



***TOWN OF AUBURN***

***WELFARE GUIDELINES***

***ADOPTED – August 25, 2014***

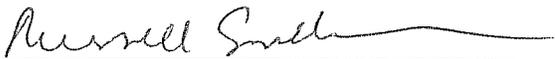
September 2, 2014

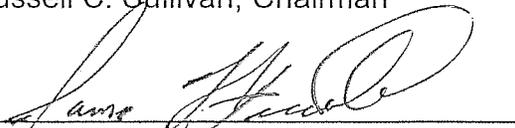
Pursuant to the provisions of New Hampshire Revised Statutes Annotated (RSA) 165:1 (II), the Auburn Board of Selectmen adopted the following written guidelines relative to the provision of general assistance by the Town of Auburn.

These guidelines were effective upon the vote of the Auburn Board of Selectmen on August 20, 2014.

All previous Welfare Guidelines, amendments and practices previously adopted by the Auburn Board of Selectmen are rescinded with the adoption of these guidelines.

By Order of:  
AUBURN BOARD OF SELECTMEN

  
\_\_\_\_\_  
Russell C. Sullivan, Chairman

  
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James F. Headd, Selectman

  
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Richard W. Eaton, Selectman

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**TOWN OF AUBURN**  
**WELFARE GUIDELINES**

**I. DEFINITIONS**

**APPLICANT:** A person who expresses a desire to receive General Assistance or to have their eligibility reviewed and whose application has not been terminated. This may be expressed either in person or by an authorized representative of the applicant.

**APPLICATION** (RE-APPLICATION): Action by which a person or their authorized representative requests assistance from a Welfare Official that indicates to the Welfare Official that the applicant is found actually without sufficient assets or resources and for the time being unable to support themselves or to supply immediate needs. The completion of a written application form generates the applicant's right to a Notice of Decision under Section XII of these Guidelines.

**APPLICATION FORM:** Written confirmation that a person has made an application . This application must be made on a form acceptable to the municipality. (See Form A)

**AVAILABLE LIQUID ASSETS:** Amount of liquid assets after exclusions enumerated in Section VIII (C) (7). Includes cash on hand, bank deposits, credit union accounts, and securities. IRA (Individual Retirement Account), 401K accounts and Insurance policies with a loan value and non-essential personal property shall be considered as available liquid assets when they have been converted into cash.

**ASSETS:** All real property, cash, personal property, expectancies and future interests owned by the applicant.

**CASE RECORD:** Official files of forms, correspondence and narrative records pertaining to the application, with determination of initial or continuing eligibility, reasons for decisions and action by the Welfare Official, and kinds of assistance given.

**CLAIMANT:** A person who has requested, either in person or through an authorized representative, a fair hearing under Section X of these Guidelines.

**ELIGIBILITY:** Determination by a Welfare Official, and with the assistance of the Guidelines, of a person's poverty and inability to support themselves, therefore, the need for General Assistance under the formula of Section VIII.

**FAIR HEARING:** A hearing which the applicant or recipient may request to contest a denial, termination or reduction of assistance. The standards for such a hearing are in Section XV.

**MINOR:** A person under 18 years of age.

**NEED:** The basic maintenance and support requirements of a person, as determined by a Welfare Official under the Standards of Section VIII (E) of these Guidelines.

**REAL ESTATE:** Land, structures and fixtures attached to it.

**RECIPIENT:** A person who is receiving General Assistance.

**RESIDENCE:** A person's place of abode or domicile that is designated by a person as their principal place of physical presence for the indefinite future to the exclusion of all others. Such residence or residency shall not be interrupted or lost by a temporary absence from it, if there is an intent to return to such residence or residency as the principal place of physical presence.

**VOUCHER SYSTEM:** The system whereby a community issues vouchers directly to the recipient's vendors and creditors rather than cash to the recipient. (See Section VI)

**WELFARE OFFICIAL:** The official of the town or city, or their designee, who performs the function of administering General Assistance. Such person has the authority to make all decisions regarding the granting of assistance under RSA 165, subject to the overall fiscal responsibility vested in the board of selectmen. The term includes "overseers of public welfare" (RSA 165:1; 41:46) and "administrator of town or city welfare" (RSA 165:2).

## II. **SEVERABILITY**

If any provision of these Guidelines is held at law to be invalid or inapplicable to any person or circumstances, the remaining provisions will continue in full force and effect.

## III. **CONFIDENTIALITY OF INFORMATION**

Information given by or about an applicant or recipient of General Assistance is confidential and privileged, and is not a public record under the provisions of RSA 91-A. Such information will not be released to or discussed with any individual or agency without written permission of the applicant or recipient except when disclosure is required by law, or when necessary to carry out the purposes of RSA 165.

## IV. **MAINTENANCE OF RECORDS**

Each Welfare Official is required by law to keep complete records of General Assistance. In addition to general statistical records concerning the number of persons given assistance and the cost for such support, a separate case record shall be established for each individual or family applying for General Assistance. (RSA 41:46)

The purposes for keeping complete records of General Assistance are:

1. To provide a valid basis of accounting for expenditure of the municipality's funds.
2. To support decisions concerning the applicant's eligibility (especially important if a Welfare Official should be required to prove in court that assistance was granted equitably).
3. To assure availability of information if the applicant or recipient seeks administrative or

judicial review of the Welfare Official's decision.

4. To provide social welfare agencies with accurate statistical information.

5. To provide a complete history of an applicant's assistance that might aid a welfare agency in the effort to rehabilitate the applicant (subject to the Guidelines on the confidentiality of such information).

The Welfare Official shall maintain case records containing the following information:

1. The complete application for assistance.

2. Written grounds for approval or denial of application, contained in a Notice of Decision.

3. A narrative history recording need for relief, the results of home visits, if any, collateral information, referrals, changes in status, etc.

4. A tally sheet, which has complete data concerning the type, amount and dates of assistance given.

5. A signed release of information authorization by the applicant allowing the Welfare Official to release, obtain or verify any pertinent information in the course of assisting the recipient.

6. Communications between the Welfare Official and Town Counsel shall not be part of the case record, but shall be confidential.

## V. **APPLICATION PROCESS**

### A. **Right to Apply**

Anyone may apply for General Assistance by completing a written application form. Either the Application or the Notice of Decision form shall notify the applicant of their right to a fair hearing if they are dissatisfied with the Welfare Official's decision. If more than one adult resides in a household, all adults residing in the household shall be required to be included on the application for General Assistance and meet with the welfare official if requested as part of the application process.

### B. **Welfare Official's Responsibilities at Time of Application**

When application is made for General Assistance, the Welfare Official shall inform the applicant of:

1. The requirement of submitting a written application.

2. Eligibility requirements.

3. The applicant's right to a fair hearing, and the manner in which a review may be obtained.

4. The applicant's responsibility for reporting all facts necessary to determine eligibility.

5. Joint responsibility of the Welfare Official and applicant for exploring facts concerning eligibility, needs and resources; and the applicant's responsibility for presenting records or documents to support their statements. The Welfare Official may assist the applicant in completing the application.

6. Kinds of verification needed.

7. The fact that an investigation will be conducted in an effort to substantiate the facts and statements as presented by the applicant and that this investigation may take place prior to, during, or subsequent to the applicant's receipt of General Assistance.
8. The applicant's responsibility for notifying the Welfare Official of any change in circumstances which will affect eligibility.
9. Any other programs of assistance or service that the Welfare Official may know of, if the applicant appears ineligible for General Assistance, or of which the applicant may avail themselves in addition to receiving General Assistance.
10. The requirement of placing a lien on any real property owned by the recipient for any assistance given, except for good cause.
11. The fact that recovery from applicant is possible they become able to repay the amount of assistance given.
12. The applicant's right to review the Guidelines.

### **C. Responsibility of each Applicant and Recipient**

At the time of initial application, and at all times thereafter, the applicant has the following responsibilities:

1. To provide accurate, complete and current information concerning their needs and resources and the whereabouts and circumstances of relatives who may be responsible under RSA 165:19.
2. To notify the Welfare Official within 72 hours when a change in needs or resources may affect eligibility for continuing assistance.
3. Within 7 days of application, to apply for and utilize any benefits or resources, public or private, that will reduce or eliminate the need for General Assistance.
4. To keep all appointments as scheduled.
5. To notify the Welfare Official within 72 hours of a change of address and any changes in members of household.
6. To diligently search for employment and provide verification of application for employment when requested.
7. To accept employment when offered.
8. To provide a doctor's statement if the applicant claims an inability to work due to medical problems.
9. To participate in the welfare work program if physically and mentally able.

