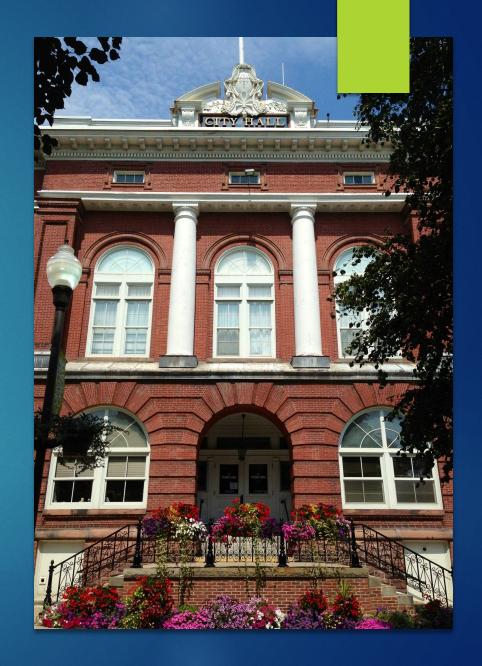


# General Assistance

MAINE'S MUNICIPALLY ADMINISTERED
GENERAL ASSISTANCE PROGRAM

# The Municipal General Assistance Program

- Each town, city and territory in Maine is required to have a General Assistance program available to support individuals in need.
- General Assistance is governed by statute, rules and municipal ordinance.
- Municipalities are required to administer the program. The Department oversees the administration, conducts audits, and provides support and guidance to the municipalities.
- Municipalities can request Department reimbursement for 70% of assistance issued.
- Assistance is issued via voucher paid directly to a vendor (not cash).



## Public Posting Required

Municipalities must have a posted General Assistance notice available in public view 24 hrs/day, 7 days/week.

- This notice must contain information regarding:
  - Office hours available for GA applications.
  - The name and contact information of an overseer for all times outside of regular hours in the event of an emergency.
  - That the statute and ordinance are available for inspection.
  - The requirement of a decision within 24 hours.
  - ► The Department's toll-free number in the event a client has questions.



## Town of Pine Tree General Assistance Notice

The <u>Town of Pine Tree</u> administers a General Assistance Program for the support of the poor. Pursuant to Title 22 MRSA §4305, the Municipal Officers have adopted an Ordinance establishing that program. A copy of this ordinance and relevant statutes are available for public inspection at the Town Office.

If you need help, your town is **required** to take your application for General Assistance. Applications will be taken at: 1 Pinecone Lane at the following times:

Day(s): Monday-Friday Hour(s): 8:00am - 5:00pm

The town is required to have someone available 24-hours a day to take applications in an emergency. If this is an **emergency** and the office is closed, contact: Pine Tree Police Department at 207-555-1000.

The municipality's General Assistance Administrator must issue a written decision within 24 hours of receiving your application for General Assistance.

For questions regarding the General Assistance Program, you may call toll-free telephone number for the Department of Health and Human Services at: 1-800-442-6003.

This notice is posted pursuant to Maine Law Title 22, MRSA §4304-4305.

## GA Application Process

- Applicants are required to provide information necessary for the administrator to determine eligibility.
- Applications include questions regarding:
  - Applicant and household information such as contact information, address, household size, emergency contact etc.
  - Work and education history
  - Reason for any inability to work
  - Income and expenses with statements

own/City of	03/24/17

### APPLICATION FOR GENERAL ASSISTANCE

Administrator: Please read the following to the applicant or have the applicant read it in your presence.

