PERU TOWNSHIP
LaSalle County, Illinois | Est. 1850

1109 Peoria Street
Peru, Illinois 61354
(815) 223-0746

ATTENTION: PLEASE READ COMPLETELY

If you are requesting financial assistance (Emergency Assistance), there are a few things you need to understand before you begin the application process.

- The Emergency Assistance program provides financial aid to alleviate a life-threatening situation or to assist in attaining or retaining employment. You must have an emergency in order to be eligible The following situations are eligible emergencies: (a) rent is past due, (b) served a 5-day notice, (c) lease is ending and must be out of the rental unit, (d) disconnection notice of a utility, or (e) employment-related expense (limited circumstances). We do not issue payments toward evictions or utility deposits.
- All income from all sources must be reported as the program has an income standard of 150% Federal Poverty Level.
- You have to apply for all benefits you may be entitled to. This includes unemployment, TANF (cash assistance), SNAP (food assistance), child support (if this applies to you), etc.
- The amount of financial aid, if approved, is based on eligible family size. Payment is for your need or the maximum, whichever is less.
- Township financial aid must be sufficient to eliminate the life-threatening situation. If the Emergency Assistance amount will not eliminate the life-threatening situation, when combined with other resources, payment cannot be issued.
- Payment goes directly to the vendor (landlord, utility company, etc.). You will not receive cash or any payment directly to you.
- Emergency Assistance can be issued only one time in a 12-month period to an individual/family or household.
- Documents on the verification request form are required by the State of Illinois Emergency Assistance Handbook and are required to make a determination of eligibility.
- General Assistance and Emergency Assistance cannot be issued at the same time.
- Funds will not be immediately available as applications must be reviewed and verified.

How to Apply for Assistance

1. Fill out the general application and these additional Emergency Assistance documents as completely as possible. Sign all documents. If you need assistance with completing the application, call us at (815) 223-0746, and we will schedule a time to assist you.
2. Collect all documents listed on the Verification Request Form (included in your application).
3. When you have completed steps 1 & 2, call the General Assistance office to schedule an applicant interview. Bring completed application and all documents to the interview.

APPOINTMENT POLICY: Your appointment is scheduled at a set time, if you are more than 15 minutes late, you will need to reschedule your appointment by calling our office at (815) 223-0746.

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EMERGENCY ASSISTANCE PROOF OF HARDSHIP

Section 3.02 of the Emergency Assistance Handbook states: An applicant must be financially unable to alleviate a life- threatening circumstance or be unable to pay a work-related expense necessary to obtain or maintain employment.

In order to better understand your current situation, using the space below, please tell us in your own words the cause for your hardship. This completed document must be returned with your Assistance application.

Please note, in addition to explaining your situation, you must also supply evidence of your hardship. Such evidence may include a letter from your employer showing termination of job or reduced hours, documents showing expenses associated with an unforeseen expense (car repair with proof of paid receipt), etc.

Please write a brief description documenting what led to your financial hardship and provide explanation as to how you will be able to cover expenses after assistance is granted.

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**Please attach your third-party proof of hardship

_____ _____

Signature Date

_____ _____

Witness Signature Date

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NOTICE OF BENEFITS AVAILABLE UNDER THE EMERGENCY ASSISTANCE PROGRAM

Emergency Assistance provides financial aid for two (2) purposes and two (2) purposes only: (1) to help alleviate a life-threatening circumstance, or (2) to help pay work related expense necessary to obtain or maintain employment. A life-threatening circumstance is a condition which poses an imminent peril to health and safety because of a lack of or the jeopardizing of the availability of shelter, food, utility service, medication, transportation or other basic necessity. You may also receive Emergency Assistance to help pay for a work related expense, but only if payment of the expense is necessary for you to get or keep a job. In order to help you pay such expenses, the General Assistance Office may also refer you to other agencies or programs or for other services.

You may receive Emergency Assistance only once in any twelve (12) month period. Assistance up to the amount of the Payment Level is disbursed by means of disbursing orders (requests to a vendor to provide goods and services in return for payment by the General Assistance Office) or by the payment directly to a provider of goods and services. **You will not receive cash.** The personnel of the General Assistance Office will tell you what the appropriate Payment Level is for the size of your household.

You may receive Emergency Assistance even though you have applied for and been approved to receive monthly welfare assistance (such as Temporary Assistance to Needy Families (TANF), Aid to the Aged, Blind and Disabled (AABD), Refugee and Repatriate Assistance (RRA) or Supplemental Security Income (SSI)) as long as you have not yet begun to receive monthly payments of such assistance. However, if you have already begun receiving monthly payments of cash welfare assistance you cannot receive Emergency Assistance.

