

George E. Pataki Governor

NEW YORK STATE OFFICE OF TEMPORARY AND DISABILITY ASSISTANCE 40 NORTH PEARL STREET ALBANY, NY 12243-0001

Robert Doar Commissioner

Informational Letter

Section 1

Transmittal:	04-INF-21					
To:						
	Local District Commissioners					
Issuing	Division of Temporary Assistance					
Division/Office:						
Date:	November 8, 2004					
Subject:	Revision of the LDSS-4403: "Determination of Eligibility For Emergency					
	Assistance to Families (EAF)" (7/04 Revision)					
Suggested	Temporary Assistance Directors					
Distribution:	Food Stamp Benefits Directors					
	HEAP Coordinators					
	Medicaid Directors					
	Employment Coordinators					
	CAP Coordinators					
	TOP Coordinators					
	WMS Coordinators					
	Staff Development Coordinators					
Contact	Forms Questions: Bob Gullie 1-800-343-8859, Extension 6-1095					
Person(s):	Program Questions: Central Region - (518) 474-9344					
Attachments:	LDSS-4403:"Determination of Eligibility For Emergency Assistance to Families					
	(EAF)"					
Attachment Availa	able On –					

Filing References

Previous ADMs/INFs	Releases Cancelled	Dept. Regs.	Soc. Serv. Law & Other Legal Ref.	Manual Ref.	Misc. Ref.
03 ADM-11 04 INF-03 00 INF-21 95 INF-4		369.1 372.2(a)(4) 372.4(d)	-	TASB 2.C	GIS02 TA/DC 030 GIS03 TA/DC 005

Section 2

I. Purpose

The purpose of this release is to introduce the revised mandated form, LDSS-4403: "Determination of Eligibility for Emergency Assistance to Families (EAF)" (Rev. 7/04).

The primary reason for the revision is to clarify that "utility payments" are not subject to the "sudden and unforeseen" EAF requirement.

II. Background

EAF is a federally participating program designed to deal with crisis situations threatening a family with children under age 18, or age 18 and attending full-time secondary school or the equivalent level and to meet needs resulting from a sudden occurrence or a set of circumstances demanding immediate attention. The LDSS-4403 is designed to aid workers in correctly using the EAF program at case acceptance.

III. Program Implications

The revisions to this form are:

- 1. The Revision Date was changed to 7/04.
- 2. In number 1 of the "EAF Eligibility Determination Checklist" section, the question was changed to read:
 - 1. Is there at least one child under the age of 18, or age 18 and attending full-time secondary school who is currently residing with a caretaker who is related by blood, marriage or adoption?
- 3. The instructions, after answering questions 1 or 2, in the "EAF Eligibility Determination Checklist" section were changed to read:
 - If you can check "Yes" to either Number 1 or Number 2 above, proceed. If not, the case is ineligible for EAF.
- 4. The instructions, for answering questions 3, 4 or 5, in the "EAF Eligibility Determination Checklist" section were changed to read:
 - If you check "No" to all of the answers to Numbers 3-5 above, proceed. If you check "Yes" to either 3, 4 or 5 above, the case is ineligible for EAF.
- 5. Question 6 in the "EAF Eligibility Determination Checklist" section was changed to include another type of necessary payment. The revised question now reads:
 - 6. Is the necessary payment a diversion payment or a utility emergency payment? \Box YES \Box NO

IV. Forms Information

The 7/04 versions of the LDSS-4403 have been printed and delivered to the Albany warehouse.

Local districts will **not** automatically receive copies.

In order to ensure that the usage of these revised forms begin within a reasonable amount of time, you may continue to use the previous 7/03 versions until your stocks are depleted, or until January 2005, whichever occurs first.

Requests for supplies of the LDSS-4403: "Determination of Eligibility For Emergency Assistance to Families (EAF)" (Rev.7/04) should be submitted on OTDA-876 (Rev.6/98): "Request For Forms or Publications" form, and should be sent to:

Office of Temporary and Disability Assistance
Document Services
P.O. Box 1990
Albany, New York 12201

Questions concerning ordering forms should be directed to Document Services at 1-800-343-8859, ext. 4-9522.

In addition, for local district staff, an electronic PDF version of this form in this INF can be accessed on the OTDA Intranet website at http://sdssnet5/otda/ldss_eforms/default.htm.

Issued By

Name: Russell Sykes

Title: Deputy Commissioner

Division/Office: Division of Temporary Assistance