Name of Applicant:	(1 lease type of	Date o		Place of	Social S	ecurity	Т	Telepho	ne numbers:
rune or rappireum.		Birth:		Birth	Number		Hor	_	in individual
							Cell	:	
							_	sage:	
Mailing Address:							Len	gth of Use:	
Physical Address:							Len	gth of Resi	dence:
Most recent previous a	ddress:						Len	gth of Resi	dence:
Applicant is:			Has any	one in	If	yes,	Тур	e of Assist	ance Received:
	Single		the HH		Where:				
Married	☐ Divorced		in the p	for GA	When:				
Separated	Widowed			r NO					
Does anyone in your ho	usehold have a war	rant	If yes, v	who?		eached the TAl	NF 60	If yes, ha	ve you applied f
for their arrest as a resu	lt of a felony convic	tion?			mo. Limit?			an extens	ion?
Has your household	Does everyone re	ceive	If so, ho	ow	Do you hav	e a Governmer	nt 1	Has your h	ousehold filed fo
applied for LIHEAP?	SNAP benefits?		much?		funded cell	phone?	1	an income	ax refund?
Did you or anyone in your	Has anyone appli			one receive	Subsidized !	Housing?			in the househole
household serve in the U.S.Military?	for a VA pension	?	post-secor Financial				4	a US citize	1?
Constitution y .					Utility Allo S	wance?			
Total number of	Number seeking		Total #	of	Is anyone sanct	ioned by TANF?	1	If so, who	ind date:
people in household:	assistance:		people	for					
			whom applicar	ntie	I	EE-HCAR			
			seeking		Is anyone disqu	alified by GA?			
			assistan	ce:					
PEOPLE LIVING W	ITH THE APPLIC	ANT	RELATI	ONSHIP	DOB	Birthplace		OCIAL CURITY#	Disabled(D Veteran (V
1.									
2.									
3.									
4.									
5.									
6.									
7.									
8.									

THO THE TOT MEMBERS OF THE HOUSEHOLD					
1. Name:	2. Name:				
Mailing Address:	Mailing Address:				

## Appendix A

Effective: 10/01/22-09/30/23

## GA Maximums

- Maximums are calculated annually.
- Two types of maximums:
  - Categorical maximums
  - Overall maximum
- Housing maximums are based on HUD FMR amounts for each county and metropolitan area.
- Food maximums are based on Federal SNAP allotments.
- Maximums are agreed upon by the GA Program Manager, the MWDA legal department, and the MWDA Board of Directors.
- Updated appendices are provided to municipalities for adoption. New appendices must be adopted by each municipality at a public hearing.

## Metropolitan Areas

### Persons in Household

COUNTY	1	2	3	4	5*
Bangor HMFA: Bangor, Brewer, Eddington, Glenburn, Hampden, Hermon, Holden, Kenduskeag, Milford, Old Town, Orono, Orrington, Penobscot Indian Island Reservation, Veazie	826	955	1,219	1,515	2,071
Cumberland County HMFA: Baldwin, Bridgton, Brunswick, Harpswell, Harrison, Naples, New Gloucester, Pownal, Sebago	1,016	1,075	1,409	1,865	1,991
Lewiston/Auburn MSA: Auburn, Durham, Greene, Leeds, Lewiston, Lisbon, Livermore, Livermore Falls, Mechanic Falls, Minot, Poland, Sabattus, Turner, Wales	795	859	1,099	1,427	1,728
Penobscot County HMFA: Alton, Argyle UT, Bradford, Bradley, Burlington, Carmel, Carroll plantation, Charleston, Chester, Clifton, Corinna, Corinth, Dexter, Dixmont, Drew plantation, East Central Penobscot UT, East Millinocket, Edinburg, Enfield, Etna, Exeter, Garland, Greenbush, Howland, Hudson, Kingman UT, Lagrange, Lakeville, Lee, Levant, Lincoln, Lowell town, Mattawamkeag, Maxfield, Medway, Millinocket, Mount Chase, Newburgh Newport, North Penobscot UT, Passadumkeag, Patten, Plymouth, Prentiss UT, Seboeis plantation, Springfield, Stacyville, Stetson, Twombly UT, Webster plantation, Whitney UT, Winn, Woodville	789	792	1,043	1,302	1,420
Portland HMFA: Cape Elizabeth, Casco, Chebeague Island, Cumberland, Falmouth, Freeport, Frye Island, Gorham, Gray, Long Island, North Yarmouth, Portland, Raymond, Scarborough, South Portland, Standish, Westbrook, Windham, Yarmouth; Buxton, Hollis, Limington, Old Orchard Beach	1,263	1,463	1,893	2,415	2,958
Sagadahoc HMFA: Arrowsic, Bath, Bowdoin, Bowdoinham,	874	1.031	1.253	1.650	1.880

