ROSS TOWNSHIP

STANDARDS FOR THE ADMINISTRATION OF
TOWNSHIP ASSISTANCE

Submitted by: Joseph D. Shudick, Jr.
Ross Township Trustee

Effective: January 1, 2019

Filed: Lake County Commissioners Office
Lake County Attorney – Hearing Office
Introduction

The Township Trustee Office administers an emergency Township Assistance program to assist needy Ross Township residents. Those seeking assistance must follow the application procedure prescribed in these Standards in Section III. They cannot exceed the family financial eligibility standards as listed in Section IV. They must reside in Ross Township, which has the same boundaries as the Merrillville Community Schools. Generally, the Ross Township boundaries are 53rd Avenue on the north, 101st Avenue on the south, County Line Road on the east and Clark Road on the west.

After the properly completed application, (including all requested documentation) has been completed the Township Assistance staff will make a determination of eligibility within three working days following the interview, provided further investigation is not required. Every reasonable effort will be made to expedite extreme emergency conditions.

Applicants in good health approved for assistance must participate in the Ross Township Workfare Program as required by these Standards and applicable law.

Assistance may be available for the following necessities:

FOOD – prior to receiving food stamps
SHELTER – rent or mortgage (excluding escrow) payments
UTILITIES – excluding cable, internet, phone bills and bills more than 30 days old
MEDICAL – prescriptions-non-narcotic only, doctor/dentist bill. However, no bills incurred prior to approval of the Township Assistance application will be considered.
TRANSPORTATION – emergency travel for transients towards home or fuel costs
OTHER – household commodities and clothing necessities

The Township Trustee’s office acts as a referral agent to various agencies since applicants may require assistance the Trustee’s office cannot provide on a long-term basis.

These Standards are prepared and adopted for the administration of the Ross Township Assistance Program and include the following sections:

I. General Information
II. Basic Eligibility Criteria
III. Application Procedures
IV. Financial Eligibility Standards
V. Reimbursement of Assistance
VI. Workfare
VII. Asset Eligibility Standards
VIII. Non-Financial Eligibility Standards
IX. Services Provided
X. Reasons for Rejection
XI. Appeal Rights
I. GENERAL INFORMATION
The Ross Township Trustee’s office, located at 26 W. 73rd Avenue, Merrillville, Indiana, 46410, is open Monday through Friday from 8:00 am to 4:00 pm. (excluding weekends and Holidays). The office is closed for lunch noon to 1 pm. The telephone number is 219/769-2111. The township answering machine will answer your call when the office is closed. If you leave a message we will return your call within 24 hours, excluding weekends.

The Trustee’s office will treat each person who comes in for assistance in a courteous manner. If you feel you have been mistreated, your written comments should be sent to Joseph D. Shudick, Jr. No signature is necessary.

II. ELIGIBILITY
An applicant is eligible for Township Assistance if he/she complies with the application procedures and meets both the financial and non-financial eligibility guidelines and is in compliance with Indiana’s Statutes for residency. Township residents must have a Indiana driver’s license or state ID with a current township address.

III. APPLICATION PROCEDURE
A person interested in applying for assistance must come in person (except bedridden applicants) to the Trustee’s office with a picture I.D. with a current township address and a current utility bill listing a Ross Township address and follow the procedure outlined below:

A. Applicants must read the Township Assistance Standards available at the Trustee office or on-line at our website: rosstownship.org
B. If they believe they meet the eligibility requirements an initial application will be provided (this may be printed out on line or picked up at the trustee’s office).
C. The initial application packet must be filled out completely, and all requested documents must be submitted at the time of the appointment.
D. Once the initial application is filled out completely and all documentation has been gathered, you must call the Trustee’s Office to schedule an appointment for an interview with the Township Assistance Investigator.
E. After the interview a decision will be made within three (3) working days after all required documentation has been submitted. The process may include a home visit.
F. The applicant will be given a written notice of the Trustee’s Action and reason supporting the action on the State Board of Accounts Form TA 1-A (Notice of Action).
G. Applications must be updated each time an applicant applies for continuing assistance and all changes must be noted.

