

Fairfield Township Tippecanoe County

TOWNSHIP ASSISTANCE CHECK LIST

Client Name _____

Case# _____

PLEASE RETURN and bring written proof of ALL items checked below on

Date: _____ Appointment Time: _____

IMPORTANT: If you do not return or contact us by the above date, assistance may be denied. *We are closed between 12 noon and 1:00 pm for lunch. *If you have any questions, you must call BEFORE your appointment time!

- INDIANA** Driver's License or Picture ID for each household member 18 years of age or older
- Birth Certificates** for each household member
- Social Security Cards** for each household member or printout from Social Security Office (10 S 2nd St)
- Completed Application**
- Utility bills** (phone, cell phone, cable, satellite, internet, gas, electric & water/sewage) Most recent of each
- Request For Earnings Information** -- last 30 days
- Child support:** file for/payments received or payments made for last 30 days (print-out from county clerk)
- Social Security Income** - SSI or SSD application/amount receiving/status & printout on all Direct Express cards
- Shelter Verification Form or Mortgage Agreement**
- Landlord Lease or Current Mortgage coupon**
- Activity Report: on **all** checking, savings & debit cards ****print out dated from _____ through current date**
- Unemployment** eligibility or denial from Work One
- Job Search Sheet verifying client's application for 5 jobs**
- Verification of employment** -- form provided
- TANF** (Temporary Assistance to Needy Families) (AFDC) application or print out for Last 90 Days
- Food Stamp / Medicaid** application or print out for the Last 90 Days. Must include listing of all household members
- Referral Agencies:** LUM____ Salvation Army ____ Transitional Housing ____ Bauer ____ WIC ____
- Energy Assistance** (Area IV) apply & provide copy of application and amount of assistance received
- Physician's statement** of medical status-form provided
- Workman's compensation** -- file for / acceptance / denial

2023