



SAFE AT HOME

WISCONSIN ADDRESS CONFIDENTIALITY PROGRAM

GUIDE FOR APPLICATION ASSISTANTS



WISCONSIN DEPARTMENT OF JUSTICE
OFFICE OF CRIME VICTIM SERVICES

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This document is intended to provide information and guidance to DOJ designated Application Assistants regarding Safe at Home. Information contained in this guide is intended to serve as a safety planning tool and does not constitute legal advice.

Introduction to Safe at Home

Safe at Home is a statewide address confidentiality program that provides victims of actual or threatened domestic abuse, child abuse, sexual abuse, stalking, trafficking, or those who fear for their physical safety with a legal substitute address to be used for both public and private purposes. Enrollment in Safe at Home allows participants to use and receive mail at an assigned address in lieu of their actual address. Safe at Home then forwards mail from the assigned address to participants' actual addresses free of charge.

The intent of Safe at Home is for those who fear for their safety to be able to maintain a private, confidential home, work, or school address and gain some peace of mind. Safe at Home is one of many tools that an individual can choose as part of their overall safety plan.

Safe at Home is governed by Wis. Stat. §165.68, which was passed by the legislature in 2016 and goes into effect April 1, 2017.

Eligibility

A person is eligible to participate in Safe at Home if he or she attests ALL of the following:

1. That he or she is a resident of Wisconsin.
2. That at least one of the following applies:
 - a. He or she is a victim of an act or threat of abuse, a parent or guardian of a person who is a victim of an act or threat of abuse, or a resident of a household in which a victim of an act or threat of abuse also resides.
 - b. He or she fears for his or her physical safety or for the physical safety of his or her child or ward.
3. That he or she resides or will reside at a location in Wisconsin that is not known by the person who committed the abuse against, or who threatens, the applicant or his or her child or ward.
4. That he or she will not disclose his or her actual address to the person who committed the abuse against, or who threatens, the applicant or his or her child or ward.

An “act or threat of abuse” includes domestic abuse, child abuse, sexual abuse, stalking, and trafficking. An applicant may be eligible regardless of whether any criminal charges have been brought, whether the applicant has sought a restraining order, or whether the applicant has reported any act or threat to law enforcement.

Mandatory Safety Planning

Individuals intending to enroll in Safe at Home must first participate in safety planning with an Application Assistant. Application Assistants are trained victim service providers and community-based advocates designated by Safe at Home to provide safety planning services and education about how Safe at Home works into an overall safety plan. Application Assistants are not expected or required to be experts on Safe at Home, but are expected to provide comprehensive safety planning that meets the individualized needs of the person they are working with. Because safety plans are specifically tailored to a given individual’s needs, every Safe at Home participant’s safety plan will be a little different. After an individual creates a safety plan with a designated Application Assistant, they may complete an application to enroll themselves and/or their child/ward in Safe at Home.

Application

Safe at Home applications may be obtained by visiting www.doj.state.wi.us/ocvs/safe-home. Please contact Safe at Home directly if you wish to have paper applications sent to you by mail. The following is a copy of the Safe at Home application:



Safe at Home

Wisconsin Address Confidentiality Program



Application

Section 1: Applicant Information

The primary reason I am enrolling in Safe at Home (check one):

- I am a victim of an act or threat of abuse.
("Abuse" is defined as child abuse, domestic abuse, sexual abuse, stalking, and trafficking.)
- I'm a parent or guardian of a person who is a victim of an act or threat of abuse.
- I reside with someone who is a victim of an act or threat of abuse.
- I fear for my physical safety or the physical safety of my child or ward.

My legal name is:

First	Middle	Last
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I may also receive mail under the following name (e.g. maiden name):

First	Middle	Last
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My date of birth:

Month	Date	Year
/	/	

My actual residential address is:

Street Address	Apartment or Unit #	County
City	State WI	Zip Code

There are other adults that receive mail at this address:

<input type="checkbox"/> Yes	<input type="checkbox"/> No
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I also plan to use my Safe at Home assigned address in place of a (check all that apply):

<input type="checkbox"/> School Address	<input type="checkbox"/> Work Address
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I may be contacted at:

Home Telephone # ()	Mobile Telephone # ()	Email Address
Is it okay to leave a message concerning your participation in Safe at Home? <input type="checkbox"/> Yes <input type="checkbox"/> No		
My preferred contact method is: <input type="checkbox"/> Home Telephone <input type="checkbox"/> Mobile Telephone <input type="checkbox"/> Email		

I am applying on behalf of the following minor children or wards:

<i>Minor Child or Ward's Legal Name (First, Middle, Last):</i>	<i>Relationship to Applicant:</i>

Section 2: Additional Information

The Safe at Home designated Application Assistant that assisted me with safety planning is:

<i>Name</i>	<i>Agency</i>
<i>Telephone # ()</i>	<i>Email Address</i>

Application type (check one):

<input type="checkbox"/> This is my first time applying to Safe At Home in Wisconsin.	<input type="checkbox"/> I previously participated in an address confidentiality program in another state. State: _____	<input type="checkbox"/> I was previously a Safe At Home participant in Wisconsin and I am re-applying. My ID # was: _____
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I learned about Safe at Home from (check all that apply):

<input type="checkbox"/> A Victim Advocate	<input type="checkbox"/> Law Enforcement	<input type="checkbox"/> Court or Judge	<input type="checkbox"/> Internet
<input type="checkbox"/> Victim/Witness	<input type="checkbox"/> Attorney	<input type="checkbox"/> Family member / Friend	<input type="checkbox"/> Other: _____

This is the full name of the person(s) I fear:

<i>Name</i>	<input type="checkbox"/> <i>This person works for a state or local government agency, or law enforcement agency.</i>	<i>Name of the state or local government agency, or law enforcement agency.</i>
<i>Name</i>	<input type="checkbox"/> <i>This person works for a state or local government agency, or law enforcement agency.</i>	<i>Name of the state or local government agency, or law enforcement agency.</i>

Section 3: Optional Information

Do you have motor vehicles that need to be registered in Wisconsin?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Do you have school-age children that will need to enroll in or transfer schools?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Do you plan to register to vote with your Safe at Home assigned address?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Do you own your home or plan to purchase a home in the near future?	<input type="checkbox"/> Yes	<input type="checkbox"/> No

Section 4: Applicant Affirmation & Authorization

I solemnly swear or affirm that (check all that apply):

- I am a victim, or parent or guardian of a victim, of an act or threat of child abuse, domestic abuse, sexual abuse, stalking, or trafficking, or a resident of a household in which the victim also resides;
- I am a person who fears for his or her physical safety or the physical safety of his or her child or ward;

AND,

- I am a resident of Wisconsin;
- I reside, or will reside, at a location in Wisconsin that is not known by the person who committed the abuse against or threatens me or my child/ward;
- I will not disclose my actual address (residential street address, school address, or work address) to the person who committed the abuse against or who threatens me or my child/ward;
- I developed a safety plan with a Department of Justice designated Application Assistant;
- To the best of my knowledge, all of the information I provided on this application is true and accurate.

I consent to (check all):

- Enrollment in Safe at Home for 5 years, unless I voluntarily cancel my enrollment or become disenrolled.
- Notifying Safe at Home if and when I change my actual address or legal name and that failure to do so may result in my disenrollment from Safe at Home.
- Safe at Home notifying me if my participation will expire or if I become disenrolled for failure to update my name or actual address.
- Personally updating my address with all third parties after I unenroll from Safe at Home. I acknowledge that the US Postal Service cannot accept a change of address form or mail forwarding form from someone ending their participation in Safe at Home.
- The Department of Justice being designated as my legal agent for service of process and receipt of mail and authorize the Department of Justice to act on my behalf or in my place for the purpose of receiving mail and service of process.
- Safe at Home notifying state or local agencies and units of government that I am enrolled as a participant in Safe at Home when required by law to do so.
- The Department of Justice may disclose my actual address to law enforcement for official purposes or pursuant to a court order.
- Delivery of my mail being delayed due to participation in Safe at Home, including delivery of time sensitive materials and medications.

I understand that (check all):

- Packages, parcels, and periodicals (magazines) and catalogues will not be forwarded to me UNLESS they are sent by state or local agency or unit of government or are clearly identifiable as containing a pharmaceutical or medical item.
- I may voluntarily cancel my enrollment at any time by submitting written notice to Safe at Home.
- If I receive notification from Safe at Home that I was disenrolled, I may update my information and/or reenroll in Safe at Home within 6 months from the date that Safe at Home provided notice of disenrollment.
- Upon unenrollment or disenrollment from Safe at Home, Safe at Home will no longer forward my mail and it will be returned to sender.

Signature of Applicant

Date

RETURN COMPLETED APPLICATION TO:

Mail:

**Safe at Home
Wisconsin Department of Justice
P.O. Box 7035
Madison, WI 53707-7035**

OR

Email:

SafeAtHome@doj.state.wi.us

Each adult resident of an address that is to be kept confidential should complete their own Safe at Home application. Any children also residing at the address should be listed at the end of Section 1 of the application, but do not need their own separate application.

It is important for applicants to review, understand, and thoroughly complete the application. Application Assistants may want to help applicants fill out their application to ensure that it is thorough and complete and to have any final safety planning questions answered. If necessary, Application Assistants may also want to have an applicant sign a limited release of information to allow them to be able to talk directly with Safe at Home staff.