Recipients may be eligible for assistance once every thirty (30) days. The applicant must call the Trustee’s office to schedule these appointments. The Trustee may not extend continuing aid to any individual or a household without an affidavit affirming any changes of their condition. The affidavit will be provided by the Trustee and must be completed each month, Form TA – 1B, Application for Additional or Continuing Township Assistance.
IV. FINANCIAL ELIGIBILITY STANDARDS

Applicants who have received less than the **gross household income, resources, or subsidies** in the last 30 days under the following **Income Standards** may qualify for Township Assistance:

<table>
<thead>
<tr>
<th>Number of Persons In Household</th>
<th>Gross Income In Previous Month</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>$900</td>
</tr>
<tr>
<td>2</td>
<td>$1214</td>
</tr>
<tr>
<td>3</td>
<td>$1528</td>
</tr>
<tr>
<td>4</td>
<td>$1842</td>
</tr>
<tr>
<td>5</td>
<td>$2156</td>
</tr>
<tr>
<td>6</td>
<td>$2470</td>
</tr>
<tr>
<td>7</td>
<td>$2784</td>
</tr>
<tr>
<td>8</td>
<td>$3098</td>
</tr>
</tbody>
</table>

For each additional person add $125

The last 30 days of gross income, resources or subsidies will be subtracted from the above dollar amounts.

A. Gross income is defined as total monetary resources available to the household from any source before any deductions are taken. Examples are wages, salaries, tips, bonuses, loans, unemployment compensation, Social Security benefits, pensions, tax refunds, child support, vouchers, subsidies, TANF, and early withdrawals from retirement plans.

B. The total amount of assistance will be determined by subtracting all gross income, subsidies or resources from the eligibility standards.

C. A household is defined as any of the following: An individual living alone, a family related by blood, or a group of individuals living together at one residence as a domestic unit with mutual economic dependency.

D. A multiple household is defined as multiple families living in a single family dwelling, having no separate living quarters, kitchen or bath facilities. They will be considered as a single household, with income of all members included.

V. REIMBURSEMENT OF ASSISTANCE:

A. If an applicant has applied for SSI or SS benefits from the Social Security Office, Indiana law and the Social Security Act stipulates the Trustee will be reimbursed for monies expended during the time that Social Security is making their decision.

B. If an applicant has the possibility of receiving a judgment, law suit, monetary compensation or monetary benefits from a third party, the Trustee will require the applicant to sign a subrogation agreement authorizing repayment of any Township Assistance benefits given to the applicant or applicant’s household during the waiting period prior to receiving the funds.

C. If an applicant or a member of the applicant’s household refuses to sign the agreement for repayment as explained in paragraph 1 & 2 of this section, the Trustee may consider the refusal as “non cooperation” and on this basis deny assistance.
VI. WORKFARE

An applicant receiving assistance and/or other household members are required to work for a local government or non-profit agency in exchange for assistance. The recipient(s) shall be required to perform work, which equals the value of assistance already received, at a rate not less than the federal minimum wage. Participation in the Workfare Program will be excused only if:

A. No members of the household over 17 years of age are physically able to work. Written documentation from doctors verifying illnesses and work limitations will be required.

B. All members of the household are over 65 years of age.

C. The only adult household member has pre-school age household members to care for without alternative childcare options.

D. All adult household members are currently employed full time or participating in an approved job-training program.

VII. ASSET ELIGIBILITY STANDARDS

A. Resources available beyond those necessary for basic living needs and to earn a livelihood will be considered as assets and may affect eligibility. Resources that are exempt from this test include the house where the applicant resides and his/her vehicle except as provided in paragraph B.