If you have any questions about Emergency Assistance or the program requirements or particulars, you should ask the personnel of the General Assistance Office. In addition, you may inspect the General Assistance Office's Emergency Assistance Handbook during regular office hours.

I acknowledge receipt of a copy of the foregoing Notice of Benefits Available under the Emergency Assistance Program this _____ day of _____ , 20 ____.

_____
Signature

FOR USE OF GENERAL ASSISTANCE OFFICE ONLY

Notice of Benefits Given By:
Case Name:
Case #:
Notice of Benefits Given On:

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NOTICE OF RIGHTS AND RESPONSIBILITIES OF EMERGENCY ASSISTANCE APPLICANTS AND RECIPIENTS

As an applicant for or recipient of Emergency Assistance you have certain rights and responsibilities.

RIGHTS

- You have a right to file a written application for Emergency Assistance and to be assisted in completing an application. You may obtain an application at the General Assistance Office or request one by telephone or mail.
- You have a right to voluntarily withdraw any application for Emergency Assistance you file. If the General Assistance Office has an Emergency Assistance Handbook, you have a right to read and ask questions about it.
- You have a right not to be discriminated against because of race, religion, color, sex, sexual preference, national origin, age, handicap status or political affiliation.
- You have a right to have the information you provide kept confidential unless disclosure is required to determine your eligibility or is otherwise required or permitted by law.
- You have a right to written notice of the benefits available under the Emergency Assistance Program.
- You have a right to be treated with respect and in a courteous and considerate manner. If you have not been treated this way, you have a right to complain to the Supervisor. Nothing can be done to you because you complain.
- You have a right to freedom of choice as to where you obtain the goods and services for which the General Assistance Office will pay, however, if the General Assistance Office has an arrangement with a specific vendor to provide goods and services the General Assistance Office may refuse to pay other vendors for such goods and services. In addition, the General Assistance Office has no control over whether any vendor will furnish you with goods and services in exchange for payment by the General Assistance Office.
- You have the right to ask questions about your application and inspect, in the presence of personnel of the General Assistance Office, your case file during regular office hours. You also have a right to request copies of what is contained in your case file. However, certain information may have been provided to the General Assistance Office on the condition that the information or its source would not be revealed to you or is privileged from such disclosure. In such cases the General Assistance Office has a right to remove such information from your case file before you see it, however, if that happens you will be told that information has been removed.
- You have a right to be referred to other agencies for benefits and for other programs which may assist you.
- A decision must be made on your application for Emergency Assistance within 30 days. You have a right to written notice of this decision. If your income or assets result in a denial of your application, you have a right to a written notice indicating how your income or assets make you ineligible for Emergency Assistance.
- You have a right to voluntarily repay any Emergency Assistance provided to you.

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RESPONSIBILITIES

- You must fill out a written application for Emergency Assistance which must contain, at the very least, your name, mailing address and signature. An application containing your name, mailing address and signature requires the General Assistance Office to make a decision on your application, however, an application with only this information would not provide sufficient information to approve your application.
- You must keep all scheduled appointments at the General Assistance Office.
- You must provide information needed for a determination of your eligibility for Emergency Assistance.
- You must assist the General Assistance Office in securing and verifying information needed for a determination of your eligibility for Emergency Assistance.
- You must consent to the release by other agencies and persons of information to the General Assistance Office necessary for a determination of your eligibility for Emergency Assistance. You must sign any consent required by the General Assistance Office to obtain necessary information.
- You must report to the General Assistance Office with 5 calendar days of occurrence any change in your circumstances, such as a change in income or the acquisition of property, which might affect your eligibility for Emergency Assistance.
- You must utilize all resources (e.g., relatives, food pantries, community and charitable organizations) which might help alleviate your present needs.
- You must apply for any benefit (e.g., unemployment compensation, worker's compensation , Food Stamps) which might help alleviate your present needs.
- You must accept and follow-up in good faith any referral by the General Assistance Office to any other agency.

IF YOU FAIL OR REFUSE TO SATISFY ANY OF THESE RESPONSIBILITIES, YOUR APPLICATION FOR EMERGENCY ASSISTANCE MAY BE DENIED.

I acknowledge receiving a copy of the foregoing Notice of Rights and Responsibilities of Emergency Assistance Applicants and Recipients consisting of (2) pages this _____ day of _____ , 20 ____.

_____
Signature

FOR USE OF GENERAL ASSISTANCE OFFICE ONLY

Case Name:
Case #:
Notice of Rights Given On:
Notice of Rights Given By: