



# Job Aid: Disaster Intake

**Overview:** Provides steps to complete a Disaster FNS Application and add a Disaster EBT Card to case.

**Note:** To prevent duplicates and capture client SSN in NC FAST, a thorough search must be conducted for each person prior to keying the application. Duplicates in the system can cause duplicate cases, duplicate benefits, delay in benefit processing, disruption of existing benefit coverage and the inability to complete the application.

## Step-by-Step Instructions

1. From the NC FAST page, conduct a Person Search for each client on the application using multiple criteria, for more information refer to the *Searching for Persons* procedure.
2. Register client(s) if not already registered in NC FAST. For more information, refer to the *Registering Persons Job Aid*.
3. Expand Shortcuts Panel then select the **Disaster Application** folder. Click **Start Intake**.



4. The Search Member pop-up appears. Enter and select applicable details for the Head of Household then click **Search**.



**Search Member** ? x

\* required field

**Search Criteria**

First Name  Last Name

Date Of Birth  Gender

SSN

**Search Results**

Select	Name	SSN	Date Of Birth	County	Individual ID	SSI	Program Type	Status



- The Search Results appear. Click the applicable **Select** hyperlink or click **Next** if no match found.

Search Results (Number of Items: 6)

Select	Name	SSN	Date Of Birth	County	Individual ID	SSI	Program Type	Status
Select	William Wynn	[REDACTED]	1/1/1965			No		
Select	[REDACTED]	[REDACTED]	3/4/2010			No		
Select	[REDACTED]	[REDACTED]	3/4/2010			No		
Select	[REDACTED]	[REDACTED]	3/29/1958			No		
Select	[REDACTED]	[REDACTED]	3/4/2010			No		
Select	[REDACTED]	[REDACTED]	3/4/2010			No		

Next Cancel

- Enter Application Details pop-up appears. Enter the Application Date, select the applicable Type with the correct Disaster Date **radio button** then click **Next**.

**Note:** The application date must be in the range of the Application Start Date and Application End Date. It cannot be future dated.

Enter Application Details

Application Details

Application Date \*

Disaster Details

Type /	Num	Disaster Name	Disaster Date	Application Start Date	Application End Date
<input type="radio"/> Hurricane	1	hurricane	9/1/2013	9/1/2013	9/30/2017
<input type="radio"/> Flood	2	Andy	7/21/2014	7/21/2014	7/31/2014
<input type="radio"/> Tornado	2	Swirly	7/1/2014	7/1/2014	7/1/2015
<input type="radio"/> Hurricane	6	Davids Disaster	8/15/2014	8/15/2014	8/31/2014
<input type="radio"/> Ice	3	Transylvania	8/15/2014	8/20/2014	9/20/2014
<input type="radio"/> Tornado	7	Onslow	8/26/2014	8/26/2014	9/26/2014
<input type="radio"/> Ice	6	Pasquotank	8/1/2014	8/1/2014	9/30/2014
<input type="radio"/> Earthquake	10	Shake It Up	11/1/2014	11/1/2014	12/31/2016

Next Cancel

- The Additional Rules pop-up appears. Select the applicable information then click **Next**.

Enter Additional Rules

Member Details

Name William Wynn Date of Birth 1/1/1984

Additional Details

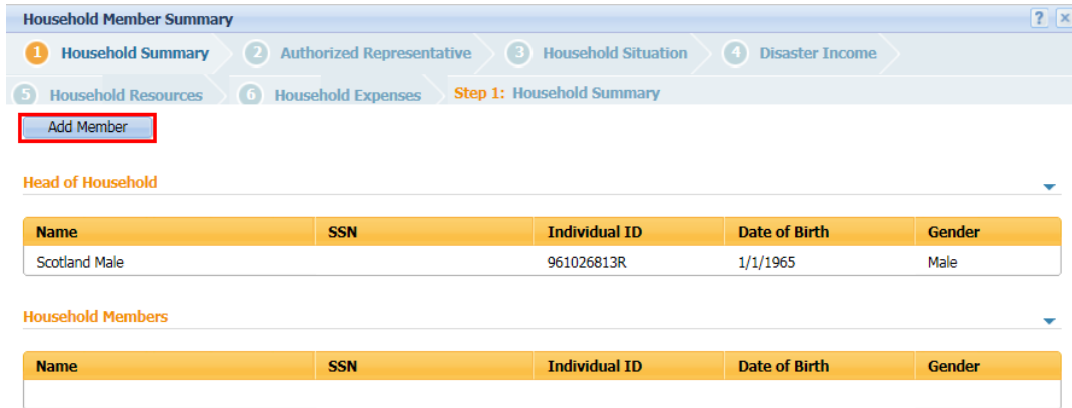
Disabled  Yes  No

Next Cancel



The Disaster Application displays. Follow the steps below to complete the application wizard.