An applicant shall be denied assistance if they fail to fulfill any of these responsibilities without reasonable justification.

Any person may be denied or terminated from General Assistance who, by means of intentionally false statements or intentional misrepresentation or by impersonation or other willfully fraudulent act or device obtains or attempts to obtain any assistance to which they are not entitled.

### **D. Actions on Applications**

Unless an application is withdrawn, the Welfare Official will make a decision concerning the applicant's eligibility immediately or within five (5) working days after submission of the written

application form.

If, at any time the application is received, the applicant demonstrates and verifies that an immediate need exists, because of which the applicant may suffer irreparable harm if aid is withheld until a decision is made within the usual limit specified in these guidelines (e.g. food, heat, prescriptions), then temporary aid to fulfill such immediate needs shall be given immediately, pending a decision on the application.

When a decision has been made on an application, the applicant will be informed in writing (within three (3) working days after the date of decision) that assistance of a stated kind or amount has been given, or that the application has been denied, with reasons for denial. In circumstances where required records are not available, the Welfare Official may give temporary approval to an application pending receipt of required documents. Temporary status shall not extend beyond two (2) weeks. The Welfare Official shall not insist on documentary verification if such records are totally unavailable.

An application shall be considered withdrawn if:

1. The applicant has failed to cooperate in completing an application or provide sufficient information for the completion of an application.
2. The applicant dies before assistance is rendered.
3. The applicant avails himself of other resources in place of assistance.
4. The applicant requests that the application be withdrawn.
5. The applicant does not contact the Welfare Official after the initial interview after being requested to do so.

#### **E. Home Visits**

A home visit may be made to each applicant. The applicant shall be informed that a visit will be made within specified hours. At the applicant's request, a specific appointment may be made if the Welfare Official is available at the requested time and date.

The home visit is necessary for the Welfare Official to understand all the services needed to help the applicant. The Welfare Official will guard against such violations of legal rights and common decencies as entering the home by force without permission, or under false pretenses, making home visits outside working hours, particularly during sleeping hours, and searching in the home (i.e. in rooms, closets, drawers, or papers to seek clues to possible deceptions).

During the home visit the Welfare Official may discuss any noticeable applicable housing code violations with the applicant and insure that all violations are reported to proper authorities. The Welfare Official will follow up on all reported violations and may insure that reprisal actions taken by the landlord are also reported to proper authorities.

Refusal to grant home visits, without reasonable justification, shall be grounds for terminating or denying assistance.

## VI. VERIFICATION OF INFORMATION

Any determination or investigation of need or eligibility shall be conducted in a manner that will not violate privacy or personal dignity of the individual or harass or violate his or her individual rights.

1. Verification will normally be required of the following:

- a. Applicant's address.
- b. Names and incomes of persons residing with applicant.
- c. Applicant's income and assets.
- d. Applicant's financial obligations.
- e. Applicant's physical and mental condition where relevant.
- f. Any special circumstances claimed by applicant.
- g. Applicant's employment status and availability in the labor market.
- h. Names, addresses, and employment status of potentially liable relatives.
- i. Utility costs.
- j. Housing costs.
- k. Facts relevant to the person's residence, as set forth in Section IX.

2. Verification may be made through records provided by the applicant (for example, birth and marriage certificates, pay stubs, pay checks, rent receipts, bankbooks, etc.) as primary sources. The failure of the applicant to bring such records does not affect the Welfare Official's responsibility to process the application promptly. The Welfare Official shall inform the applicant what records are necessary, and the applicant is required to produce records possessed as soon as possible. However, the Welfare Official shall not insist on documentary verification if such records are not available.

3. Verification may also be made through other sources, such as relatives, employers, banks, school personnel, and social or government agencies. The cashier of a national bank or a treasurer of a savings and trust company are authorized by law to furnish information regarding amounts deposited to the credit of an applicant or recipient. (RSA 165:4).

4. When information is sought from such other sources, the Welfare Official shall explain to the applicant or recipient what information is desired, how it will be used, and the necessity of obtaining it in order to establish eligibility. Before contact is made with any other source, the Welfare Official shall obtain written consent of the applicant or recipient, unless the Welfare Official has reasonable grounds to suspect fraud. In the case of suspected fraud, the Welfare Official shall carefully record his or her reasons and actions, and before any accusation or confrontation is made, the applicant shall be given an opportunity to explain or clarify the suspicious circumstances.

5. Should the applicant or recipient refuse comment and indicate an unwillingness to have the Welfare Official seek further information which is necessary, assistance will be denied for lack of eligibility verification.

6. The Welfare Official may use home visits for verification purposes. See Section V(E).

## VII. DISBURSEMENTS

The municipality pays in a voucher system. It deals directly with the vendor, (e.g. agencies, landlords, stores, etc.) involved. Tobacco products, alcoholic beverages and pet food cannot be purchased with the voucher. If there is any unspent money, the voucher shall be returned to the municipality for payment of the actual amount listed on an itemized bill or register tape.

In addition, the amount shown on the voucher is the amount to be used for payment. An applicant may not exceed the amount listed on the voucher, nor may he change the amount listed. An applicant must sign the voucher to insure proper usage. The vendor returns the voucher with an itemized bill or register tape, for payment, to the Town of Auburn.

## VIII. DETERMINATION OF ELIGIBILITY AND AMOUNT

### A. Formula

A person is eligible to receive assistance when (1) he/she meets the non-financial eligibility factors listed in Section C below, and (2) when the applicant's basic maintenance need, as determined under Section E below, exceeds his/her available income (Section F below) plus available liquid assets (Section D below). If available income and available liquid assets exceed the basic maintenance need (as determined by the guideline amounts), the person is not eligible for general assistance. If the need exceeds the available income/assets, the amount of assistance shall be the difference between the two amounts, in the absence of circumstances justifying an exception.

### B. Legal Standard and Interpretation

"Whenever a person in any town is poor and unable to support himself he shall be relieved and maintained by the Overseers of Public Welfare of such town, whether or not he has residence there." (RSA 165:1)

1. A person cannot be denied assistance because he is not a resident. (See Section IX).
2. "Whenever" means at any or whatever time that person is poor and unable to support him or herself.
  - a. The Welfare Official, or a person authorized to act on his or her behalf, shall be available by appointment, but applications for general assistance are available at the Auburn Town Hall during normal working hours.
  - b. The eligibility of any applicant for General Assistance shall be determined no later than five (5) working days after the application is submitted.
  - c. Assistance shall begin as soon as the person is determined to be eligible.
3. "Poor and unable to support" means that an individual lacks income and available liquid assets to adequately provide for the basic maintenance needs of himself or family as

determined by the Guideline maintenance amounts.

4. "Relieved" means a person shall be assisted to meet those basic needs.

### **C. Non-Financial Eligibility Factors**

1. Age: General Assistance cannot be denied any person because of the person's age; age is not a factor in determining whether or not a person may receive General Assistance. (However, age does make certain persons eligible for other kinds of state or federal assistance e.g. over 65: Old Age Assistance, Social Security; or under 18: AFDC, foster care, etc. Income from those other types of assistance does affect eligibility under the Guidelines).

2. Support Actions: No applicant or recipient shall be compelled, as a condition of eligibility or continued receipt of assistance, to take any legal action against any other person. The town may pursue recovery against legally liable persons or governmental units. (See Section XV).

3. Eligibility for Other Categorical Assistance: Applicants or recipients whom the Welfare Official believes may be eligible for any other form of public assistance must apply for such assistance within one week after being advised to do so by the Welfare Official. Failure to do so will render applicant or recipient ineligible for assistance until he/she makes such application. Unless and until another form of public assistance is received, a person otherwise eligible is entitled to receive General Assistance. Only in extraordinary circumstances will a person receiving another form of public assistance also be considered as potentially eligible for General Assistance (See RSA 167:27).

4. Employment: A person who is gainfully employed, but whose income and assets are not sufficient to meet necessary family expenses, may be eligible to receive General Assistance. However, applicants who without good cause refuse a job offer or referral to suitable employment are ineligible for General Assistance. The Welfare Official should determine whether there is good cause for such refusal, taking into account the ability, and physical and mental capacity of the person, transportation problems, working conditions that might involve risks to health or safety, or lack of workmen's compensation protection, lack of adequate child care, or any other factors that might make refusing a job reasonable.

