

Lucas County Job & Family Services | 3210 Monroe Street P.O. Box 10007 Toledo, Ohio 43699-0007

The attached application is used to apply for emergency assistance through the Lucas County Department of Job and Family Services PRC plan.

**Basic eligibility requirements include:**

- You must have a minor child (including pregnancy in third trimester) living in your PRC household;
- The household must not include a member who is sanctioned from the OWF;
- The voucher cannot be used to reimburse for services that are already paid; and
- The family income cannot exceed 200% of the Federal Poverty Guidelines; as of **January 2019**

Assistance Group Size	200% Monthly Federal Poverty Level
1	\$2082
2	\$2819
3	\$3555
4	\$4292
5	\$5029
6	\$5765

In addition, a **work requirement of 20 hours per week** is needed for some programs such as **car repair and employment materials**.

Please complete the first two pages of this application packet. Attach copies of your verifications including:

- An ID for you, the applicant;
- Documentation regarding your emergency;
- Verification of **all** income received in the 30 days before the date of application;
- Documentation to prove a child is in your household and;
- Lucas County residency
- Social security numbers for **all** household members.

Each service has its own specific set of rules and guidelines. Voucher eligibility cannot be determined without a complete application and verifications. Non-custodial parents, current on Child support order(s) may be eligible on a limited program basis. If you feel you may qualify, please apply, but we may contact you for additional information or verification.

Please return the completed application to the PRC Area.

You may call the PRC office at **419-213-8800** if you have any questions. The PRC fax number is **419-213-8820**.

## PRC Checklist

**\*Picture identification and proof of income for the last 30 days is needed for ALL applications**

**\*Minor child (ren) or 3<sup>rd</sup> trimester pregnancy is needed for vouchers.**

### **Car Repair:**

- \_\_\_\_\_ Must be employed a minimum of 20 hours per week at state minimum wage
- \_\_\_\_\_ Must be employed for a minimum of 2 weeks
- \_\_\_\_\_ Only one car per household and registered in applicant's name (must be sole means of transportation)
- \_\_\_\_\_ Valid Ohio Driver's License
- \_\_\_\_\_ Proof of liability insurance
- \_\_\_\_\_ Provide copy of registration and title or lease agreement. (Title or lease must be in applicant's name for minimum of ninety (90) days)
- \_\_\_\_\_ 2 written estimates if car is in running condition
- \_\_\_\_\_ 1 written estimate with proof of tow, if car is not running
- \_\_\_\_\_ Statement from repair shop stating: All repairs must be mechanical in nature.
  1. Will accept a voucher
  2. Will offer at least a 30-day warranty
  3. No sales tax
  4. If balance of repair is over \$1,200, estimate must indicate that payment arrangements have been made.

### **Employment Materials (uniforms, footwear, tools and equipment): Up to 500.00**

- \_\_\_\_\_ Must have minor child (ren) and must be employed a minimum of 20 hours per week at state minimum wage
- \_\_\_\_\_ Must apply within 30 days of new job or promotion requiring materials
- \_\_\_\_\_ Itemized written estimate of materials up to \$500.00 and willing to accept JFS voucher
- \_\_\_\_\_ Statement from employer showing hire date, number of hours working, and that materials are required for employment

### **G.E.D. Incentive: \$375.00**

- \_\_\_\_\_ Families with minor child (ren), pregnant women or non-custodial parents
- \_\_\_\_\_ Copy of G.E.D. certificate (must be applied for within 90 days of receiving)
- \_\_\_\_\_ Must complete W-9 to redeem G.E.D. incentive

### **Utility Assistance: Up to \$1000**

- \_\_\_\_\_ For primary heat source, electric or water service thirty (30) days delinquent or to prevent shut off or regain PIPP (Percentage of Income Plan Plus) eligibility
- \_\_\_\_\_ Families with minor child (ren), pregnant women in their 3<sup>rd</sup> trimester
- \_\_\_\_\_ Must be employed minimum of 20 hours per week at State Minimum wage

\_\_\_\_\_ Must have secured employment for a minimum of 2 weeks to determine eligibility. Paystub(s) and letter from employer required

\_\_\_\_\_ Documentation from HEAP stating that this resource has been denied

\_\_\_\_\_ Utility Bill clearly stating the amount due (current, past due, or installment services)

\_\_\_\_\_ Proof of Shut-Off Notice or amount needed to restore services (if applicable)

\_\_\_\_\_ If Utilities are paid by the landlord, applicant must provide the signed lease agreement stating that utilities are paid by the landlord

\_\_\_\_\_ Verification of deposit for Utility service connection (if applicable)

**Shelter Assistance: Up to \$1000**

\_\_\_\_\_ Families with minor child (ren), pregnant women or non-custodial parents

\_\_\_\_\_ Current Lease Agreement

\_\_\_\_\_ Copy of Subsidized Housing Assistance (HUD/Sections 8, etc.)