8. The Household Member Summary page displays. If applicable, click **Add Member** to include additional clients on the application.



**Household Member Summary** [?] [x]

1 Household Summary 2 Authorized Representative 3 Household Situation 4 Disaster Income

5 Household Resources 6 Household Expenses **Step 1: Household Summary**

**Add Member**

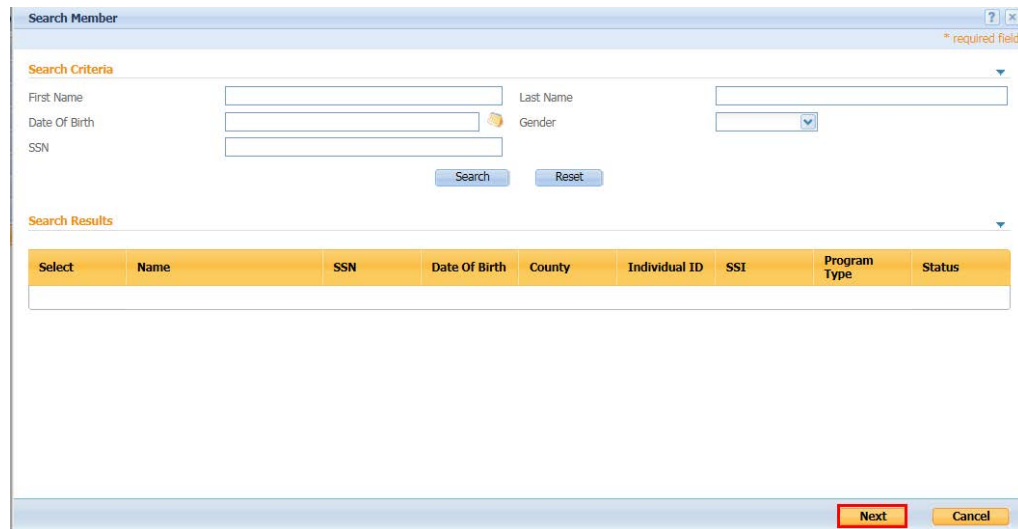
**Head of Household**

Name	SSN	Individual ID	Date of Birth	Gender
Scotland Male		961026813R	1/1/1965	Male

**Household Members**

Name	SSN	Individual ID	Date of Birth	Gender

- a. The Search Member pop-up appears. Enter and select applicable details then click **Next**.



**Search Member** [?] [x] \*required field

**Search Criteria**

First Name  Last Name

Date Of Birth  Gender

SSN

**Search Results**

Select	Name	SSN	Date Of Birth	County	Individual ID	SSI	Program Type	Status

- b. Click the applicable **Select** hyperlink.



**Search Member** ? x \* required field

**Search Criteria**

First Name:  Last Name:   
Date Of Birth:  Gender:   
SSN:

**Search Results**

Select	Name	SSN	Date Of Birth	County	Individual ID	SSI	Program Type	Status
Select	James Connor	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	No		
Select	James Connor	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	No		
Select	James Connor	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	No		
Select	James Connor	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	No		
Select	James Connor	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	No		
Select	James Connor	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	No		
Select	James Connor	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	No		
Select	James Connor	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	No		
Select	James Connor	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	No		

- c. The Household Member Summary displays showing the newly added member. After all household members are displayed in the summary, click **Next**.

**Household Member Summary** ? x

1 Household Summary 2 Authorized Representative 3 Household Situation 4 Disaster Income  
5 Household Resources 6 Household Expenses **Step 1: Household Summary**