B. To be eligible for aid, the value of an applicant’s vehicle(s) must not exceed the limits listed below:

<table>
<thead>
<tr>
<th>Number of Months on T/A</th>
<th>Auto/Truck/Van</th>
<th>Note: these values apply to</th>
</tr>
</thead>
<tbody>
<tr>
<td>0-2</td>
<td>$12,000</td>
<td>both owned and leased</td>
</tr>
<tr>
<td>3-4</td>
<td>$10,000</td>
<td>vehicles registered to</td>
</tr>
<tr>
<td>5-6</td>
<td>$ 8,000</td>
<td>household applicants.</td>
</tr>
<tr>
<td>7 or more months</td>
<td>$ 6,000</td>
<td></td>
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</table>

C. Liquidation

Non-essential assets (for example: a second home, recreational equipment, boats, motors, hunting equipment, CD/VCR/DVD/DVR players, personal computers, jewelry, etc.) must be liquidated in order to receive continued Township Assistance. All members of the household are expected to liquidate any of the aforementioned assets no longer than sixty (60) days from the initial application date.
VIII. NON-FINANCIAL ELIGIBILITY STANDARDS

A. Applying for other available assistance.
   Applicants are required to apply for other potential public or private assistance to be eligible for Township Assistance. They must make an application for food stamps and TANF within (15) fifteen days after applying for Township Assistance.

B. Cooperation with investigations.
   Applicants are required to fully cooperate with the investigation of their finances, family situation and any other factors affecting eligibility.
   1. Applicants must answer each and every question on all application forms. All household members over 18 years of age must sign all forms in the presence of the investigator. This includes but is not limited to information to investigate family history records, income, resources, workfare eligibility, etc.
   2. The investigation may include arranged or unannounced visits to the applicant’s home. Cooperation with the investigator during home visits is mandatory.
   3. An applicant shall provide documents to verify certain entries on the application form. Included, as a part of the Standards, is a list of the type of information the applicant must provide. (See Attachment B). Additional documentation, not listed may also be required.
   4. Before assistance can be given a second time, the Trustee is required by statute to contact the applicant’s relatives living in the Township. The applicant must provide the Trustee with the names, addresses and telephone numbers of the applicant’s mother, father, sisters, brothers, children, in-laws, cousins, aunts and uncles residing in Ross Township for the purpose of determining whether the relatives can assist the applicant in any manner.

C. A person who enters Ross Township without the financial ability to sign a lease and pay all utilities, or only to apply for assistance is ineligible for Township Assistance.

D. The repayment or the promise to repay the monies given for assistance is not a condition for granting Township Assistance.

IX. SERVICES PROVIDED

A. SHELTER
   1. The Township may provide rent or mortgage assistance only for the month in which an application is made if the landlord, bank, or mortgage company will:
      a. Accept the township voucher and sign the shelter invoice
      b. Provide their Social Security or Tax ID number
      c. Acknowledge that payment may take up to thirty (30) days.
   2. The Township will not provide assistance if the applicant’s most recent prior residence was their parent, guardian or foster parent and they left that residence for which they are seeking assistance.
   3. Landlords will not be paid rent if they have a homestead credit on their rental property
   4. Township assistance is not available as payment towards remaining rent client owes as their share towards a housing subsidy such as Section 8 etc.
   5. The Trustee may not use Township Assistance funds to pay the cost of an applicant’s shelter if a relative is the applicant’s landlord under the following conditions:
      a. If the applicant lives in the same household as the relative.
      b. If the housing is separate from the relative and unencumbered by mortgage.
      c. If housing has not been previously rented by the relative to a different tenant at reasonable market rates for at least six (6) months.
IX. SERVICES PROVIDED (Continued)

B. UTILITIES - excluding telephone, cable/internet bills and any bill over 30 days old.
   1. The Township may pay water, natural gas, electricity, fuel oil, sewage and disposal service.
   2. Utilities must be in the applicant’s name.
   3. Assistance will be provided only for bills at the current township address.
   4. The Township will not pay tax, late charges, deposits, or reconnection fees for any bills.
   5. The Township will not pay for more than 100 gallons of fuel oil in a given month.

C. FOOD - Food vouchers may be issued until recipient receives food stamps. Referral to a local Food Pantry may be provided as long as a food stamp application has been submitted.

D. MEDICAL
   1. The Township may pay current doctor, dentist, eye doctor, hospital, prescriptions (non-narcotic only), etc.
   2. The Township will not pay any medical bills incurred before applicant was approved for Township Assistance.
   3. Report of Medical Aid Rendered (Form PR-4) must be completed by provider and accompany the original order (Form PR-2).