2022-2023 GA Overall Maximums

Oct 1, 2022 to Sept 30, 2023

## OVERALL MAXIMUMS

## Persons in Household

1	2	3	4	5
\$826	\$955	\$1,219	\$1,515	\$2,071

Household of 6 = \$2,146 \* Add \$75 for each additional person

## FOOD MAXIMUMS

Persons	Weekly	Monthly
1	\$65.35	\$281
2	\$120.00	\$516
3	\$172.09	\$740
4	\$218.37	\$939
5	\$259.53	\$1,116
6	\$311.40	\$1,339
7	\$344.19	\$1,480
8	\$393.26	\$1,691

Add \$211 per month for each + person

## HEATING FUEL

Month	Gallons	Month	Gallons
September	50	January	225
October	100	February	225
November	200	March	125
December	200	April	125
		May	50

NOTE: When the dwelling unit is heated electrically, the maximum amount allowed for heating purposes will be calculated by multiplying the number of gallons of fuel allowed for that month by the current price per gallon. When fuels such as wood, coal and/or natural gas are used for heating purposes, they will be budgeted at actual rates, if they are reasonable. No eligible applicant shall be considered to need more than 7 tons of coal per year, 8 cords of wood per year, 126,000 cubic feet of natural gas per year, or 1000 gallons of propane.

## HOUSING MAXIMUMS

	UNHEATED		UNHEATED Heated		<b>Ieated</b>
BEDROOM	Weekly	Monthly	Weekly	Monthly	
0	\$161	\$691	\$189	\$811	
1	\$181	\$780	\$218	\$938	
2	\$231	\$992	\$279	\$1,198	
3	\$288	\$1,238	\$347	\$1,491	
4	\$402	\$1,729	\$475	\$2,042	

## PERSONAL CARE & HOUSEHOLD SUPPLIES

Number in Household	Weekly Amount	Monthly Amount		
1-2	\$10.50	\$45.00		
3-4	\$11.60	\$50.00		
5-6	\$12.80	\$55.00		
7-8	\$14.00	\$60.00		
NOTE: For each additional person add \$1.25 per week or \$5.00				

NOTE: For each additional person add \$1.25 per week or \$5.00 per month.

#### SUPPLEMENT FOR HOUSEHOLDS WITH CHILDREN UNDER 5

When an applicant can verify expenditures for the following items, a special supplement will be budgeted as necessary for households with children under 5 years of age for items such as cloth or disposable diapers, laundry powder, oil, shampoo, and ointment up to the following amounts:

Number of Children	Weekly Amount	Monthly Amount
1	\$12.80	\$55.00
2	\$17.40	\$75.00
3	\$23.30	\$100.00
4	\$27.90	\$120.00

\*\*\*New - Appendix H Revisions

Burial Maximum: \$1,475 Cremation Maximum: \$1,025

## ELECTRIC

NOTE: For an electrically heated dwelling also see "Heating Fuel" maximums below. But remember, an applicant is not automatically entitled to the "maximums" established applicants must demonstrate need.

 Electricity Maximums for Households Without Electric Hot Water: The maximum amounts allowed for utilities, for lights, cooking and other electric uses excluding electric hot water and heat:

Number in Household	Weekly	Monthly		
1	\$19.95	\$85.50		
2	\$22.52	\$96.50		
3	\$24.97	\$107.00		
4	\$27.53	\$118.00		
5	\$29.88	\$128.50		
6	\$32.55	\$139.50		
NOTE: For each additional person add \$10.50 per month.				

 Electricity Maximums for Households <u>With</u> Electrically Heated Hot Water: The maximum amounts allowed for utilities, hot water, for lights, cooking and other electric uses excluding heat:

Number in Household	Weekly	Monthly
1	\$29.63	\$127.00
2	\$34.07	\$146.00
3	\$39.67	\$170.00
4	\$46.32	\$198.50
5	\$55.65	\$238.50
6	\$58.68	\$251.50
NOTE: For each add per month.	ditional person	add \$14.50

1-800-442-6003

Revised 09/06/2022

## Basic Necessities

Basic needs include (but are not limited to):

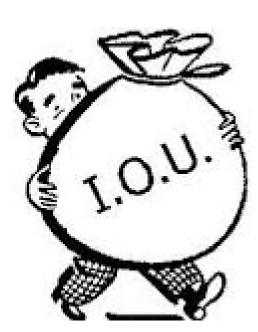
- Rent/Mortgage
- Food
- Personal/Household Supplies
- Utilities
- Medications
- Non-Prescription medications (Tylenol, etc.)