**Head of Household**

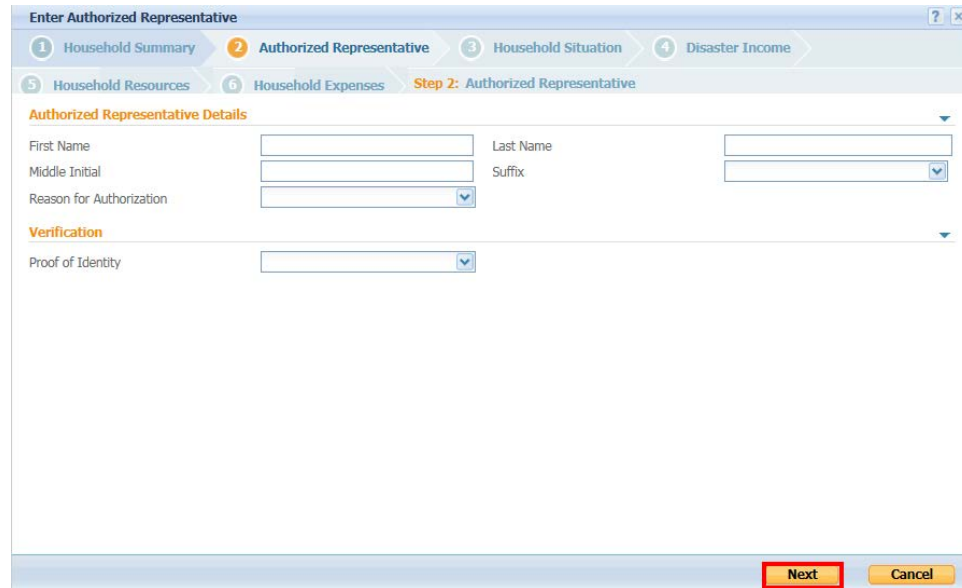
Name	SSN	Individual ID	Date of Birth	Gender
Scotland Male	[REDACTED]	961026813R	1/1/1965	Male

**Household Members**

Name	SSN	Individual ID	Date of Birth	Gender
James Connor	[REDACTED]	[REDACTED]	7/4/1946	Male
James Connor	[REDACTED]	[REDACTED]	12/2/1919	Female