5. Registration with the N.H. Department of Employment Security & Work Search (DES): Registration with DES is not necessary for initial eligibility for General Assistance. However, all recipients and adult members of their families should, within one week after having been granted assistance, register with DES to find work and must conduct an adequate work search. Each applicant must apply for employment to each employer to whom he is referred by the Welfare Official. The Welfare Official may require a reasonable number of daily job applications.

These work search requirements apply unless the applicant or adult member of his family is: (a) gainfully employed; (b) a dependent 18 or under who is regularly attending school; (c) unable to work due to illness or disability of another member of the household; (d) responsible for the care of a child under the age of five (5) (RSA165:31, III).

6. A person responsible for the care of a child aged five (5) to 12, shall not be excused

from work search requirements, but shall be deemed to have good cause to refuse a job requiring work during hours the child is not usually in school, if there is no responsible person available to provide care, and no other care is available.

The Welfare Official should give all necessary and reasonable assistance to ensure compliance with registration and work requirements, including the granting of allowances for transportation and work clothes. The Welfare Official may contact DES to verify the fact that the recipient has registered with DES, or he may ask to see the recipient's DES identification card. Merely because DES has determined that a person is not eligible for unemployment compensation does not mean that the recipient will no longer be eligible for General Assistance. Failure of the applicant to comply with these requirements without good cause will be reason for denial of assistance.

7. Students: Students refusing full-time employment are not eligible for general assistance.

#### **D. Available Assets**

1. Available Liquid Assets: Cash on hand, bank deposits, credit union accounts, and securities are available liquid assets., Insurance policies with a loan value, and non-essential personal property, maybe considered as available liquid assets when they have been converted into cash. The Welfare Official shall allow a reasonable time for such conversion. However, tools of a trade, livestock and farm equipment, and necessary and ordinary household goods are essential items of personal property which shall not be considered as available assets.

2. Automobile Ownership: The ownership of one automobile by an applicant or his dependent does not affect eligibility if it is essential for transportation to seek employment, to procure medical service or rehabilitation services, or if its use is essential to the maintenance of the individual or the family.

Car payments shall not be included as part of "need" when determining eligibility or amount of aid.

3. Insurance: The ownership of insurance policies, in and of itself, does not affect eligibility. However, when a policy has cash or loan value, the applicant will be required to obtain and/or borrow all available funds, which shall then be considered available liquid assets. Premium payments shall not be included in "need" when determining eligibility or amount of aid (medical insurance excepted).

4. Real Estate: The type and amount of real estate owned by an applicant does not affect eligibility, although rent or other such income from property should be considered as available to meet need. Applicants owning real estate property, other than that occupied as a home, shall be expected to make reasonable efforts to dispose of it at fair market value. Applicants shall be informed that a lien covering the amount of any General Assistance they receive may be placed against any real estate they own.

#### **E. Standard of Need**

The basic financial requirement for General Assistance is that a person be poor and unable to support himself. A person shall be considered poor when he has insufficient available income/assets to purchase either for himself or his dependents. ***Extraordinary needs may be counted as allowed expenses for purposes of determining eligibility for aid at the discretion of the Welfare official.***

1. Shelter: The amount to be included as "need" for shelter is the weekly cost of rent necessary to provide shelter. Such cost is determined by examining multiple factors including, but not limited to, local market conditions and availability. The cost determined will be periodically reviewed by the Welfare Official and the Auburn Board of Selectmen. Applicants will be apprised of the amounts allowed. No shelter arrearages will be included in the "need" formula, but every effort will be undertaken to prevent eviction. Whenever a relative of an applicant is also the landlord for the applicant, that landlord will be expected to assist his relatives pursuant to RSA 165:19, and must prove an inability to assist before any aid payment for shelter is made. Security deposits are not included in the "need" formula.

1a. Manufactured Home Loans differ from normal mortgages. They are required to carry fire insurance. Unless an agreement can be made with the lender, insurance is a factor that may be included in the "need" formula.

1b. Mortgage interest payments shall not exceed HUD Fair Market rents or local market factors whichever is less.

1c. Home equity loans shall not be considered as shelter "need".

2. Utilities: When utility costs are not included in the rental expense, the most recent outstanding monthly utility bill will be included as part of "need" by the Welfare Official. Arrearages will not be included except when necessary to ensure the health and safety of the applicant.

3. Food: The amount included as "need" for food purchases will be in accordance with the most recent standard food stamp allotment, as determined under the food stamp program administered by the N.H. Department of Health & Human Services under RSA 161:2 (XIII). **The Town of Auburn strives to provide the recipients of local assistance with food through a collaborative effort of the Town and a local non-profit Food Pantry. Unless required due to some extraordinary circumstance(s) or emergency, as determined by the Welfare Official, the Town of Auburn will not issue food vouchers.**

More than the food stamp allotment may be granted if a physician has stated in writing that one or more members of the family needs a special diet, the cost of which is greater than can be purchased with the family's allotment of food stamps.

4. Maintenance Allowance: Supplementary orders may be issued under extenuating circumstances to provide maintenance necessities for personal or household supplies where need is demonstrated.

5. Telephone: If the absence of a telephone would create an unreasonable risk to the

recipient's health or safety (verifiable in writing by a physician), the lowest available basic monthly rate will be budgeted as "need".

6. Emergency and Other Expenses: In the event that the applicant has the following current expenses, their actual cost shall be included as emergency and other expenses to determine eligibility and amount of assistance:

a. Medical etc. The Welfare Official shall not consider including amounts for medical, dental or eye services unless the recipient or applicant can verify that all other potential sources have been investigated and that there is no other source of assistance other than local welfare. Other sources to be considered shall include state and federal programs, local and area clinics, are service organizations and area hospital programs (including the Hill-Burton Act) designed for such needs. When a person applies for medical service, prescriptions, dental service or eye service to the local Welfare Official, he must provide written documentation from a doctor, dentist or person licensed to practice optometry in the area, indicating that these services are absolutely necessary and cannot be postponed without creating a significant risk that the applicant or recipient's well being will be placed in serious jeopardy.

b. Where the recipient owns a home and is otherwise eligible for General Assistance, payments necessary to prevent foreclosure and protect the health and safety of the recipient may be included in "need".

c. Except for those specifically required by statute, no legal expenses will be included.

d. No moving expenses shall be included, except the expense of returning a person to his residence at his request pursuant to RSA 165:1-c.

e. Emergencies not otherwise provided for in these Guidelines.

If the Welfare Official determines that the applicant's needs have substantially changed, or that strict application of the Standard of Need criteria will result in unnecessary or undue hardship (e.g. needed services are inaccessible to the person), such Official may make minor adjustments in the criteria, or may make allowances using the emergency need standards stated in Section V (D) of these Guidelines. Any such determination, and the reasons therefore, shall be stated in writing in the applicant's case record.

## **F. Income**

In determining eligibility and the amount of assistance, the standard of need, as determined under Section E above, shall be compared to the available income/assets. Computation of income and expenses will be by the week or month. The following items will be included in the computation:

1. Earned Income: Income in cash or in-kind earned by the applicant and any member of his family or any adult residing in the household through wages, salary, commissions, or profit, whether self-employed or as an employee, is to be included as income. Rent income and profits from produce sold are in this category. With respect to self-employment, total profit is

arrived at by subtracting business expenses from gross income in accordance with standard accounting principles. When income consists of wages, the amount computed should be that available after income taxes, social security and other payroll deductions required by state, federal, or local law, court ordered support payments and child care costs, and work-related clothing costs have been deducted from income. Wages that are trustee, or income similarly unavailable to the applicant or applicant's dependents, should not be included.

2. Income or Support from Relatives: Contributions from relatives shall be considered as income only if actually received by the applicant or recipient.

3. Income from Other Assistance or Social Insurance Program: State categorical assistance benefits, OASDI payments, Social Security payments, VA benefits, unemployment insurance benefits, and payment from other government sources shall be considered income.

4. Food Stamps cannot be counted as income. The amount included as "need" for food purchases will be in accordance with the Federal Food Stamp allotment as administered by the Department of Health & Human Services (RSA 161:2). The Welfare Official will issue a food voucher to an eligible grocery store or supermarket according to food stamp allotment figures published by the Department of Agriculture for persons with zero income. This allotment will be adjusted to reflect the most current figures provided by DHS.

5. Court-ordered Support Payment: Alimony and child support payments shall be considered income only if actually received by the applicant or recipient.

6. Income from Other Sources: Payment from pension and trust funds and the like, shall be considered income. Any income actually available to the applicant or recipient from members of their household shall be considered as income.

