

Office for Family Independence Maine Department of Health and Human Services

Electronically Stolen Benefits Application

If your SNAP benefits were stolen through skimming, phishing, or some other electronic method of theft, we, the Office for Family Independence (OFI), may be able to replace your benefits. The most we can replace in SNAP benefits is the amount that was stolen or two months of your household's SNAP benefit, whichever is less. Upon receipt of this claim we will disable your EBT card to prevent further theft and issue you a new one.

To submit a claim for replacement benefits:

- Report the loss of SNAP to us within 30 days of noticing the theft. You can upload, e-mail or mail this form to addresses at the end of this application. You can request a copy of this form by calling OFI. The OFI Call Center is available for questions at 1 (855) 797-4357 from 7:00am to 4:00pm Monday through Friday.
- We will attempt to confirm what happened to your SNAP benefits. If we verify that your SNAP benefits were stolen electronically, we will issue the replacement SNAP benefits you're eligible for.
- There are a couple of steps that can protect your benefits against further electronic theft. We will order you another EBT card right away if you have not done so already. In the future, change your PIN the day before you get your benefits to help protect your benefits. Do not make online purchases on unsecure networks such as hotels, restaurants or public libraries.

Household Statement:

By signing this form, I am saying my SNAP benefits were stolen due to electronic benefit theft, I want OFI to replace these benefits, I know and understand there are penalties for giving false information, and the following is true:

Date I discovered			Total amount of benefits		
benefits were stolen			stolen		
Date(s) benefits were			Stolen benefits used at		
stolen			the following location(s)		
			if known		
I had my EBT card			I gave my EBT card or		
when the benefits were	YES	NO	PIN number to someone	YES	NO
stolen			I didn't know by email,		
			text, or phone		
I ordered a new EBT			Location of EBT card		
card after my benefits	YES	NO	now		
were stolen					

Additional information or details (use a second page if needed, NOT the back of this form):

I understand that an electronic or typed signature has the same legal effect and can be enforced in the same way as a written signature. **Please print clearly:**

Name	Physical address	
Client ID number		
or last 4 digits of your Social Security Number	Mailing address if different	
or USCIS number		
Phone Number	Email Address	
Signature of Household Member	Date Signed	

The information I gave is true to the best of my knowledge. I understand that making a false or misleading statement on this form on purpose could be a crime (perjury) or an Intentional Program Violation (IPV). A person found to have committed an IPV will be ineligible for SNAP for 1 year for the first IPV, 2 years for the second IPV, and permanently for the third IPV.

This page is for OFI use only:

Replacement of stolen benefits cannot be more than the lesser of the amount of benefits stolen or the amount equal to two months of allotments immediately prior to the date the benefits were stolen. P-EBT and WSB benefits may not be replaced. Benefits can only be replaced if the fraud occurred between 10-1-22 and 9-30-24. A household may only have benefits replaced due to fraud twice between 10-1-22 and 9-30-23 and twice between 10-1-23 and 9-30-24.

Were benefits already replaced between the current Oct to	Verified benefits were stolen by HH	
Sept cycle? YES NO	attestation, EPPIC, media report of identified	
If YES, when?	skimming devices, or other (explain)	

OFI Specialist or Investigator Signature	Date Signed

Give this form to OFI:

- Upload to: <u>mymaineconnection.gov</u>
- E-Mail to: <u>farmington.dhhs@maine.gov</u>
- Mail to: Farmington District Office 114 Corn Shop Lane Farmington, Maine 04938
- Bring to a Regional OFI office: <u>https://www.maine.gov/dhhs/about/contact/offices</u>