# NON-Essentials Not Basic Necessities

Items not considered basic needs include (but are not limited to):

- ▶ Internet/Cable television
- Cigarettes/Alcohol
- Costs of trips or vacations
- Credit Card & Loan debt
- Gifts Purchased
- Late fees
- Legal Fees & Court fines
- Pet Care Costs

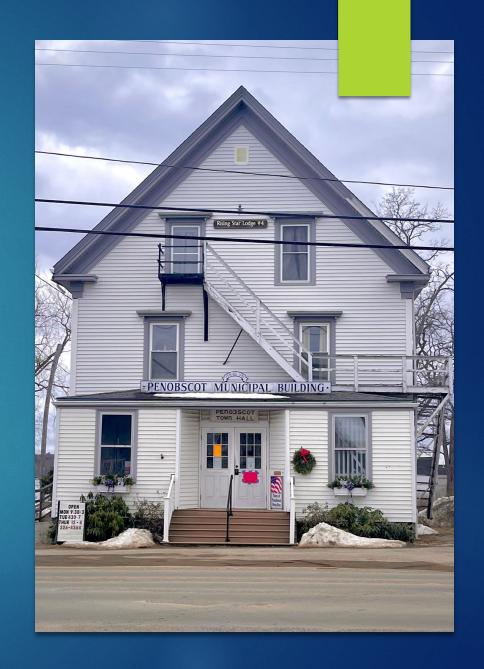






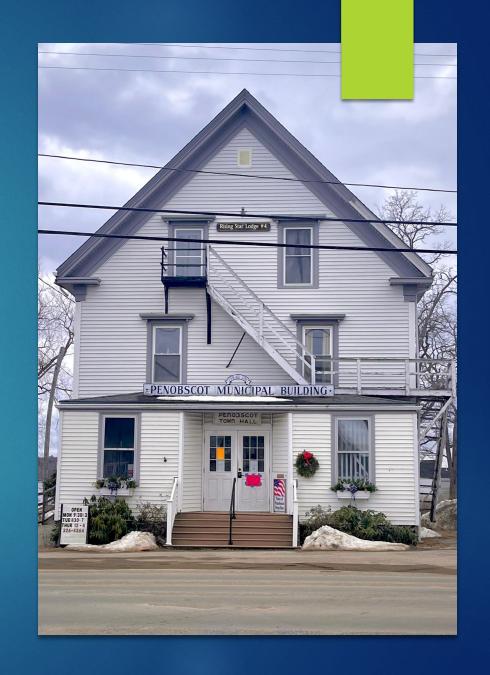
## Application Duration

- The maximum duration of an application period is 30 days:
  - Depending on the municipality, assistance may be issued weekly, bi-weekly, monthly or otherwise.
  - For repeat applicants, or first-time applicants not in an emergency, once the budgeted amount of eligibility is issued, the municipality is not required to continue assisting the applicant for the remainder of that 30-day application period.



# Eligible Person

- "Eligible person" means a person who is qualified to receive general assistance from a municipality according to standards of eligibility set forth in statute, rules and municipal ordinance
- A person who is lawfully present
- A person who is pursuing a lawful process to apply for immigration relief except that assistance may not exceed 24 months
- "Eligible person" does not include a person who is a fugitive from justice



## Emergencies

- Living in a place that is not fit for human habitation, including, but not limited to, a car, abandoned building, park, or bus or train station;
- Living in an emergency shelter;
- Living in temporary housing (hotel, motel, unlicensed campsite etc.)
- Losing the person's or household's primary nighttime residence and lacking the resources or support to remain in that residence; or
- Fleeing or attempting to flee violence, exploitation in the form of human trafficking, or persecution as a member of any group or category protected under law, and has no other residence.