7. Earnings of a Child: No inquiry shall be made into the earnings of a child 14 years of age or less unless that child makes a regular and substantial contribution to the family.

## IX. **MINIMUM HOUSING STANDARDS FOR RENTAL HOUSING**

The Welfare Official shall not pay rental assistance for any house or apartment that does not meet the minimum health and safety standards established in RSA 48-A:14. This law states that no landlord can rent a residential dwelling which has any of the conditions listed below:

1. The premises are infected by insects and rodents where the landlord is not conducting a periodic inspection and eradication program, or the premises are infested by bed bugs and the landlord is not conducting a periodic inspection and remediation program. In this paragraph "remediation" means action taken by the landlord that substantially reduces the presence of bed bugs in a dwelling unit for a period of at least 60 days.

2. There is defective internal plumbing or a back-up of sewage caused by a faulty septic or sewage system.

3. There are exposed wires, improper connectors defective switches outlets or other conditions which create a danger of electrical shock or fire.
4. The roof or walls leak consistently.
5. The plaster is falling or has fallen from the walls or ceilings.
6. The floors, walls or ceiling contain substantial holes that seriously reduce their function or render them dangerous to the inhabitants.
7. The porches, stairs or railings are not structurally sound.
8. There is an accumulation of garbage or rubbish in common areas resulting from the failure of the landlord to remove or provide a sufficient number of receptacles for storage prior to removal, unless the tenant has agreed to be responsible for removal under the rental agreement and the landlord has removed all garbage at the beginning of the tenancy.
9. There is an inadequate supply of water or whatever equipment that is available to heat water is not properly operating. (There must be potable water.)
10. There are leaks in any gas lines or leaks or defective pilot lights in any appliances furnished by the landlord.
11. The premises do not have heating facilities that are properly installed, safely maintained and in good working condition, or are not capable of safely and adequately heating all habitable rooms, bathrooms and toilet room to a temperature of at least an average of 65 degrees F.; or, when the landlord supplies heat in consideration for the rent, the premises are not actually maintained at a minimum average room temperature of 65 degrees F. in all habitable rooms.

*(These Minimum Housing Standards for Rental Housing are contained in RSA 48-A:14 and are also detailed in the New Hampshire Health Officer's Manual under "Housing".)*

Beyond the Minimum Housing Standards for Rental Housing listed above, rental housing must also have adequate smoke detector(s) in compliance with the Life Safety Code in order to be eligible for public assistance payments by the Town.

The Welfare Official may conduct an inspection of any rental housing to see that the house or apartment meet the above listed health and safety standards, and/or may have another town official (i.e. - building inspector, health officer, member of the board of health (a selectman), fire inspector or police officer perform this inspection or accompany the Welfare Official in performing the inspection.

## **X. SCHEDULE OF RENTS / MORTGAGES**

Depending on family size, rental rates to be allowed by the **Town of Auburn** may range from \$666 to \$1,135 per month in units which include heat as part of the rent; \$626 to \$1,052 per month in units which do not include heat as part of the rent.

*(The rental range noted above is based on an efficiency apartment with no designated bedroom on the low end to a two-bedroom apartment on the high end. The ranges come directly from the U.S. Housing and Urban Development (HUD) FY 2014 Fair Market Rents and 2014 Utility Allowance for the Manchester, NH HUD Metropolitan Fair Market Rent Area.)*

### **A. Rents & Mortgages Paid per Bedroom**

Rents and Mortgages shall be paid on a per bedroom need basis. The following schedule shall apply:

- Single person - 1 bedroom
- Two cohabiting people - 1 bedroom
- Two non-cohabiting people - 2 bedrooms
- Parent and Child - 2 bedrooms
- Children under Age Six (6) - 2 to a bedroom regardless of sex
- Children over Age Six (6) - 2 to a bedroom, same sex
- Children over Age 12 - 1 bedroom

The Welfare Official maintains the ability to modify the outline listed above as situations may warrant.

### **B. Single Person Living with Family**

The number of bedrooms divided by the number of people living in the house equals the amount paid as rent by Town assistance. Other assistance may be granted in addition to rent subsidy.

### **C. Relative Landlords**

Whenever a relative of an applicant is also the landlord for the applicant, the landlord will be presumed able to assist his/her relative pursuant to RSA 165:19, and must prove an inability to assist before any aid payment for shelter is made by the **Town of Auburn**.

## **XI NON-RESIDENTS**

A. **Eligibility:** No person shall be refused assistance solely on the basis of residence. (RSA 165:1).

B. **Standards:** The application procedure, eligibility standards and standard of need shall be the same for nonresidents as for residents.

C. **Verification:**

1. Verification records shall not be considered unavailable, nor the applicant's responsibility for providing such records relaxed, solely because they are located in the applicant's community of residence.

2. If a home visit to a residence outside the municipality is impractical, the decision shall be made on the basis of other sources of verification.

**D. Temporary or Emergency Aid:** The standards for the fulfilling of immediate or emergency needs of nonresidents, and for temporary assistance pending final decision shall be the same as for residents, as set forth in Section V (D).

**E. Determination of Residence:**

1. Minors: The residence of a minor shall be presumed to be the residence of his/her custodial parent or guardian, as designated by a legal decree or order of the State of New Hampshire.

2. Adults: For competent adults, the standard for determining residence shall be the overall intent of the applicant, as set forth in the Section I definition of "residence". The following criteria shall aid the Welfare Official in determining the applicant's residence:

a. Does the person have, or immediately intend to establish a dwelling place within the municipality?

b. Does the person have property, an established dwelling place or employment in any other municipality, to which he/she intends to return?

c. Does the person have a present intent to leave the municipality at some specific future time?

d. Has the person evidenced his domiciliary intent in some manner, such as registering a vehicle, paying residence tax, registering to vote, opening local bank accounts, etc., or does he/she intend to do so in the immediate future?

None of the above factors are conclusive. The statement of a person over 18 as to his/her residence or intent to establish residence shall be accepted in the absence of strongly inconsistent evidence or behavior.

**F. Return Home Transportation: (RSA 165:1-c)**

At the request of a nonresident applicant, any aid, temporary or otherwise, to which he/she would be otherwise entitled under the standards set forth in these Guidelines, may be used by the Welfare Official to cause the person to be returned to his/her community of residence.

**G. Recovery:**

Any aid given to a nonresident, including the cost of return home transportation, may be recovered from his/her community of residence using the procedures of Section XV.

## XII. **MUNICIPAL WORK PROGRAMS**

A. Anyone receiving General Assistance may be required to work at any available bona fide job that is within his capacity. (RSA 165:31). Applications shall be encouraged to apply for available town positions for which they are qualified.

B. In no case shall a recipient/worker be paid or allotted less than the minimum wage. All wages attributable to such employment shall be used to reimburse the locality for current assistance given. No recipient shall be required to work more hours than necessary to reimburse for aid rendered. Employment under this section shall continue for as long as assistance is required and received.

C. If, due to lack of available town work or other good cause, a recipient does not work a sufficient number of hours to fully compensate the town for the amount of his aid, the full amount of aid for which he is eligible under these standards shall still be paid.

D. The town shall provide reasonable time during working hours for recipient to secure work in the labor market.

E. Refusal to work does not include failure to appear for or to perform work where the applicant:

1. Has a conflicting interview for a job possibility.
2. Has a conflicting interview at a service or welfare agency.
3. Has a medical appointment or illness.
4. Must care for children under the age of 6. A person responsible for a child over 6 but under 12 shall be deemed to have good cause to refuse to work during hours the child is not in school, if there is no responsible person available to provide care, and no other care is available.
5. Must remain at home because of illness or disability to another member of the household (verified in writing by a physician).
6. Does not possess the materials or tools required to perform the task and the municipality fails to provide them.

## XIII. **BURIALS**

The Welfare Official shall provide for proper burial, at municipal expense, of assisted persons found in the community at time of death. The expense may be recovered from the deceased person's municipality of residence, or from a liable relative. If relatives, other private persons, the state or other sources will not cover the entire burial expenses, the municipality should pay up to state allowance for burial. (RSA 165:3).

Assistance with burial costs will only be paid by the Town Welfare Official when approval is authorized prior to the funeral and burial. Attempts by hospitals and funeral directors must be as vigorous as in the past to find relatives and payment.

A family member must come to the Welfare Official to apply for funeral assistance.

The Town will provide:

a. Cremation, with no burial, ashes to the family., or

b. Burial in least expensive casket with graveside service, and burial in local cemetery marked with a metal disk. There will be no calling hours and no embalming.

