



## TANF 103-1 Application Filing

**Supersedes:** TANF 103-1 (06/02/2022)

**Reference:** ARM 37.78.206, .226 and .228

**Overview:** Applications for TANF cash assistance are voluntary and initiated by the person in need, his/her authorized representative, or if incompetent or incapacitated, someone acting responsibly on his/her behalf. An application is valid for 30-calendar days following the application date.

### **APPLICATION FOR TANF CASH ASSISTANCE:**

Application is made by one of the following methods:

1. Completing Form HCS-250, "Application for Assistance" and submitting it to the Office of Public Assistance (OPA) in person, by fax or by mail; or
2. Submitting an online application through [Self Service Portal](#); or
3. Completing a Statement of Facts (SOF) interview by calling the Public Assistance Help Line (PAHL) at 888-706-1535.

In completing and signing the last page of the application (handwritten, electronic or telephonic), the individual attests to the truth, accuracy, and completeness of the information provided and declares that he/she understands the penalty for misrepresenting the family's circumstances, either by false statements or omission of information.

Only the front page of an application must be completed, signed (handwritten, electronic or telephonic) and submitted to OPA to secure the application date, determine the deadline for acting on the application, and to continue the TANF application process. A completed application cannot be required prior to scheduling an interview for TANF Cash, an interview maybe scheduled without an application being submitted. An interview must be scheduled when the front page of the application is received by OPA.

Applications are accepted at OPA during regular working hours. OPA offices are closed on all state and/or federally designated holidays.

### **SIGNATURE TYPES AND REQUIREMENTS:**

A valid signature of each adult household member is required to apply for TANF, a valid signature must be handwritten, electronic or telephonic.

Each adult household member must sign the last page of the application unless he or she is incompetent or incapacitated. If that situation exists, then the application must be signed by someone acting responsibly on his or her behalf for it to be considered a completed application.

The following provisions apply to telephonic signatures:

1. The telephonic signature system must make an audio recording of each adult applicant's verbal assent and a summary of the application information to which the household assents. The telephonic signature needs to include a recording of "Yes" or "I agree", or a statement clearly indicating agreement of the application made over the telephone.
2. The telephonic signature system must provide for a linkage from the audio file of the recorded verbal assent to the application so that access to the household's case can easily be accessed.
3. The eligibility staff member shall provide to the household member a written copy of the completed application with instructions for correcting any errors or omissions.

Electronic Signatures are only available through the self-service portal.

**APPLICATION DATE:**

The application date is the date the first page of the application, is received in the OPA and date stamped. Submission of a completed front page protects the application date.

If the remaining pages of the application are completed and received within the 30-day application processing period, the household may be determined eligible, as long as all eligibility requirements are met as of the day the front page is submitted. If the remaining pages of the application are not received by the end of the 30-day application processing period, the application is denied.

If an HCS-250 application, online application through the Self Service Portal or Statement of Facts (SOF) had been received and processed for benefits other than TANF cash assistance, it is still valid for 30 days following the date received. If TANF cash assistance is requested within those 30 days (even if already interviewed and processed for other benefits), the application date is the original application date, not the date additional benefits were requested.

If the household is not eligible on the application date, the application is less than 30 days old and an eligibility determination for cash assistance has not been made, the start date of cash assistance benefits can be changed with consent of the applicant. If the household does not want to request a new start date, the application would be denied.

**REAPPLICATION WITHIN 30-DAYS OF APPLICATION:**

When an application has been properly denied and the original application is less than 30 days old, the household may reapply using a Reapplication Addendum (HCS-249). The new application date will be the date that the Reapplication Addendum is received in the OPA. The 30-day processing time frame will start from the date the Reapplication Addendum is received.

**REAPPLICATION MORE THAN 30 DAYS AFTER ORIGINAL APPLICATION DATE:**

If the effective date of case closure has passed or the original application is more than 30 days old and has been denied, a new application is required.

**AUTHORIZED REPRESENTATIVE:**

An authorized representative may be designated to act on the behalf of the minor child(ren) and the specified caretaker relative(s) with whom the child is living. This representative may or may not be a member of the filing/assistance unit. The representative must be designated in writing by a specified

caretaker relative or other responsible member of the filing/assistance unit and must be aware of relevant information and the family's circumstances.

If the caretaker relative is not competent and thus unable to sign the application, another competent adult filing unit member may sign it. In the absence of a competent adult filing unit member, a legal guardian must sign. If there is no legal guardian, the authorized representative may sign the application and other pertinent documents. Case notes must substantiate why the caretaker relative did not sign the required documents.

The authorized representative will be required to present all required information and verification requested.

**CARETAKER RELATIVE DECLARATION:**

Each caretaker relative is required to declare, either verbally or in writing, the status of each household member in the filing unit. This declaration, under penalty of perjury, must be made at application and redetermination. The status must declare each household member who:

1. is fleeing to avoid prosecution, custody or confinement after conviction for a crime, which is a felony under the laws of the place from which the individual flees;
2. is violating a condition of probation or parole imposed under Federal or State law;
3. has been convicted of a drug-related felony after August 22, 1996 and whose sentence has not been discharged; or who is not complying with the conditions of supervision and who is not actively participating in treatment, if required; and
4. has been convicted in Federal or State court of having made a fraudulent statement or representation with respect to the place of residence in order to receive public assistance benefits simultaneously from two or more states.

**APPLICATION MADE BY OPA STAFF/FAMILY:**

Special handling is given to an application made by an employee or by an employee's immediate family to avoid a conflict of interest and to ensure privacy. Cases having a conflict of interest between a household and an OPA employee are assigned to an OPA staff member accordingly by the OPA supervisor or designee.

**VOLUNTARY WITHDRAWAL:**

The household may voluntarily withdraw its application prior to an eligibility determination. Voluntary withdrawal means that the applicant, on his/her own initiative, has requested either orally or in writing, to stop the application process.

Withdrawal reason must be documented if one is given or known. A notice is sent to the applicant confirming the request.

**SEE BUSINESS PROCESS:** Statement of Facts

**Revised:** 6/2/2022