\_\_\_\_\_ Written Statement (Itemized statement) must be signed, dated and include a contact number for the landlord. Clearly stating the amount due and the month for which payment is being requested; must be at least 5-day delinquent but no more than two (2) months delinquent

\_\_\_\_\_ Proof of eviction notice (if applicable)

**\*\*Other verifications may be requested \*\***

**PREVENTION, RETENTION, AND CONTINGENCY PROGRAM (PRC) APPLICATION FOR STATE MODEL – PAGE 1**

Name of Applicant \_\_\_\_\_

Address \_\_\_\_\_

City/State/Zip \_\_\_\_\_

Telephone Numbers Where You Can Be Reached

Home Phone \_\_\_\_\_

Cell Phone \_\_\_\_\_

For Agency Use Only	
Case Number	
Date Sent	Date Received
County	Unique ID
Voucher Number	

1. Have you ever received any type of public assistance from a Job & Family services department?  Yes  No  
If yes, give the county JFS, the type of assistance received, and the date received:

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2. What PRC assistance are you requesting, and what amount is needed?

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3. Complete the chart below for everyone living in your home, including yourself.  
You are required to verify all income for **all** the members in your household.

NAME	Relationship	SSN	D.O.B.	U.S. Citizen (Y/N)	Source of Income <small>(Earnings, Child Support, VA Benefits, SSA, SSI, etc.)</small>	Monthly Amount Income
	self					

4. Are you or anyone you are applying for, pregnant?  Yes  No If yes, who? \_\_\_\_\_

5. Is anyone in your household eligible for, but not receiving court-ordered child support?  Yes  No  
If yes, list name(s) of individuals not receiving court-ordered child support:

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**PREVENTION, RETENTION, AND CONTINGENCY PROGRAM (PRC) APPLICATION FOR STATE MODEL – PAGE 2**

6. Have any other agencies helped you with this need?  Yes  No  
 If yes, name the agency and tell how you were helped. If no, tell why you were not helped.

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7. Does anyone in your household own a car, have access to a car, or live near a bus line?  Yes  No  
 If yes, list the name(s) of individuals and the means of transportation.

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8. Complete the chart below for employment history of each adult member in the past 2 years.

Name	Currently Employed (Y/N)	Current/ Previous Employer	Type of Employment	Date Employment Began (mo/yr)	Date Employment Ended (mo/yr)	Reason for Leaving

9. Signature of person who completed this application by signing this application:
- I understand the questions on this form and certify, under penalty of perjury, that all my answers are correct and complete to the best of my knowledge, including information about the citizenship or alien status of each household member applying for assistance.
  - I understand and agree to provide documents to prove what I have said.
  - I understand and agree that the CDJFS may contact other persons or organizations to obtain the necessary proof of my eligibility and level of assistance.
  - I understand that in some instances, I may be asked to give consent to the CDJFS to make whatever contacts are necessary to determine my eligibility.

If you are eligible, the agency will limit assistance provided to the actual documented amount of need.

Signature of Applicant:	Date:
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**If you are authorized for PRC services, you may be eligible for food stamp benefits. Please contact Lucas County Job & Family Services if you wish to apply. Keep this letter to verify that you have been authorized for PRC services. It will make a difference in the way your food stamp eligibility is determined. In addition, LCJFS may need to request additional verification to determine eligibility for the Food Stamp program.**

# Voter Registration and Information Update Form

Please read instructions carefully. Please type or print clearly with blue or black ink.

For further information, you may consult the Secretary of State's website at: [www.OhioSecretaryofState.gov](http://www.OhioSecretaryofState.gov) or call (877) 767-6446.

## Eligibility

You are qualified to register to vote in Ohio if you meet all the following requirements:

1. You are a citizen of the United States.
2. You will be at least 18 years old on or before the day of the general election.
3. You will be a resident of Ohio for at least 30 days immediately before the election in which you want to vote.
4. You are not incarcerated (in jail or in prison) for a felony conviction.
5. You have not been declared incompetent for voting purposes by a probate court.
6. You have not been permanently disenfranchised for violations of election laws.

Use this form to register to vote or to update your current Ohio registration if you have changed your address or name.

**NOTICE:** This form must be received or postmarked by the 30th day before an election at which you intend to vote. You will be notified by your county board of elections of the location where you vote. If you do not receive a notice following timely submission of this form, please contact your county board of elections.