Total cost of the funeral and burial must not exceed \$700. If it exceeds \$700, no welfare payment will be made. Local welfare will contribute a maximum of \$500.

#### XIV. **RIGHT TO NOTICE OF ADVERSE ACTION**

All persons have a constitutional right to be free of unfair, arbitrary or unreasonable action taken by local government. This includes applicants for and recipients of General Assistance whose aid has been denied, terminated or reduced.

##### A. **Notice Required:**

1. Every applicant and recipient shall be given a written notice of every decision regarding assistance. The Welfare Officials make every effort to insure that the applicant understands the decision.

2. Whenever a decision is made to deny assistance or to refuse to grant the full amount of assistance requested, a notice of the decision shall be given or mailed to the applicant, within three (3) working days from the time the decision is made.

3. In any case where the Welfare Official decides to terminate or reduce assistance in advance of the next anticipated date of assistance, the official shall send notice at least seven (7) working days in advance to the recipient stating the intended action. The notice shall comply with Paragraph B (2) below.

##### B. **Contents of Notice:**

Where the application is granted, the notice shall state the type of assistance and the time period of the aid. Where the application is denied or the Official proposed to terminate or reduce assistance, the notice shall contain:

1. A clear statement of the reasons for the denial or proposed termination or reduction. If the denial, termination or reduction is due to the person's failure to comply with these Guidelines, the notice shall list the guidelines with which the person presently does not comply, those specific actions which are deemed necessary to meet those obligations, and a statement

of the consequences of noncompliance.

2. A statement advising the individual of his right to a fair hearing, and that any request for a fair hearing must be made in writing within five (5) working days.

3. A form on which the individual may request a fair hearing.

4. A statement advising the individual of the time limits which must be met in order to receive a fair hearing.

5. A statement that assistance may continue until the date of hearing if requested by applicant. Aid must be repaid if the applicant fails to prevail at the hearing.

A copy of the Notice of Decision shall be given or mailed to the applicant within three (3) working days after the decision is made, with a copy placed in the case file.

## XV. **FAIR HEARINGS**

### A. **Requests:**

A request for a fair hearing is a written expression, by the applicant or recipient, or any person acting for him, to the effect that he wants an opportunity to present his case to a higher authority.

### B. **Time Limits for Requests:**

When an application is denied, a request for a fair hearing must be received within five (5) working days of the denial.

### C. **Time Limits for Hearing:**

Hearings requested by claimants must be held within seven (7) working days of the receipt of the request. The Town of Auburn shall give notice to the claimant setting forth time and location of the hearing. This notice must be given to the individual at least 48 hours in advance of the hearing, or mailed to the individual at least 72 hours in advance of the hearing.

### D. **Procedures at the Hearing:**

1. A claimant or his duly authorized representative has the right to examine, prior to a fair hearing, all records, papers and documents from the claimant's case file which either party may wish to introduce at the fair hearing, as well as any available documents not contained in the case file but relevant to the Welfare Official's action of which the claimant complains.

The claimant may introduce any such documents, papers or records into evidence. No record, paper or document which the claimant has not been allowed to examine prior to the hearing shall be introduced at the hearing or become part of the record.

2. The Welfare Official (Director or a duly authorized representative) shall have the right to examine at the fair hearing all documents on which the claimant plans to rely at the fair hearing and may request a 24 hour continuance if such documents contain evidence not previously provided or disclosed by the claimant.

3. All Fair Hearings will be tape-recorded and retained indefinitely.

4. Procedures for Fair Hearings:

a. All fair hearings shall be conducted in such a manner as to insure due process of law.

b. Fair Hearings shall not be conducted according to strict rules of legal procedure and strict rules of evidence. However, in order to protect the right of cross-examination, the Fair Hearing official (the Board of Selectmen shall appoint a Fair Hearing Officer) shall not rely upon any hearsay evidence in making his decision if any party objects to its introduction.

c. The burden of proof shall be on the claimant, who shall be required to establish his/her case by a preponderance of the evidence.

d. The Welfare Official responsible for the decision complained of shall attend the hearing and testify about his actions and the reasons therefor.

e. Both parties shall be given the opportunity to offer evidence and explain their positions as fully and completely as they wish.

f. The claimant or his representative and the Welfare Official or his representative, shall have the opportunity to examine all records and documents used at the hearing. The claimant shall have the opportunity to present his case for himself or, at his option, with the aid of others, to bring witnesses, to establish all pertinent facts, to advance any arguments without undue interference, to question or refute testimony or evidence, including the opportunity to confront and cross-examine adverse witnesses.

g. The decision of the Fair Hearing Officer must be based solely on the record, in light of these guidelines. Evidence, both written and oral, which is admitted at the hearing shall be the sole contents of the record. The Fair Hearing Officer shall not review the case record or other materials prior to introduction at the hearing.

h. The parties may stipulate to any facts.

5. The Fair Hearing officer or officers shall be chosen by the Board of Selectmen. The person(s) serving as the Fair Hearing authority must:

a. Not have participated in the decision causing dissatisfaction.

b. Be impartial.

c. Be sufficiently skilled in interviewing to be able to obtain evidence and facts necessary for a fair determination.

d. Be capable of evaluating all evidence fairly and realistically, to explain to the claimant the laws and regulations under which the Welfare Official operated, and to interpret to Welfare

Officials any evidence of unsound, unclear or inequitable policies, practices or action.

**E. Decisions:**

1. Fair Hearing decisions shall be rendered within seven (7) working days of the hearing. Decisions shall be in writing setting forth the reasons for decision and the facts on which the Fair Hearing officer relied in reaching his decision. A copy of the decision shall be mailed or delivered to the claimant and to the Welfare Official.

2. Fair Hearing decisions will be rendered on the basis of the officer's findings of fact, these regulations and state and federal law. The fair hearing decision shall set forth appropriate relief.

3. The decision shall be dated. In the case of a hearing to review a denial of aid, the decision is retroactive to the date of the action being appealed. If the recipient fails to prevail at the hearing, the assistance given pending the hearing shall be a debt owed by the individual to the municipality.

4. The Welfare Official shall keep all fair hearing decisions on file in chronological order.

5. None of the procedures specified herein shall limit any right of the applicant or recipient to subsequent court action to review or challenge the adverse decision.

**XVI. LIENS:**

1. The law requires the Town to place a lien for welfare aid received on any real estate of an assisted person in all cases except for just cause. (RSA 165:28). Selectmen shall file the Notice of Lien with the County Registry of Deeds, complete with the owner's name and a description of the property sufficient to identify it. The lien remains in effect during the lifetime of a person or until the amount of the lien is repaid to the municipality. Upon repayment of a lien, the municipality must file written notice of the discontinuance of the lien with the County Registry of Deeds. A sample notice of lien is included in the appendix. (Form K).

2. Liens on Civil Judgment (RSA 165:28-a):

a. A town or city shall be entitled to a lien upon property passing under the terms of a will or by intestate succession, a property settlement, or a civil judgment for personal injuries awarded any person granted assistance by the town under RSA 165:28-a the amount of assistance granted by the town.

b. The town shall be entitled to the lien only if the assistance was granted no more than six (6) years before the receipt of the inheritance or the award of the property settlement or civil judgment, provided that this section shall not apply to inheritances, property settlements, or civil judgments awarded before August 28, 1981.

c. This lien shall take precedence over all other claims.

## **XVI. APPLICATION OF RENTS PAID BY THE MUNICIPALITY**

Whenever the owner of property rented to a person receiving assistance under these guidelines is in arrears in sewer, water, electricity or tax payments to the municipality, the municipality may apply, upon approval of the governing body (Board of Selectmen), the assistance which the property owner would have received in payment of rent on behalf of such assisted person to the property owner's delinquent balances, regardless of whether such delinquent balances are in respect of property occupied by the assisted person. (RSA 165:4-a)

For purposes of this section, a payment shall be considered "in arrears" if more than 30 days have elapsed since the mailing of the bill or, in the case of real estate taxes, if interest has begun to accrue pursuant to RSA 76:13.

