

Janet T. Mills  
Governor

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Commissioner



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Office for Family Independence  
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## SNAP Changes to Existing Group Homes

Administering Agency: \_\_\_\_\_

### I. Locations

Currently Listed Name and Address of Location	Closed? (Y/N)	Address Change? If YES, then provide new address below	Change to license status? Provide copy of license or signed confirmation from resource coordinator	Effective Date:
1.				
2.				
3.				
4.				
5.				
6.				
7.				

If a location meets the program criteria then residents of that location may apply for SNAP benefits. Eligibility to apply for SNAP benefits for each location will be confirmed via email from the Senior Food Supplement Program Manager, Ian Miller, upon review of this form. **NOTE: Facilities licensed by the State as ICF/MR (nursing home) facilities are not eligible to apply.**

Person Completing Form: \_\_\_\_\_

Title: \_\_\_\_\_

Date: \_\_\_\_\_

Email Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_

II. Please provide this completed form to the Department when changes are made, along with any necessary attachments (e.g. copy of license, statement from resource coordinator, etc.). Forms can be faxed to 207-287-3455 or scanned copies can be emailed to the Senior Program Manager — SNAP at [ian.miller@maine.gov](mailto:ian.miller@maine.gov)

III. **Department contact information:**

Group homes can contact the Department to apply for SNAP benefits for individual residents:

a. **Contact the Statewide Call Center:** 1-855-797-4357

b. **Apply Online at MyMaineConnection:** <https://www.maine.gov/mymaineconnection>

c. **Download applications and important forms:** <https://www.maine.gov/dhhs/ofi/applications-forms>

d. **Find DHHS office locations:** [https://gateway.maine.gov/dhhs-apps/office\\_finder/](https://gateway.maine.gov/dhhs-apps/office_finder/)

### **USDA NONDISCRIMINATION STATEMENT**

In accordance with federal civil rights law and U.S. Department of Agriculture (USDA) civil rights regulations and policies, this institution is prohibited from discriminating on the basis of race, color, national origin, sex (including gender identity and sexual orientation), religious creed, disability, age, political beliefs, or reprisal or retaliation for prior civil rights activity.

Program information may be made available in languages other than English. Persons with disabilities who require alternative means of communication to obtain program information (e.g., Braille, large print, audiotape, American Sign Language), should contact the agency (state or local) where they applied for benefits. Individuals who are deaf, hard of hearing or have speech disabilities may contact USDA through the Federal Relay Service at (800) 877-8339.

To file a program discrimination complaint, a Complainant should complete a Form AD-3027, USDA Program Discrimination Complaint Form which can be obtained online at: <https://www.usda.gov/sites/default/files/documents/ad-3027.pdf>, from any USDA office, by calling (833) 620-1071, or by writing a letter addressed to USDA. The letter must contain the complainant's name, address, telephone number, and a written description of the alleged discriminatory action in sufficient detail to inform the Assistant Secretary for Civil Rights (ASCR) about the nature and date of an alleged civil rights violation. The completed AD-3027 form or letter must be submitted to:

1. **mail:**  
Food and Nutrition Service, USDA  
1320 Braddock Place, Room 334  
Alexandria, VA 22314; or
2. **fax:**  
(833) 256-1665 or (202) 690-7442; or
3. **email:**  
[FNSCIVILRIGHTSCOMPLAINTS@usda.gov](mailto:FNSCIVILRIGHTSCOMPLAINTS@usda.gov)

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