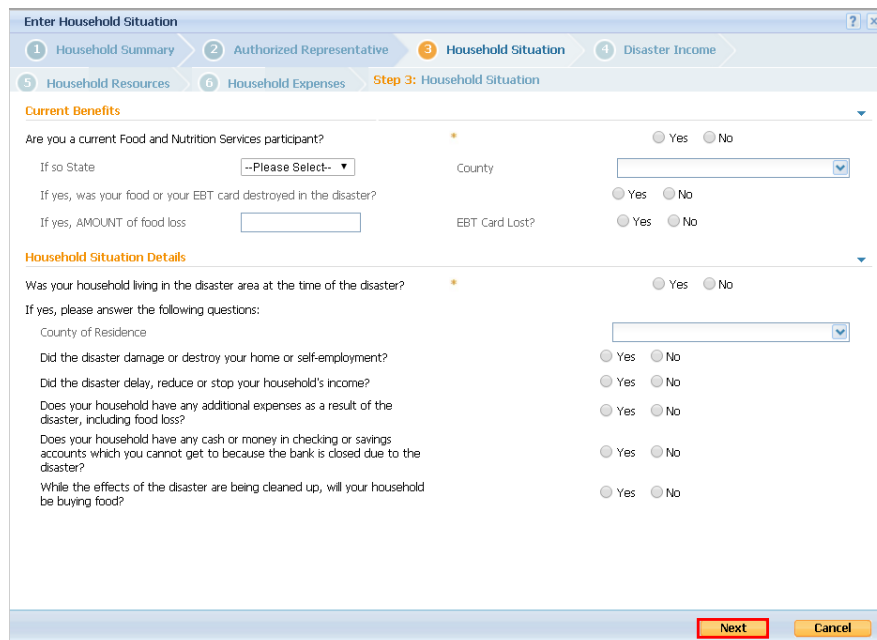


9. The Enter Authorized Representative page displays. Enter and select applicable details then click **Next**.



10. The Enter Household Situation page displays. Enter and select applicable details then click **Next**.

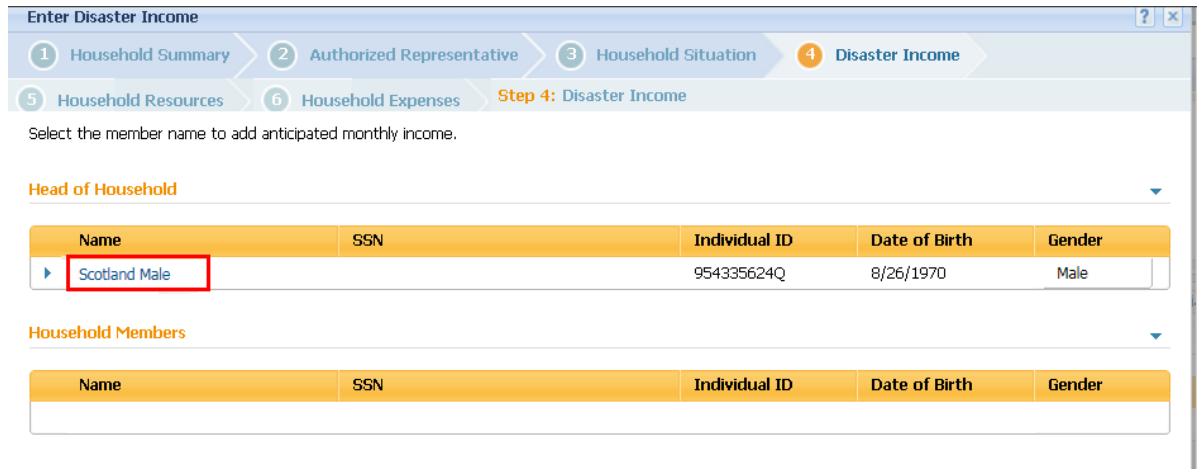
**Note:** Under the Current Benefits section, if *No* is selected for the question *Are you a current Food and Nutrition Services participant?*, **do not** answer any other questions listed under the Current Benefits section; continue and complete the Household Situation Details section. If other questions are answered in the Current Benefits section, the caseworker will have to complete an entirely new application.





11. The Enter Disaster Income page displays.

- a. If applicable, enter and select applicable details. To enter disaster monthly income, click on the person's name.

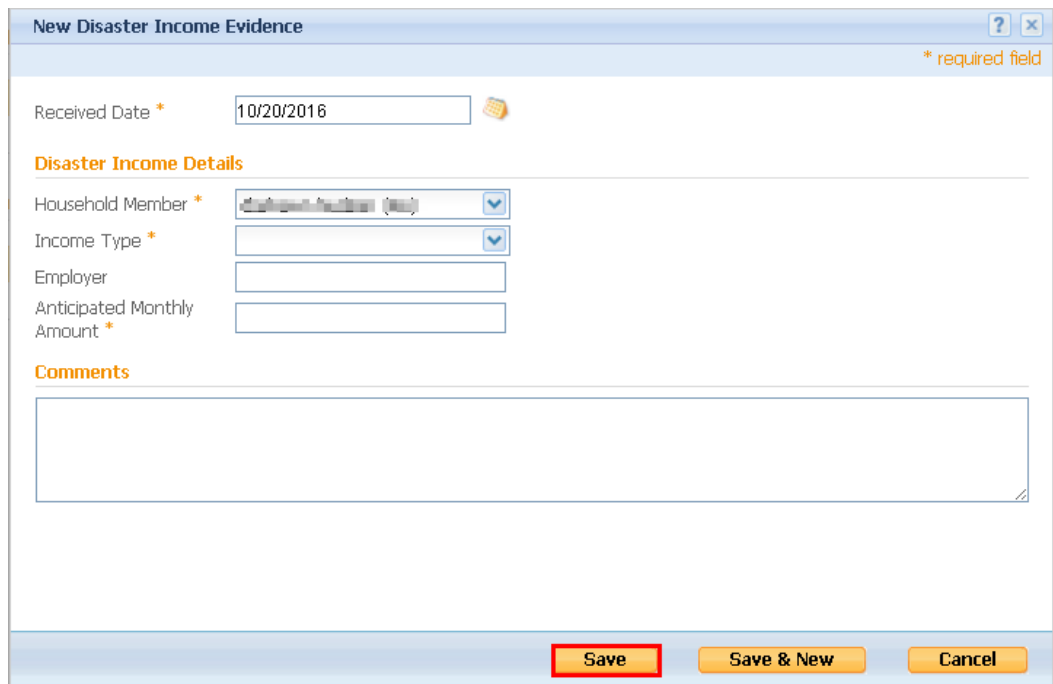


Name	SSN	Individual ID	Date of Birth	Gender
Scotland Male		954335624Q	8/26/1970	Male

