Town of Northwood, New Hampshire

Human Services Department
818 First New Hampshire Turnpike, Northwood NH 03261
(603)942-5586 Extension 208 Facsimile: (603)942-9107
Humanservices@town.northwood.nh.us

Schedule of General Assistance

The following are values for various allowable expenses. The values are based on actual local market conditions and costs.

HOUSING

Rental Properties

The maximum values for rent considered as "need" shall be:

Style	Maximum Allotment Level	Maximum Allotment Level with Utility
Efficiency	$850.00	$899.00
1 Bedroom	$851.00	$926.00
2 Bedroom	$992.00	$1,125.00
3 Bedroom	$1,311.00	$1,479.00
4 Bedroom	$1,352.00	$1,521.00

Only the last four weeks of rent will be considered as "need". Shelter arrearages will be included in the "need" formula if, and only if, such payment is necessary to prevent eviction or foreclosure or to protect the health and safety of the household. An applicants name must be on the lease in order for
rental assistance to be rendered. Rents will not be paid to non-landlords such as friends and relatives.

Owner Occupied Properties

Calculation of "need" shall include an amount for mortgage which shall not exceed the maximum values for rent listed in I.(A.). When an applicant owns a home and is otherwise eligible for assistance, payment for taxes and insurance may be deemed necessary by the Human Services Department to prevent foreclosure. As stated in the Town of Northwood's Application For Aid, all applicants who own real estate will have a lien, in the amount of the aid, placed on their property.

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 New Hampshire Department of Health and Human Services. Food vouchers may not be used for alcohol, tobacco or pet food.

The current maximum allotment levels for Western Rockingham County as determined by the NH Housing Authority October 1, 2006 are as follows:

Household Size	Maximum Allotment Level
1	$155.00
2	$284.00
3	$408.00
4	$518.00
5	$615.00
6	$738.00
7	$816.00
8	$922.00
Each additional member, add:	$117.00

MAINTENANCE

Applicants may include, in calculating "need," the cost of providing personal and household necessities in an amount not to exceed:

Household Size	Maximum Allotment Level
1	$25.00
Each additional member, add:	$10.00

TRANSPORTATION

Car payments shall not be considered as “need”. Applicants may include, in calculating “need,” the cost of gasoline:

Employment Status	Maximum Allotment Level
Unemployed	$25.00/month
Locally Employed	$60.00/month
Employed Out-of-Town	$100.00/month

UTILITIES

When utility costs are not included in the shelter expense, the most recent outstanding monthly utility bill will be included as part of “need” by the Human Services Department. Arrearages will not be included except when necessary to ensure the health and safety of the applicant household or to prevent termination of utility service where no other resources or referrals can be utilized.

1. A disconnect notice must be provided as proof of “need”.
2. Utility security deposits shall be considered as “need” if, and only if, the applicant is unable to secure funds for the payment of the deposit and is unable to secure utility service without a deposit. Such deposits shall, however, be the property of the Town of Northwood.
3. Basic local telephone service shall be allotted a maximum of $25.00./month in the “need” formula.
4. Cable television and internet costs shall not be considered.

MEDICAL BILLS

The Human Services Department shall not consider including amounts for medical, dental or eye services unless the applicant can verify that all other potential sources have been investigated and that there is no source of assistance other than local welfare. Other sources to be considered shall include state and federal programs, local and area clinics, area service organizations and area hospital indigent programs designed for such needs. When an applicant requests medical service, prescriptions, dental service or eye service, the local welfare official may require verification 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‘s well being will be placed in serious jeopardy.

CLOTHING

Purchases may be made to provide necessary protection from the elements, sum not to exceed $50.00.

SHARED EXPENSES

If the applicant/recipient household shares shelter, utility, or other expenses with a non-applicant/recipient (i.e.: is part of a residential unit), then "need" shall be determined on a pro rata share, based on the total number of adults in the residential unit (e.g.: three adults live in a residential unit, but only one applies for assistance—shelter "need" is 1/3 of the shelter allowance for a household of three adults).

EXCEPTIONS

All applicants for aid will be reviewed on their individual merits. Referrals will be made to appropriate agencies where such action is indicated. If need dictates, the limits established in this document may be increased at the discretion of the Human Services Director.

ACCEPTANCE

This document is hereby accepted, and becomes effective upon signing.

Date
Douglas Chamberlin
Human Services Director

Date
Scott Bryer (Chair)
Selectman

Date
Kenneth Curley
Selectman

Date
Alden Dill
Selectman