Enrollment

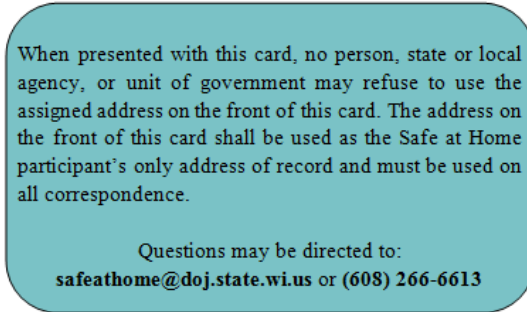
After receiving and reviewing an application, Safe at Home may contact a new enrollee by phone or email to provide direct guidance and answer questions about how to use their new address for school registration, to set up utilities, to vote, to register motor vehicles, and a number of other uses. Safe at Home will also send a new program participant an Enrollment Packet with information about additional steps they may need to take to protect their actual address, as well as an authorization card. The authorization card contains the Safe at Home participant's name, assigned address, and enrollment expiration date. The back of the card contains a notice to third parties that the participant is legally authorized to use the assigned address. Safe at Home can provide confirmation of participation in the Program upon request from the program participant or any state or local government agency. Program participants are strongly encouraged to use the assigned address at all times after enrollment and provide their authorization card for verification whenever they update their address or are asked for their address.

A Safe at Home Authorization Card looks like this:

FRONT:



BACK:



Length of enrollment is five years. Participants may renew their enrollment after the end of the five years. If a participant knows they want to extend their enrollment for an additional 5 years, they should contact Safe at Home prior to their enrollment expiration date to ensure a seamless transition. Participants may also voluntarily withdraw from Safe at Home at any time.

Participants may be disenrolled from Safe at Home for failure to notify the program of any change in actual address or legal name. If a participant is at risk of becoming disenrolled, Safe at Home staff will attempt to notify the participant so that they have the opportunity to update their information. If multiple attempts to notify the participant are unsuccessful and a participant is disenrolled, they may update their information or re-enroll within 6 months of the date that Safe at Home provided notice of disenrollment.

Using the Assigned Address

All Safe at Home participants share the same assigned address, which reroutes all mail to a singular post office box operated by Safe at Home. Once Safe at Home receives the mail, it is sorted by household using a uniquely assigned number, which distinguishes one program participant from another. Because of the unique nature of this assigned address, participants

are advised to always have their mail addressed using their name, unique number, and full, two-line assigned address, as follows:

**Jane Participant, #####
3902 Milwaukee St.
P.O. Box 7188
Madison, WI 53707-7188**

Individuals and private entities may not refuse to use a program participant's Safe at Home assigned address. State or local agencies or units of government may not refuse to use a participant's Safe at Home assigned address unless a specific statutory duty requires the agency or unit of government to use the participant's actual address.

Protecting a Participant's Actual Address

Keeping an actual address completely confidential is difficult and requires diligence and some sacrifice. The fewer places and people that have access to a participant's actual address, the better protected the actual address and participant will be. Safety planning should include discussions about the risks that may be involved with disclosure of an actual address.

Safe at Home participants should be aware that their actual address may be disclosed by the program under very limited circumstances. Safe at Home may disclose a participant's actual address to law enforcement for official purposes or pursuant to a court order. If the participant's actual address is disclosed, Safe at Home will notify the participant and request the court keep any record containing the actual address sealed and confidential.

Safe at Home participants should use their assigned address for all purposes. There are very few instances that are exceptions to this general rule. The most common exception is that a municipal clerk may require a participant's actual address for voter registration. Even if a participant discloses their actual address for this limited purpose, there are additional safeguards that can be taken to protect their actual address. For this reason, any time a

participant is instructed to provide their actual address, they should contact Safe at Home for additional guidance.

Mail-Forwarding Service

Free mail-forwarding is one of the key services provided by Safe at Home. When a program participant's mail is sent to their assigned address, it will automatically reroute to a secure post office box operated by Safe at Home. Safe at Home then forwards the program participant's mail to their actual address within 1-2 business days. A Safe at Home participant can expect their mail to take an additional 5-7 days to reach them.

Safe at Home will forward most, but not all types of mail. Safe at Home "mail" includes first class letters and flats delivered by the United States Postal Service, including priority, express, and certified mail. "Mail" does not include a package, parcel, periodical (magazine), or catalogue unless it is clearly identifiable as being sent by a state or local agency or unit of government, or is clearly identifiable as containing a pharmaceutical or medical item. Safety planning should include a discussion about the risks involved with using online mail ordering services that fall outside the scope of Safe at Home.

Contact Safe at Home

Mail:

Safe at Home
Wisconsin Department of Justice
P.O. Box 7035
Madison, WI 53707-7035

Phone: (608) 266-6613

Email: safeathome@doj.state.wi.us

Website: www.doj.state.wi.us/ocvs/safe-home