# Determination of Eligibility

## Decisions of eligibility will note any requirements for future applications

- Future requirements for eligibility may include:
  - Work requirement
  - Doctors statement
  - Bank statement
  - Attendance of any work-related courses
  - Liquidation of any assets
  - Application for any other assistance program that may lower the amount of GA needed in the future (SNAP, TANF, LiHEAP etc.)

#### Please Read Both Sides Carefully

## **Notice of General Assistance Eligibility**

	Date: 6/6/2023
ear Hope Smith	
ou have been found eligible to receive General Assistance fro	om 6/6/2023 (date) to
/5/2023 (dat	e), for the following reason(s):
You are in need (your income is less than the maximum 4301(8A), 4301(10), 4305, 4308)	levels in the ordinance). (22 M.R.S.A. §§ 4301(7),
You are eligible for emergency assistance (22 M.R.S.A.	§§ 4308(2), 4315-A)
You will receive the following assistance:	
Type	Amount
lent	<b>\$</b> 950.00
ood	\$.100.00
	\$
	Total: \$ 1,050.00
order to be eligible for any assistar	nce in the future:
You must do the following items that are checked:	
Benefits: Apply for the following within 7 days:	
	Crisis (EA) Subsidized Housing
	oloyment Comp. Veterans Benefits
✓ Food Stamps  Worke  V  V  V  V  V  V  V  V  V  V  V  V  V	rs' Comp. Other:
Fuel Assistance (HEAP/ECIP) SSI/SS	SDI
<ul> <li>Assets: You must make a good-faith effort to liquidate the</li> </ul>	ne following assets:
Bank Account Retirement Account	(IRA) Recreational Vehicle
Stocks/Bonds Real Estate (other ti	
Life Insurance Vehicle	Other:
Work/Education:	
✓ Diligently seek work at 5 places a week	
✓ Visit the CareerCenter Office for job counseling and	placement
Apply for vocational rehabilitation training	
Apply for ASPIRE	
	- Resume Writing Tuesdays & Thursdays 1-2pm
Seek budget counseling at	
Sign up for and complete workfare	
Provide a doctor's statement describing any limitation limited.	ons in your ability to work and period of time you will be
Other:	

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) report any changes in household size/income/assetts.

You must apply for work at 5 places each week and complete the work search log. You must attend 1 resume writing class at the career center and provide proof of having done so. OR -If you feel that you cannot work for any reason physically or mentally, you must provide a doctors statement.

# Determination of Ineligibility

Decisions of ineligibility will note the reason for ineligibility.

- Denials:
  - Over income
  - Did not complete previous requirements (searching for work, providing bank statements, applying for benefits etc.)
- Disqualifications (120 days):
  - Job ended without just cause
  - Fraud/False representation

### Please Read Carefully

## **Notice of General Assistance Ineligibility**

	Date: 6/6/2023
ear Von Jones	:
u have been found ineligible to receive General Assistance for the follo	wing reason(s):
You are not in need (your income exceeds the maximum levels or you (22 M.R.S.A. §§ 4301(10), 4305, 4315-A)	ou have sufficient available resources.
You are over income and there is no emergency. (22 M.R.S.A. § 430	08)
You refused to search for employment as required. (22 M.R.S.A. § 4	4316-A)
You refused to register for work. (22 M.R.S.A. § 4316-A)	
You refused to accept a suitable job offer. (22 M.R.S.A. § 4316-A)	
You refused to participate in a training or education program as direct	,
You failed to perform or complete workfare. (22 M.R.S.A. § 4316-A)  You quit work without just cause or were fired for misconduct. (22 M.R.S.A.)	
You refused to utilize a potential resource after being instructed to in	
You willfully made a false representation about your eligibility. (22 M.	- ,
You did not report changes in your income or other circumstances at	- ,
You did not provide or permit me to gather the necessary verification (22 M.R.S.A. § 4309)	n and documentation as requested.
Other:	
planation:	
ore information is needed to determine eligibility: (1) Bank state ) Completed landlord form; (3) Employer statement with the dat ) Tax return date and amount received (bank statement or online	te and reason your last job ended;
,	• ′
squalification Period: You are ineligible to receive General Assis	stance:
for 120 days	
for 120 days—unless you regain your eligibility by complying with the	e work requirement(s)
until you attempt to make use of the following potential resources:	
for 120 days from separation from employment, or until (date)	
Other:	
portant: If you disagree with this decision, please feel free to discus aring. A person who was not involved in this decision will decide whether air Hearing, you must request a hearing in writing within 5 working 3/2023 (date). You have the right to be represented the sesses and written evidence on your behalf. Forms to request a hearing	er you are eligible for assistance. If you would li ng days of when you receive this notice or t d by an attorney, at your expense, and to prese
also have the right to contact the State Department of Human Servicision violates state law.	ces in Augusta (1-800-442-6003) if you think th
ou have any questions, do not hesitate to contact me. Please read the	other side of this decision.
	Sincerely,
	General Assistance Administrator