## **XVII PROCEDURE FOR BILLING AND RECOVERING FROM GOVERNMENTAL UNIT OF RESIDENCE OR RELATIVE:**

1. The amount of money spent by a municipality to support a person who has a residence in another municipality or has a father, mother, stepfather, stepmother, husband, wife or child (who is no longer a minor) or sufficient ability to also support the assisted person, may be recovered from the municipality of residence or the liable relative. However, written notice of money spent in support of an assisted person must be given to the liable relative. The Welfare Official shall make reasonable efforts to give such written notice prior to the giving of aid, but aid to which an applicant is entitled under these guidelines, shall not be delayed due to inability to contact possibly liable relatives. Any legal action to recover must be filed in a court within six (6) years after the expenditure. (RSA 165:19, 20 and 25).

2. The amount of money spent by a municipality to support a person who has made initial application for SSI and has signed an Interim Assistance Program Reimbursement Form, shall be recovered through the SSA and Department of Health and Human Services.

There shall be NO delay, refusal to assist, reduction or termination of assistance while the Welfare Official is pursuing the statutory remedies to secure reimbursement from responsible relatives.

## **XVIII. MEDICAL ASSISTANCE**

Applicants for general assistance who are in need of medical services may qualify for medical assistance programs administered by the State Division of Human Services and other agencies. The major programs are described below.

### **1. Medicaid**

The Medicaid (Medical Assistance) program is administered through the Division of Human Services to provide health care for all persons receiving categorical financial assistance (OAA, APTD, AFDC and ANB), and for certain persons not receiving it but who meet eligibility requirements, and do not have sufficient income to provide medical care for themselves. There are three categories:

1. "Categorically needy"-- These are people who are receiving state-administered financial assistance under one of the categorical programs (OAA, APTD, AFDC and ANB), or who would be eligible for those programs if they applied. Such persons are automatically eligible for categorical medical assistance.

2. "Medically needy"-- These are people who are not eligible for any categorical program, but whose income and resources are below certain income levels set as the "medically needy" limit.

3. "Medically needy in-and-out"-- These are persons whose income and resources are above the medically needy limit, but who incur actual medical expenses above and beyond their excess income ("excess" refers to the amount by which their income exceeds the medically needy limit). Thus while the "medically needy" eligibility is based solely on income and resources, the "in-and-out" eligibility is based on actual incurred medical expenses.

AFDC Medical Assistance. In addition to the above, there are three situations in which AFDC categorical medical assistance is available, even though the recipient is ineligible for non-medical AFDC assistance:

1. Children under 5 born after Oct. 1, 1983. (These children are eligible for AFDC medical assistance based solely on household income, regardless of whether they meet normal AFDC categorical requirements such as deprivation of parental support.)

2. Single pregnant woman with no other children, and not living with spouse or unborn child's father. (This program in essence extends AFDC medical benefits back to the conception of the soon-to-be-dependent child. All AFDC eligibility requirements apply except the presence of other dependent children in the household.)

3. Pregnant woman married to and living with unborn child's father, when either of them is the principal wage earner, has been unemployed for 30 days, and meets certain unemployment history requirements.

Medical assistance (in any of the above categories) may be granted retroactively for the three months prior to the month of application, provided the person meets all applicable eligibility requirements in those months for the category of assistance applied for, and also provided that retroactive coverage is specifically requested.

Medical assistance (Medicaid) recipients are issued a monthly medical ID card. They are eligible for medical services such as: outpatient hospital visits; inpatient hospital services; health clinics; physical, occupational, or speech therapy; psychological services; medical equipment; wheelchair van transportation; laboratory tests and diagnostic x-rays.

There are limits on the number of visits and services which are provided during a year and recipients are notified when they have reached the limit. ("Year" refers to the state fiscal year - July 1 through June 30.) General Assistance may have to "kick in" at this point if the person is eligible under your guidelines.

## 2. Medicare

Medicare is provided through the Social Security Administration to persons 65 or older, persons who have been receiving a Social Security disability benefit for 2 years or more, or persons who have chronic kidney disease and need a transplant or renal dialysis.

There are two types of Medicare available. Part A Medicare covers hospitalization expenses, inpatient care in a skilled nursing facility after a hospital stay, and care in the home by a home health agency. Most recipients do not pay any monthly premium for this type of protection.

Part B Medicare covers out-patient and physicians' expenses, and a number of other medical services and supplies for which the recipient pays a small monthly premium.

The Division of Human Services will "buy-in" to (i.e. pay the premium for) Medicare Part B coverage for those who are eligible for both Medicaid (see previous section) and Medicare part B. This is because Medicaid is funded partially by the state, which of course would rather have Uncle Sam pay for benefits covered by both programs. When "buy-in" has occurred, the Medicare B premiums cease to be deducted from the recipient's Social Security check, which is thus increased by the amount of the premium which the state has paid. If the client stops receiving SSI or Medicaid, buy-in terminates.

## 3. Dentures

The Professional Denture Care Program is a statewide denture referral program sponsored by the New Hampshire Dental Society. It is designed to provide professional care to those who cannot afford it. It is a program for which some welfare recipients may qualify, and is a source worth looking into if they need dentures. There are income eligibility requirements which must be met. Currently limits are not published. To find out those limits, contact your local Division of Human Services office.

The procedure for the program is as follows: The patient contacts the central office of the NH Dental Society (P.O. Box 2229, Concord; 225-5961) or the local DHS office to obtain an application. The applicant returns the form and is notified of acceptance or denial. An eligible patient is assigned to a dentist in his geographical area if possible. The patient contacts the dentist. There is no charge for the initial visit, but once treatment is decided upon, the patient (or the town if welfare office is paying for it) must forward payment to the central office. Treatment is not free, but it is much less than usual rates.

## 4. Prescription Drugs

The cost of prescribed medication is an expense which must be met through general assistance if the applicant is eligible, and has no other means to pay for it. For those applicants who are Medicaid-eligible, Medicaid will pay all but 75 cents of the cost of each prescription. The 75 cents collected from the applicant is called a co-payment. There is no yearly limit on the number of prescriptions someone can receive, but the size of each prescription is limited to a 34-day supply or a package of 100 tablets (whichever is greater). The 75 cent co-payment is not required for prescriptions that are for recipients under 18, pregnancy related, for nursing home patients, or for family planning items.

In some cases if the recipient cannot afford the 75 cent co-payment (using the normal eligibility standards under your guide-lines), then general assistance funds should be used to make the payment. In these instances a simple phone call to the pharmacy, or a pharmacist's agreement to participate in your voucher system, will assure that the recipient gets the medication he needs, even if it is after your usual business hours. Remember to check for Medicaid eligibility--it is certainly cheaper to pay only 75 cents rather than the entire cost of a prescription.

## **5. Veterans**

Veterans may be eligible for hospital care at a Veterans Administration hospital (e.g. the one in Manchester), or for admission to the Veterans' Home in Tilton. The Red Cross sometimes provides rides for medical care to veterans, or will make reimbursements for transportation costs, as will the VA. Widows of veterans sometimes get a small pension. Veterans or their widows can be brought up to date on service available by calling a VA hotline (1-800-562-5260).

APPENDIX A

ALLOWABLE LEVELS OF ASSISTANCE PAYMENTS FOR THE TOWN OF AUBURN

Established by vote of the Board of Selectmen, date: \_\_\_\_\_

MONTHLY SHELTER ALLOWANCES				
0 BR	1 BR	2 BR	3 BR	4 BR
\$626 ___\$	829 ____	\$1,052 _	\$1,310 _	\$1,484

**Heat**

Electric	\$43 - \$78	\$57 - \$103	\$85 - \$153	\$106 - \$204	\$121 - \$218
Oil	\$64 - \$112	\$87 - \$157	\$110 - \$205	\$141 - \$249	\$174 - \$317
Nat. Gas	\$40 - \$60	\$50 - \$79	\$61 - \$96	\$70 - \$112	\$84 - \$139
Bottled Gas	\$75 - \$132	\$103 - \$188	\$132 - \$241	\$160 - \$293	\$207 - \$372

(Top row is allowance for heated shelter. If unheated, add amounts indicated in "heat" columns to basic shelter cost in top row. Allowances reflect actual housing market as documented by U.S. Housing and Urban Development (HUD) FY 2014 Fair Market Rents and 2014 Utility Allowance for the Manchester, NH HUD Metropolitan Fair Market Rent Area.)

BURIAL ALLOWANCE: \$700 TELEPHONE ALLOWANCE: \_\_\_\_\_

OTHER (SPECIFY): \_\_\_\_\_

## APPENDIX B

# Explanation for Disqualification for Noncompliance with Guidelines

## NH RSA 165:1-b

The following is written to help explain and standardize the process of “Disqualification for Noncompliance with Guidelines,” RSA 165:1-b. Please refer to **FORM L - NOTICE OF DECISION** which may be used by your local welfare office.

