from a professional (advocate, physician, mental health clinician, etc).
- Can demonstrate legal custody of any minor children or incapacitated persons included in the application
- Has recently relocated to a new address that is not known to the perpetrator and is not part of any public record
- Signs the application and agrees to Program policies, rules, and Regulations

Applicants can either call ACP directly or speak with an advocate they are already working with.

- 1) Brief overview of Program
- 2) Initial intake

If the applicant is eligible and has called ACP:

- 1) ACP will reach out to an agency point of contact based on location
- 2) Point of contact will designate an AA to assist and provide contact info
- 3) If an agency is unable to assist they will let ACP know

Application Process



Once an applicant is connected with AA or they go directly to agency and complete intake with agency:

- 1) AA and applicant meet in person or by video conferencing- NOT by phone
- 2) AA fills out application for applicant
- 3) Verifies the identity of the applicant by looking at their ID
- 4) Collects all supporting documentation
- 5) Informs applicant of Program policies, rules, expectations, and limitations
- 6) Mails completed application and documents to

ACP

PO BOX 9120

Chelsea MA 02150

- 7) ACP will review application and accept, deny, or ask AA to gather additional information
- 8) ACP will notify both the applicant and AA upon acceptance or denial into Program

Contact Information



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QUESTIONS

THANK YOU!

