

Please Read Both Sides Carefully
Notice of General Assistance Eligibility

Date: _____

Dear _____ :

You have been found eligible to receive General Assistance from _____ (date) to _____ (date), for the following reason(s):

- You are in need (your income is less than the maximum levels in the ordinance). (22 M.R.S.A. §§ 4301(7), 4301(8A), 4301(10), 4305, 4308)
- You are eligible for emergency assistance (22 M.R.S.A. §§ 4308(2), 4315-A)

You will receive the following assistance:

Type	Amount
_____	\$ _____
_____	\$ _____
_____	\$ _____
Total: \$ _____	

In order to be eligible for any assistance in the future:

1. You must do the following items that are checked:

- **Benefits:** Apply for the following within 7 days:

- | | | |
|--|---|---|
| <input type="checkbox"/> TANF | <input type="checkbox"/> Family Crisis (EA) | <input type="checkbox"/> Subsidized Housing |
| <input type="checkbox"/> WIC | <input type="checkbox"/> Unemployment Comp. | <input type="checkbox"/> Veterans Benefits |
| <input type="checkbox"/> Food Stamps | <input type="checkbox"/> Workers' Comp. | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> Fuel Assistance (HEAP/ECIP) | <input type="checkbox"/> SSI/SSDI | |

- **Assets:** You must make a good-faith effort to liquidate the following assets:

- | | | |
|---|---|---|
| <input type="checkbox"/> Bank Account | <input type="checkbox"/> Retirement Account (<i>IRA</i>) | <input type="checkbox"/> Recreational Vehicle |
| <input type="checkbox"/> Stocks/Bonds | <input type="checkbox"/> Real Estate (<i>other than home</i>) | <input type="checkbox"/> Boat |
| <input type="checkbox"/> Life Insurance | <input type="checkbox"/> Vehicle | <input type="checkbox"/> Other: _____ |

- **Work/Education:**

Diligently seek work at _____ places a week

Visit the CareerCenter Office for job counseling and placement

Apply for vocational rehabilitation training

Apply for APSIRE

Register for and attend classes at _____

Seek budget counseling at _____

Sign up for and complete workfare

Provide a doctor's statement describing any limitations in your ability to work and period of time you will be limited.

Other: _____

- 2. By the next time you apply you must:** 1) read the back of this decision regarding use-of-income requirements and limitations on emergency assistance; 2) _____

3. If you want to receive General Assistance in the future:

- You must make a good-faith effort to make all reasonable efforts to reduce your need for General Assistance, including using available and potential resources such as other government benefit programs, assistance from legally liable relatives, employment opportunities, etc.
- If you are able to work, but are unemployed you must make a good-faith attempt to find a job, accept a job offer, and participate in any training or rehabilitation program that would help you become employed.
- You must not quit your job unless you can document a good reason for doing so, nor must you be fired for misconduct.
- If you are assigned workfare, you must complete your work assignment satisfactorily.
- You must report your household income and expenses completely and accurately and report any changes in the household or income to the administrator.
- Should you receive a lump sum payment between the date of this decision and any future application for General Assistance, you must report to the Administrator the receipt and the amount of that lump sum payment. Under certain circumstances the municipality has the right to consider (i.e., prorate) lump sum income available to your household for as long as 12 months after an application for General Assistance. Lump sum income that is spent toward basic necessities will not be prorated, therefore you should keep receipts of your expenditure of lump sum income in order to preserve your eligibility for General Assistance during the 12-month period after receiving a lump sum payment.
- You must not commit fraud or violate rules of other programs which would cause you to lose other public benefits such as TANF or Unemployment Compensation.
- You must show that your income has been used for basic necessities such as: rent/mortgage, fuel, utilities, non-elective medical services, non-prescription drugs, telephone when medically necessary, necessary work-related expenses, clothing, personal supplies and food. Income received within a 30-day period and spent on non-necessities shall be considered available to the household resulting in a reduction or denial of future benefits. Examples of spending for non-necessities include expenditures for tobacco or alcohol, gifts, trips or vacations, court fines, repayments of unsecured loans, credit card debt, etc.
- The municipality reserves the right to apply specific use-of-income requirements to any applicant who fails to use his or her income for basic necessities or fails to reasonably document his or her use of income. These requirements will take the form of written directives to spend all or a portion of prospective income toward priority basic necessities such as housing (rent/ mortgage), energy (heating fuel/electricity), or other specified basic necessities. Failure to abide by these requirements may result in an ineligibility for General Assistance to replace the misspent income, unless you are able to show with verifiable documentation that all income was spent on basic necessities up to the maximum amounts allowed by ordinance.
- For you to be eligible for emergency General Assistance in the future (for example, to avert an eviction or disconnection of electric service), you will have to be able to demonstrate that you could not have prevented the emergency situation from occurring with the income and resources available to you. Please refer to the municipal General Assistance ordinance to review the guidelines the administrator may follow to limit the amount of emergency General Assistance you will be eligible for if you could have financially prevented or partially prevented the emergency from occurring.

Important:

Failure to fulfill one or more of these requirements may result in your being ineligible to receive assistance the next time you apply, or even disqualification from the program for 120 days.

Assistance that you receive must be repaid to the municipality if you are ever financially able to repay it. Parents who are financially able are required by law to help their children under the age of 25, as spouses are legally required to financially support each other. The municipality has the right to require these relatives to repay any assistance that is granted.

If you are dissatisfied with this decision, please feel free to discuss it with me. You have the right to have a fair hearing. A person who was not involved with this decision will decide whether you are eligible for assistance. If you would like a fair hearing, you must request a hearing **in writing within 5 working days** of when you receive this notice. You have the right to be represented by an attorney, at your expense, and to present witnesses and written evidence on your behalf. Forms to request a hearing are available from my office.

You also have the right to contact the State Department of Human Services in Augusta (1-800-442-6003) if you think this decision violates state law.

If you have any questions, do not hesitate to contact me.

Sincerely,

General Assistance Administrator