# Eligibility & Ineligibility Determinations

- Decisions will also contain information regarding:
  - Requirements for reporting and usage of future income.
  - ► The applicant's right to request a fair hearing within 5 days of receipt of the decision.
  - The Department's toll-free number to the GA Hotline if the applicant feels the decision violates state law.

### 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.

General Assistance Administrator

Sincerely.

Nº 12964	20	-1
To (Vendor)		- _
For (Client)		_ III
	PRICE	HOTH
Rent or Mortage		N X
Household supplies - No Alchol or Tabacco produ	ucts	V 255
Electricity		000
Prescriptions		NV0
Heating Fuel		MPANYINV
Other (List):		Olicz
Charge to: WELFARE DEPT. TOWN OF FAIR	RFIELD	

ACCOL	INT	#:
		_



131 CHURCH STREET BELFAST, MAINE 04915

## PURCHASE ORDER 52166

Date \_\_\_\_\_\_

	Deliver to:	
Quantity	Description	Amount

The City is responsible only for bills accompanied by a purchase order. The white copy of this purchase order must be returned with bill before payment will be made.

Department Head Signature

City of Belfast

131 Church Street Belfast, ME 04915 (207) 338-3370 ext. 120 Purchase Order

Purchase Order # 000949

VENDOR: HANNAFORD

93 LINCOLNVILLE AVE. BELFAST, ME 04915 SOLD TO: City

City of Belfast General Assistance 131 Church Street Belfast, ME 04915

Voucher Date	Vendor Code	Acct T	уре	Acct C	ode	Department
12/08/2020	1027			510-5	579	GENERAL ASSISTANCE
CLIENT: TOM TEST 1156 BELFAST M BELFAST, M				OUNT NOT EXCEED	Can be us Food	ed only for the following:

THIS ORDER NOT TO BE USED FOR TOBACCO, ALCOHOL, PET PRODUCTS, MAGAZINES, OR OTHER NON-ESSENTIAL ITEMS.

\*\*\*\*\*\*\*\*\* NO BOTTLE DEPOSITS, DELI AND BAKERY FOODS ALLOWED. \*\*\*\*\*\*\*\*

js (AUTHORIZED BY)	Please enter actual amount of purchase  Cash register slip must be attached to this order to assure proper payment.
To be signed at Social Se	rvices To be signed at time of nurchase

A signatures must match A

DO NOT ACCEPT IF THIS VOUCHER HAS BEEN ALTERED IN ANY WAY
DO NOT ACCEPT PHOTOCOPIES
DUPLICATION OF THIS DOCUMENT IS CONSIDERED FRAUD

Return to City of Belfast 131 Church Street Belfast, ME 04915 for payment.

VOID AFTER 7 DAYS

GL Summary 510-579

\$0.01

## DHHS GA Hotline

Municipal administrators and clients can call with questions or concerns. The GA Hotline can walk someone through the application process, answer questions, and assist with complaints or disputes.

- ► GA -Hotline:
  - **1-800-442-6003**
  - ► GAHotline.DHHS@maine.gov
  - Staffed Monday-Friday 8:00-5:00. Messages received after hours will be returned the following business day.