

ALLOWABLE LEVELS OF ASSISTANCE PAYMENTS FOR THE MUNICIPALITY OF Canaan, New Hampshire

Established by vote of the Governing Body, date: _____ 8/12/10 _____

FOOD WITH FOOD STAMPS/NON-FOOD

HOUSEHOLD SIZE	MONTHLY FOOD	MONTHLY NON-FOOD	WEEKLY FOOD	WEEKLY NON-FOOD	
1	25 _____	25 _____	10 _____	5 _____	_____
2	50 _____	50 _____	20 _____	10 _____	_____
3	75 _____	75 _____	30 _____	15 _____	_____
4	100 _____	100 _____	40 _____	20 _____	_____
5	125 _____	125 _____	50 _____	25 _____	_____
6	150 _____	150 _____	60 _____	30 _____	_____
7	175 _____	175 _____	70 _____	35 _____	_____
8	200 _____	200 _____	80 _____	40 _____	_____

FOOD WITHOUT FOOD STAMPS/NON-FOOD

HOUSEHOLD SIZE	MONTHLY FOOD	MONTHLY NON-FOOD	WEEKLY FOOD	WEEKLY NON-FOOD	
1	50 _____	25 _____	20 _____	5 _____	_____
2	100 _____	50 _____	40 _____	10 _____	_____
3	150 _____	75 _____	60 _____	15 _____	_____
4	200 _____	100 _____	80 _____	20 _____	_____
5	250 _____	125 _____	100 _____	25 _____	_____
6	300 _____	150 _____	120 _____	30 _____	_____
7	350 _____	175 _____	140 _____	35 _____	_____
8	400 _____	200 _____	160 _____	40 _____	_____

MONTHLY SHELTER ALLOWANCES

	1 BR	2 BR	3 BR	4 BR	
	\$700 ___	\$800 ___	\$900 ___	\$1000 _	2 adults/children per room

Heat

Electric _____ Oil _____ Nat. Gas _____ Bottled Gas _____

(Top row is allowance for heated shelter. If unheated, add amounts indicated in "heat" columns to basic shelter cost in top row. Allowances MUST reflect actual housing market)

BURIAL ALLOWANCE: _____ \$1,500 _____ TELEPHONE ALLOWANCE: _____

OTHER (SPECIFY): _____

NOTE: Amounts may be adjusted in extraordinary circumstances with Selectmen's approval.