



Tennessee Department of Human Services
Affidavit Request for SNAP Replacements Due to Household Misfortune and Power Outage

Name (Head of Household)	
Case Number	
Current household address	
City/Town/State/Zip Code	

I am requesting a replacement of SNAP benefits as a result of a household misfortune that occurred on _____ (**Date of loss must be entered**).

I certify that my household has lost food in the amount of \$ _____ as a result of a household misfortune or a power outage of at least twelve (12) hours.

The information I am giving on this form is true to the best of my knowledge. I understand that making a false or misleading statement on this form could be a crime or an Intentional Program Violation (IPV).

Client Signature		Date	
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At times, additional verification may be needed. Please provide the name and contact information of someone who can verify your loss, if needed.

Name of Collateral Contact	
Collateral Contact Street Address	
City, State, Zip Code	
Collateral Contact Phone Number	

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, audiotope, 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 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

This institution is an equal opportunity provider.