Once you determine that an applicant is eligible and you provide assistance, you can impose conditions on the person’s continued receipt of assistance. The conditions may require the recipient to comply with written guidelines relating to:

- 1) Disclosure of income and resources,
- 2) Participation in a work program,
- 3) Conducting an adequate work search, and/or
- 4) Applying for public assistance through other agencies as outlined in the Model Guidelines.

Willful failure to comply with the conditions imposed can lead to the suspension of a recipient’s assistance, but there is a process which must be followed. Prior to suspension, a recipient must be given written notice from the local welfare office of the specific actions which must be taken and the recipient must be given at least seven (7) days in which to comply prior to suspension. There can be no exception.

The **Notice of Decision** form may be used to grant an assistance application and *simultaneously* give notice of the conditions imposed on the recipient’s continued receipt of assistance. The **Notice of Decision** form may also be used to give notice of the conditions that must be complied with, if that notice was not given at the time assistance was granted or if the conditions to be complied with have changed.

If a recipient does not comply with the conditions in the time period allowed, he/she can be “sanctioned” and his/her assistance suspended. How long the suspension lasts depends on whether there have been other suspensions within the previous 6 months and whether there are actions the recipient can take to come into compliance. A written decision (the **Notice of Decision** form can be used) must be given notifying the recipient of the term of the suspension, the specific reason(s) for the suspension citing the guidelines, any action(s) which must be taken to come back into compliance, and notice of the right to request a fair hearing within 5 days of receipt of the notice.

If this is a first sanction, assistance may be suspended for seven (7) days. If it is possible for the recipient to take action(s) to come into compliance, then assistance can remain suspended after the seven (7) day period *and until* such time as the recipient takes the action(s) required to come into compliance (e.g. recipient only made 3 work search contacts instead of 10-the recipient must complete 7 more work search contacts; e.g. the recipient failed to apply for food stamps-if the recipient applies within the initial 7 day suspension, then the suspension ends after 7 days, otherwise, the suspension continues until the recipient applies). After the 7 day suspension period, the sanction must be lifted upon compliance with the condition.

If this is the second sanction (or more) for the recipient within a 6 month period, assistance may be suspended for 14 days. The reason for the sanction need not relate to previous sanctions to extend the suspension period to 14 days. If it is possible for the recipient to take action to come into compliance, then assistance can remain suspended after the 14 day period and until compliance, as described above.

**If more than six months elapses between the first and second sanctions, follow the procedures for a first sanction.**

All notices of decision telling a recipient that he/she has been suspended must provide an opportunity for the recipient to request a fair hearing. If the recipient timely requests a hearing, the welfare officer must provide the recipient with the option of continuing to receive assistance consistent with any prior eligibility determination until the fair hearing decision is made. If there is a dispute over whether the recipient has taken the actions required to come back into compliance, the recipient must be provided the opportunity for a fair hearing on that issue, but there shall be no assistance provided pending the outcome of that hearing.

The welfare officer is not required to accept applications for assistance during a period of suspension.

APPENDIX C

**ADOPTED ETHICS RESOLUTION ON RESPONSIBILITY FOR  
PERSONS WHO CHANGE THEIR RESIDENCE WHILE,  
OR AS A RESULT OF, APPLYING FOR LOCAL WELFARE**

(New Hampshire Local Welfare Administrators Association)

I. “Dumping” is hereby declared to be an unethical practice. For purposes of this resolution, “dumping” consists of attempting to end, or avoid acquiring, a local welfare financial responsibility by encouraging, persuading or pressuring a client:

- A. not to establish, or to discontinue, a residence in the town which he/she has applied for assistance, or
- B. to establish a residence in another town.

II. In order to avoid “dumping” the following standards should be observed:

A welfare administrator should not encourage, direct, or knowingly allow a client who has applied for assistance in his/her town to apply for assistance in another town without making a good faith effort to contact the welfare administrator in that other town to explain why the person is coming to the other town. This applies whether or not the welfare administrator has accepted initial financial responsibility for the person (i.e. treat him/her as a resident) unless:

- A. he/she has an established place of abode (specific address, place to sleep) in another town which he/she intends to return to (even for just one night – i.e., hasn’t moved out of yet), or
- B. he/she has NO established place of abode ANYWHERE, (i.e., any prior specific address was in some other town and has been abandoned) AND has a specific intent to go somewhere else rather than staying in the town for any time.

(Even when an applicant falls into A. or B. above, some temporary, non-resident assistance may be necessary, depending on the circumstances, in order to send the person on his/her way.)

III. Where a town has accepted initial financial responsibility under paragraph II above, the welfare administrator should not grant any assistance which he/she knows will be used so as to help establish the recipient’s residence in another town, unless:

- A. a good faith effort is made to explore local resources, after which it is discovered that none within reason is available, or
- B. unless the client has indicated an intent to move to another town for some non-welfare-related reason.

In either case the welfare administrator who has accepted initial financial responsibility should contact the official of the other town and offer to pay up to one month’s assistance following the move if necessary.

Towns must avoid “special” treatment. If a town never pays security deposits, the town must not pay security deposits in special instances to establish a client’s residence elsewhere. The sending town should

pay actual allowable shelter costs as determined by the receiving town's guidelines.

#### **IV. Residency**

According to RSA 126-A:43-h, persons receiving emergency housing (shelter) shall continue to maintain their legal residence as it existed at the time of entering the emergency housing facility. When a person leaves the originating shelter of their own free will, the liability no longer remains the responsibility of the original town. A person does not gain or lose residency while in a shelter, hospital or treatment center.

Persons who are sanctioned by local welfare, and arrive in another community, are not the liability of the community where the sanction originated. However, arrangements may be made between the two communities to have the sanction resolved.

*APPENDIX D*

**NEW HAMPSHIRE WELFARE BENEFIT PROGRAMS**

BENEFIT	PERSONS PROGRAM STANDARDS	SOURCE ELIGIBLE	GOV'T WHICH OF FUNDS	GOV'T WHICH SETS ADMINISTERS
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**TOWN**

<b>1. Town Welfare</b> RSA 165:1, I	Poor and in need	Local Property Tax	Town	Town
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**STATE**

<b>2. APTD</b> Aid to the Permanently & Totally Disabled RSA 167:6, VI	Low income Adults 18-64 Permanently & Totally Disabled	County & State	State	State
<b>3. OAA</b> Old Age Assistance RSA 167:6, I	Low Income Adults, 65 and over	County & State	State	State
<b>4. ANB</b> Aid to Needy Blind RSA 167:6, IV	Low Income Blind Adults	State	State	State
<b>5. TANF</b> Temporary Assistance to Needy Families 42 USC §601 RSA 167:6, V	Low Income Families with Dependent Children	State & Federal	State	Federal & State

**FEDERAL**

<b>6. Food Stamps</b> 7 USC §2011	Lower Income	Federal Households	State	Federal
<b>7. SSI</b> Supplemental Security Income 42 USC §1831	Low Income	Federal	Federal	Federal

# TOWN OF AUBURN APPLICATION FOR ASSISTANCE

Date of Application \_\_\_\_\_ Referred by \_\_\_\_\_

## 1. General Information:

Name \_\_\_\_\_ Date of Birth \_\_\_\_\_

Address \_\_\_\_\_

Telephone \_\_\_\_\_ Social Security number \_\_\_\_\_ US Citizen? \_\_\_\_\_

Marital Status \_\_\_\_\_ Marriage Date \_\_\_\_\_ Separation Date \_\_\_\_\_

Spouse/Co-Applicant Name \_\_\_\_\_ Date of Birth \_\_\_\_\_

Spouse address (if not same as applicant) \_\_\_\_\_

Telephone \_\_\_\_\_ Social Security number \_\_\_\_\_ US Citizen? \_\_\_\_\_

Marital Status \_\_\_\_\_ Marriage Date \_\_\_\_\_ Separation Date \_\_\_\_\_

**Assistance Requested** \_\_\_\_\_

Reason for request \_\_\_\_\_

Have you applied for local assistance before? \_\_\_\_\_ When? \_\_\_\_\_

Where? \_\_\_\_\_ Under what name? \_\_\_\_\_

### List below all persons living in your household:

Full Name	Relationship	Date of Birth	Social Security #
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

**2. Housing Information:**

Rent or Own? \_\_\_\_\_ How long at this address? \_\_\_\_\_

**If at your current address less than 12 months, please list past 12 month's addresses:**

Street Residence	Town/City	State	Dates of
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Rent amount \_\_\_\_\_ per (month/week) \_\_\_\_\_ Date last paid \_\_\_\_\_ Date due \_\_\_\_\_