E. COMMODITIES - The Township may provide a voucher for the purchase of non-food necessity items, such as toiletries, paper goods and clothing.

F. BURIAL ----Burial Fee Schedule:

   Infant to one year...............$450
   Child (one year to twelve years)...$750
   Adult .............................$1,800
   Adult Cremation.................$1,000

   1. When Social Security, Welfare (including Medicaid) or VA claims can be made for the deceased, that amount will be deducted from the Township allowance.
   2. When life insurance or prepaid funeral claims can be made for the deceased those amounts will be deducted from the Township allowance.
   3. Form RT-136 must be submitted with all claims for Township Assistance. An original itemized bill from the funeral home and a certified death certificate must accompany Form RT 136. Copies are not permitted.
   4. All claims for Township burial assistance must be made within 30 days of the date of death.
G. TRANSIENTS
1. The Township will assist a transient one time only if he/she has an established residence.
2. The Township will provide one-way transportation to a transient’s destination, only if verification of residency can be established or someone there will provide housing.
3. If time permits, the transient must complete workfare.

X. REASONS FOR DENIAL
A. Income, resources, subsidies etc exceed the approved schedule (See Attachment A).
B. Falsifying application, including but not limited to name, address, income, family status, assets, employment, etc.
C. Fraudulent use of Township voucher.
D. Living outside Ross Township (exception: transient returning to legal residence).
E. Establishing or trying to establish residence in Ross Township with no means of support.
F. Entering into a renta. agreement without sufficient resources to pay rent and all utilities.
G. Refusing to provide information required on application or intake sheet.
H. Failure to follow up with Investigator after interview.
I. Failure to reapply for assistance as instructed.
J. Being a client and vendor at the same time.
K. Failure to promptly disclose employment or the acquisition of additional disposable assets.
L. Violence, threats of violence, racism or abusive language in or around the township office or premises.
M. Misdemeanor or felony conviction for welfare fraud.
N. Violation of Indiana code pertaining to the administration of Township Assistance
O. Any act of welfare or Township Assistance fraud.
P. Do not possess a Social Security number or green card for employment.
Q. Failure to apply and/or comply with regulations of other agencies providing public assistance, including TANF, Food Stamps, INCLUDING REFUSAL TO APPLY FOR CHILD SUPPORT.
R. Denial of assistance or sanctions by other agencies providing public assistance including TANF, Food Stamps, Social Security etc.
S. Failure to fully comply with the Workfare Program, including failure to participate as assigned, failure to complete assigned hours, etc.
T. Wasting resources, including:
   1. Voluntary termination of employment.
   2. Involuntary termination of employment for just cause.
   3. Failure to accept job offers.
   4. Failure to actively seek employment or maintain monthly contact with the employment and training office-must provide proof of applications and contact names.
   5. Expending money or resources for items or services other than basic necessities.
   6. Failure to participate in a recommended education or job training program.
   7. Failure to accept or maintain free or low-cost shelter arrangements from family members or other agencies.
   8. Failure to liquidate assets.
   9. Assignment or transfer of assets to qualify for Township Assistance.
U. Ownership of property other than the home client lists as address for township residency.
V. Ross Township resident for more than 60 days and does not possess a valid Indiana ID with current township address.
XI. APPEAL RIGHTS:

A. The applicant may appeal a decision by the Investigator to the Township Assistance Supervisor.

B. The applicant may further appeal a decision by the Township Assistance Supervisor to the Trustee.

C. The applicant may appeal a decision by the Trustee to the Board of County Commissioners. The procedure for filing an appeal is described on the State Board of Accounts Form TA/1-A (Notice of Action).

Township Assistance Standards adopted by the Ross Township Board of the Ross Township Trustee, Joseph D. Shudick, Jr. of Lake County, Indiana on October 9, 2018.
REQUIREMENTS FOR ELIGIBILITY AND CERTIFICATION
All clients seeking Township Assistance must provide the following items to determine eligibility. In order to secure an appointment you must first complete the initial application provided and have all documentation requested before the interview can be scheduled. (Incomplete application and documentation will result in your appointment being rescheduled). You must first call to make an appointment!