**Numbers 1 and 2 below are required by law.** You must answer both of the questions for your registration to be processed.

## Registering in Person

If you have a current valid Ohio driver's license, you must provide that number on line 10. If you do not have an Ohio driver's license, you must provide the last four digits of your Social Security number on line 10. If you have neither, please write "None."

Please see information on back of this form to learn how to obtain an absentee ballot.

## Registering by Mail

If you register by mail and do not provide either an Ohio driver's license number or the last four digits of your Social Security number, you must enclose with your application a copy of one of the following forms of identification:

Current and valid photo identification, a military identification, or a current (within the last 12 months) utility bill, bank statement, government check, paycheck, or government document (other than a notice of voter registration mailed by a board of elections) that shows the voter's name and current address.

## Residency Requirements

Your voting residence is the location that you consider to be a permanent, not a temporary, residence. Your voting residence is the place in which your habitation is fixed and to which, whenever you are absent, you intend to return. If you do not have a fixed place of habitation, but you are a consistent or regular inhabitant of a shelter or other location to which you intend to return, you may use that shelter or other location as your residence for purposes of registering to vote. If you have questions about your specific residency circumstances, you may contact your local board of elections for further information.

## Your Signature

In the area below the arrow in Box 14, please write your cursive, hand-written signature or make your legal mark, taking care that it does not touch the surrounding lines so when it is digitally imaged by your county board of elections it can effectively be used to identify your signature.

**WHOEVER COMMITS ELECTION FALSIFICATION IS GUILTY OF A FELONY OF THE FIFTH DEGREE**

I am:  Registering as an Ohio voter  Updating my address  Updating my name

1. Are you a U.S. citizen?  Yes  No  
 2. Will you be at least 18 years of age on or before the next general election?  Yes  No  
 If you answered NO to either of the questions, do not complete this form.

3. Last Name		First Name	Middle Name or Initial	Jr., II, etc.
4. House Number and Street (Enter new address if changed)		Apt. or Lot #	5. City or Post Office	6. ZIP Code
7. Additional Mailing Address (if necessary)			8. County (where you live)	
9. Birthdate (MM/DD/YYYY) (required)	10. Ohio Driver's License number OR Last Four Digits of Social Security number (one form of ID required to be listed or provided)		11. Phone Number (voluntary)	
12. PREVIOUS ADDRESS IF UPDATING CURRENT REGISTRATION - Previous House Number and Street				
Previous City or Post Office		County	State	
13. CHANGE OF NAME ONLY Former Legal Name			Former Signature	

14. I declare under penalty of election falsification I am a citizen of the United States, will have lived in this state for 30 days immediately preceding the next election, and will be at least 18 years of age at the time of the general election.

Your Signature



Date

(MM/DD/YYYY)

FOR BOARD USE ONLY  
SEC4010 (rev. 4/15)

City, Village, Twp.

Ward

Precinct

School Dist.

Cong. Dist.

Senate Dist.

House Dist.

**TO ENSURE YOUR INFORMATION IS RECEIVED,  
PLEASE DO THE FOLLOWING:**

1. Print this form.
2. Make sure all required fields are complete.
3. Sign and date your form.
4. Fold and insert your form into an envelope.
5. Mail your form to your county board of elections.

For your county board's address please visit [www.OhioSecretaryofState.gov/boards.htm](http://www.OhioSecretaryofState.gov/boards.htm)

If you have additional questions, please call the office of the Ohio Secretary of State at (877) SOS-OHIO (877-767-6446).

**HOW TO OBTAIN AN OHIO ABSENTEE BALLOT**

You are entitled to vote by absentee ballot in Ohio without providing a reason. Absentee ballot applications may be obtained from your county board of elections or from the Secretary of State at: [www.OhioSecretaryofState.gov](http://www.OhioSecretaryofState.gov) or by calling (877) 767-6446.

**OHIO VOTER IDENTIFICATION REQUIREMENTS**

Voters must bring identification to the polls in order to verify identity. Identification may include current and valid photo identification, a military identification, or a copy of a current (within the last 12 months) utility bill, bank statement, government check, paycheck, or other government document (other than a notice of voter registration mailed by a board of elections) that shows the voter's name and current address. Voters who do not provide one of these documents will still be able to vote by providing the last four digits of the voter's Social Security number and by casting a provisional ballot pursuant to R.C. 3505.181. For more information on voter identification requirements, please consult the Secretary of State's website at: [www.OhioSecretaryofState.gov](http://www.OhioSecretaryofState.gov) or call (877) 767-6446.

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