Do you have a current:  Demand For Rent  Notice to Quit  Landlord/Tenant Writ

Total rent owed \_\_\_\_\_ Do you have a housing subsidy? \_\_\_\_\_

Utilities Included:  Heat  Electric  Gas  Water/Sewer  Other

LANDLORD: Name \_\_\_\_\_ Telephone \_\_\_\_\_

Address \_\_\_\_\_

IF HOME-OWNER: Mortgage Amount \_\_\_\_\_ Date last paid \_\_\_\_\_ Owed \_\_\_\_\_

Bank/Mortgage Co \_\_\_\_\_ Address \_\_\_\_\_

**3. Education / Training / Employment**

	Highest Grade Attended	G.E.D. or Diploma	Special Training or Skills	Military Service
Applicant:	_____	_____	_____	_____
Spouse/Co-Applicant:	_____	_____	_____	_____

**Applicant Work History:**

Are you employed now? \_\_\_\_\_ Employer \_\_\_\_\_ Position \_\_\_\_\_

When began work \_\_\_\_\_ Date/Amount of most recent check \_\_\_\_\_

Are you unemployed now? \_\_\_\_\_ Reason \_\_\_\_\_

Date last worked \_\_\_\_\_ Employer \_\_\_\_\_ Date/Amount last check \_\_\_\_\_

Are you able to work now? \_\_\_\_\_ If not able, why not? \_\_\_\_\_

**Co-Applicant/ Spouse Work History:**

Are you employed now? \_\_\_\_\_ Employer \_\_\_\_\_ Position \_\_\_\_\_  
 When began work \_\_\_\_\_ Date/Amount of most recent check \_\_\_\_\_  
 Are you unemployed now? \_\_\_\_\_ Reason \_\_\_\_\_  
 Date last worked \_\_\_\_\_ Employer \_\_\_\_\_ Date/Amount last check \_\_\_\_\_  
 Are you able to work now? \_\_\_\_\_ If not able, why not? \_\_\_\_\_

**Current and two most recent jobs of yourself and all household members aged 18 & older:**

<u>Name</u>	<u>Employer</u>	<u>Pay</u>	<u>Weekly/ Biweekly</u>	<u>Employment Dates</u>	<u>Reason for Leaving</u>
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

**4. Household Assets:**

**Provide information regarding accounts held by you and all household members:**

<u>Name</u>	<u>Bank/Credit Union</u>	<u>Savings Acct. #</u>	<u>Savings Balance</u>	<u>Checking Acct. #</u>	<u>Checking Balance</u>
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

**Provide current value of any assets held by you and all household members:**

Cash on hand (all household combined) \_\_\_\_\_ Certificates of Deposit (CD's) \_\_\_\_\_  
 Savings Bonds \_\_\_\_\_ Mutual Funds \_\_\_\_\_ Annuities \_\_\_\_\_ Stocks \_\_\_\_\_  
 Trust Funds \_\_\_\_\_ Retirement Accounts \_\_\_\_\_ Insurance Policies (cash value) \_\_\_\_\_  
 401k \_\_\_\_\_ Property other than primary residence \_\_\_\_\_ Location \_\_\_\_\_  
 Other Investments \_\_\_\_\_ Motorcycles/Boats/Snowmobiles/ATV's/RV's \_\_\_\_\_  
 Other Assets (please list) \_\_\_\_\_

**Claims/settlements/income due to you or any household member**

IRS Refund \_\_\_\_\_ Insurance Claim \_\_\_\_\_ Retroactive disability check \_\_\_\_\_

Retroactive Unemployment or Worker's Compensation check \_\_\_\_\_ Inheritance \_\_\_\_\_

Other Lump Sum Payment (explain) \_\_\_\_\_

**Have you or any household member consulted a lawyer regarding a possible lawsuit?:**

Lawyer Name/Address \_\_\_\_\_

Reason \_\_\_\_\_

**Do you or any household member have a lawsuit pending? \_\_\_\_\_ Who? \_\_\_\_\_**

Please give details \_\_\_\_\_

Lawyer Name/Address \_\_\_\_\_

**Motor vehicles owned by you and all household members:**

<u>Owner</u>	<u>Auto Make</u>	<u>Model</u>	<u>Year</u>	<u>Value</u>	<u>Payments</u>	<u>Insurance</u>
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____

**Are you or any other household member working, volunteering, and/or receiving assistance from any other agencies?**

<u>Name</u>	<u>Agency Name</u>	<u>Contact Person</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____



**6. Household Expenses**

**List actual or estimated regular monthly expenses.** (Not all expenses will be allowable to be included in your eligibility determination, but all should be listed to show your financial situation.)

Bank Fees _____	Diapers _____	Mortgage _____
Bus/Cab _____	Electric _____	Prescriptions _____
Cable/Internet _____	Food _____	Rent _____
Child Support Paid _____	Fuel Oil _____	Rent-To-Own _____
Car Gasoline _____	Gas, Bottled _____	School Loan _____
Car Insurance _____	Gas, Natural _____	Storage _____
Car Payment _____	Health Insurance _____	Telephone _____
Condo Fee _____	Laundry _____	Other _____
Child Care _____	Loan _____	Other _____
Credit Card _____	Lot Rent _____	Other _____

**List unplanned, emergency or irregular periodic expenses during the past 30 days:**

Car Inspection _____	Drivers License _____	Medical _____
Car registration _____	Fines/Court Payments _____	Sewer/Water _____
Car repair _____	Home Reparis _____	Tax (Income/Property) _____
Dental _____	Home/Rent Insurance _____	Other _____

**7. Criminal Information**

Have you or any member of your household ever been convicted of a felony which has not been annulled? (yes/no) \_\_\_\_\_ If yes, who? \_\_\_\_\_ When? \_\_\_\_\_

Town/City & State of conviction \_\_\_\_\_ Details of conviction: \_\_\_\_\_

Are you or any member of your household presently on parole or probation? (yes/no) \_\_\_\_\_

If yes, who? \_\_\_\_\_ Court or jurisdiction? \_\_\_\_\_

Name & phone number of parole/probation officer \_\_\_\_\_

**8. Liability for Support Information**

Please provide following details:

Your father \_\_\_\_\_ Address \_\_\_\_\_

Your mother \_\_\_\_\_ Address \_\_\_\_\_

Co-applicant father \_\_\_\_\_ Address \_\_\_\_\_

Co-applicant mother \_\_\_\_\_ Address \_\_\_\_\_

Your or co-applicant's adult children \_\_\_\_\_

**9. Certifications and Signatures**

I understand that if I receive assistance from the municipality I may be required to participate in the welfare work (“workfare”) program. (RSA 165:31)

I understand that I may be required to repay any assistance provided, after deduction of the value of workfare hours I have completed, if I am returned to an income status which enables me to reimburse without financial hardship. (RSA 165:20-b).

I understand that if I am assisted the municipality may place a lien against any real property which I own. (RSA 165:28)

I hereby certify that if I have a lawsuit, worker’s compensation claim, or aid from any other social service agency now pending, I have listed these in this application. I further agree to notify the Welfare Official immediately upon receipt of any money from or upon the settlement of such claim. I understand that if I am assisted, the municipality may place a lien against any property settlement or civil judgment for personal injuries which I receive within six years of receiving municipal assistance. (RSA 165-28a)

I hereby certify that the information I have provided on this application is complete to the best of my knowledge and belief and provides a true summary of my income, assets and needs. I understand I may be required to provide documents and/or other forms of verification to prove the information requested on this application. I hereby certify that all information I will provide in response to questions asked by the welfare official is true and complete to the best of my knowledge and belief. I understand that if I knowingly give false information or withhold information related to my receipt of assistance, now or in the future, I may be prosecuted for the crime of Unsworn Falsification (RSA 641:3)

I understand that if I obtain a job after I am assisted by the municipality, and I later quit the job without good cause, I may be ineligible for local assistance from the municipality and any other New Hampshire municipality for a period of up to ninety days. (RSA 165:1-d)

I understand that if I am a recipient of Temporary Assistance for Needy Families (TANF) cash benefits and I fail to comply with TANF regulations, leading to a sanction and loss of income, the municipality may, under certain circumstances, disregard this decrease in my income. (RSA 165:1-e)

\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Spouse or Co-applicant Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of person completing form  
(if not applicant)

\_\_\_\_\_  
Date