I. REQUIREMENTS FOR ELIGIBILITY/CERTIFICATION
A. Driver’s License or State ID with current township address
B. Vehicle registrations, auto insurance policies, payment booklets, or title to all vehicles
C. Rental lease, rent receipt or current mortgage statement or property tax statement
D. Current expenses: Nipsco, sewer, water, disposal, internet bill, cable bill, home/cell phone bills and credit card statements, etc

II. CONFIRMATION OF THE FAMILY SIZE
A. Marriage License and/or Divorce decree
B. Social Security cards for each household member
C. Birth Certificate for each household member

III. CONFIRMATION OF HOUSEHOLD INCOME & RESOURCES
A. Pay stubs for the past 90 days and verification of self-employment
B. Wage inquiry printout for both Indiana and Illinois
C. Unemployment wages for past 90 days or letter of denial
D. Letter of termination from employer
E. Child support payments received – Need divorce decree
F. Childcare (daycare) voucher printout
G. Social Security, SSD/SSI/Veterans Administration benefit statements
H. Adoption/Foster Care assistance benefit statements
I. Bankruptcy documentation
J. TANF/Food stamp benefit statements- listing all household members
K. Sick benefits: Worker’s Comp, Short/Long Term Medical, PTO, etc
L. Federal and State tax returns with W-2’s and 1099’s
M. Tuition assistance documentation: Awards, Pell grants, VA/student loans disbursements
N. Verification of all other household income and resources

IV. CONFIRMATION OF ALL ASSETS
Must provide statements for last 90 days also quarterly, and year end statements
A. Savings Account/ checking account statements and cancelled checks
B. Credit Union statements
C. Savings Bonds, Stocks, Certificates of Deposit, retirement plans, and pension plans

V. CONFIRMATION OF SHELTER COST
A. If a renter you must bring your lease, rent receipts and your landlord’s name, address, and telephone number
B. If a renter with a Section 8 voucher you must bring in this paperwork
C. Home owner bring your mortgage statement and property tax statement
VI. CONFIRMATION OF MEDICAL EXPENDITURES

A. Paid receipts from doctors, dentist, eye doctors, hospital

B. Paid receipts for prescriptions and medical supplies

C. You will need a current doctor's letter as to nature of illness/disability, physical limitations and a release date. This information can be faxed to the Trustee office at 219-769-7709 however the original must be mailed. All correspondence must have the doctor’s signature. A statement from you doctor must be mailed to our office if requesting help with a special diet.

VII. VERIFICATION - ALL BENEFITS

A. FOOD STAMPS/TANF – Letter of acceptance or denial

B. MEDICAID – Letter of acceptance or denial

C. UNEMPLOYMENT – Letter of acceptance or denial

D. WORKER’S COMP & SHORT/LONG TERM DISABILITY – Verification of benefit or denial

E. SOCIAL SECURITY – Verification of benefit or denial

F. NOTICE FROM LOCAL UNION AS TO STRIKE/LAYOFF

G. YOU MUST PROVIDE CONFIRMATION OF ANY ADDITIONAL MONETARY ASSISTANCE YOU HAVE RECEIVED IN LAST 90 DAYS FROM ANY SOURCE SUCH AS CHURCHES, RELATIVES OR OTHER AGENCIES.
TOWNSHIP ASSISTANCE APPENDIX

Emergency food assistance is available for residents who have experienced losses due to fire or flooding, and for residents who are waiting for initial food stamps. Proof of a SNAP application is required. Food benefits are based on household size:

<table>
<thead>
<tr>
<th>Household Size</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>1-2</td>
<td>$200.00</td>
</tr>
<tr>
<td>3</td>
<td>$250.00</td>
</tr>
<tr>
<td>4</td>
<td>$275.00</td>
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<tr>
<td>5</td>
<td>$300.00</td>
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<td>6</td>
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<tr>
<td>7</td>
<td>$350.00</td>
</tr>
<tr>
<td>8</td>
<td>$375.00</td>
</tr>
</tbody>
</table>

Commodities:

<table>
<thead>
<tr>
<th>Household Size</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
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<tr>
<td>3</td>
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<td>7</td>
<td>$70.00</td>
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<tr>
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