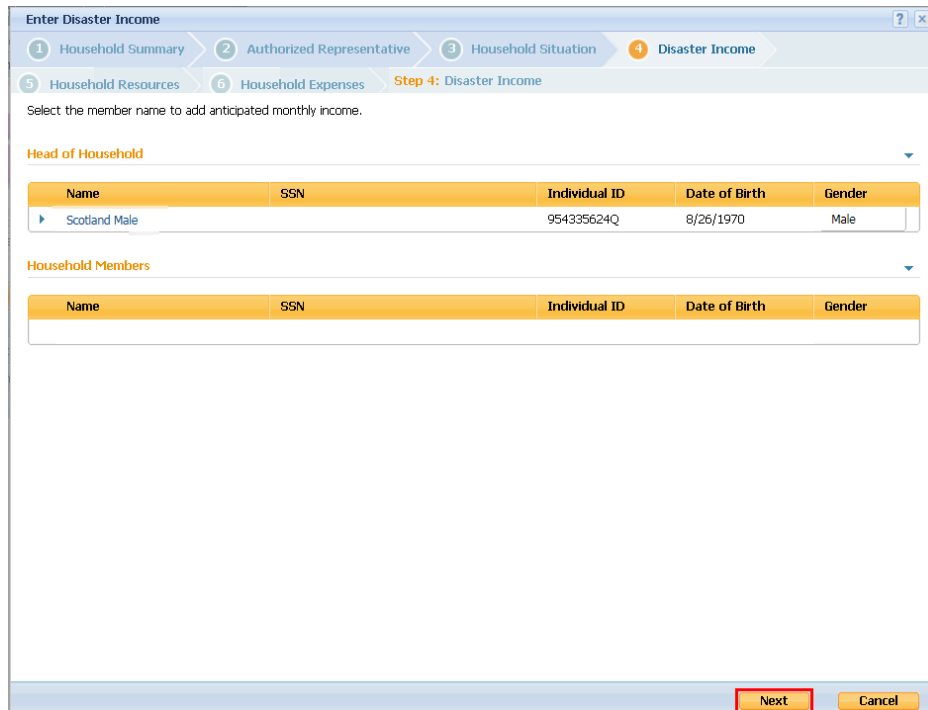
Name	SSN	Individual ID	Date of Birth	Gender
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- b. The New Disaster Income Evidence pop-up appears. Enter the applicable information then click **Save**.





c. If income is not applicable, click **Next**.



Enter Disaster Income

1 Household Summary 2 Authorized Representative 3 Household Situation 4 Disaster Income

5 Household Resources 6 Household Expenses Step 4: Disaster Income

Select the member name to add anticipated monthly income.

Head of Household

Name	SSN	Individual ID	Date of Birth	Gender
Scotland Male		954335624Q	8/26/1970	Male

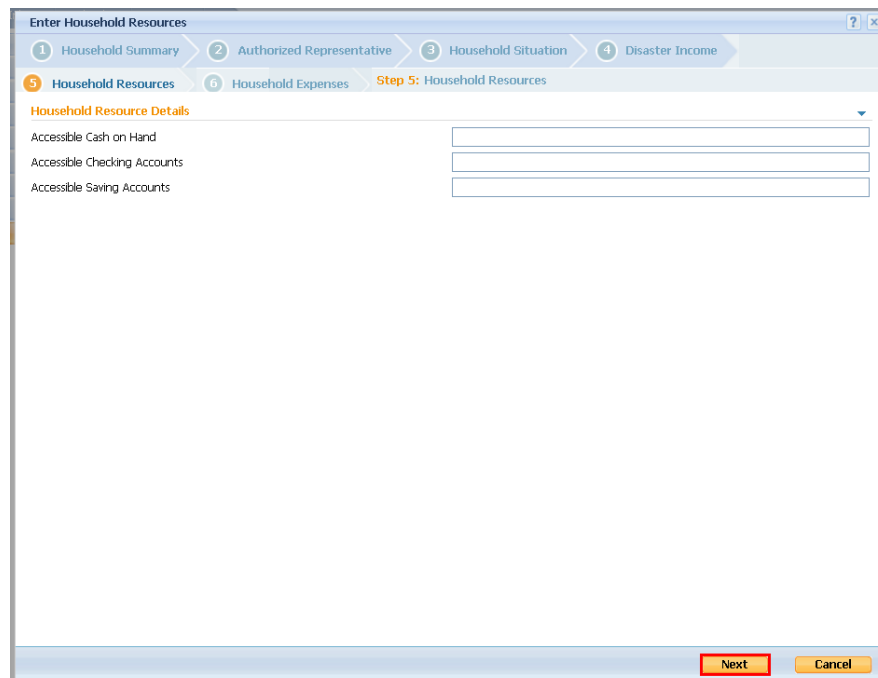
Household Members

Name	SSN	Individual ID	Date of Birth	Gender
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Next Cancel

12. The Enter Household Resources page displays. Enter the accessible cash resources as whole numbers then click **Next**.

Example: Eighty dollars would be entered as 80.



Enter Household Resources

1 Household Summary 2 Authorized Representative 3 Household Situation 4 Disaster Income

5 Household Resources 6 Household Expenses Step 5: Household Resources

Household Resource Details

Accessible Cash on Hand

Accessible Checking Accounts

Accessible Saving Accounts

Next Cancel

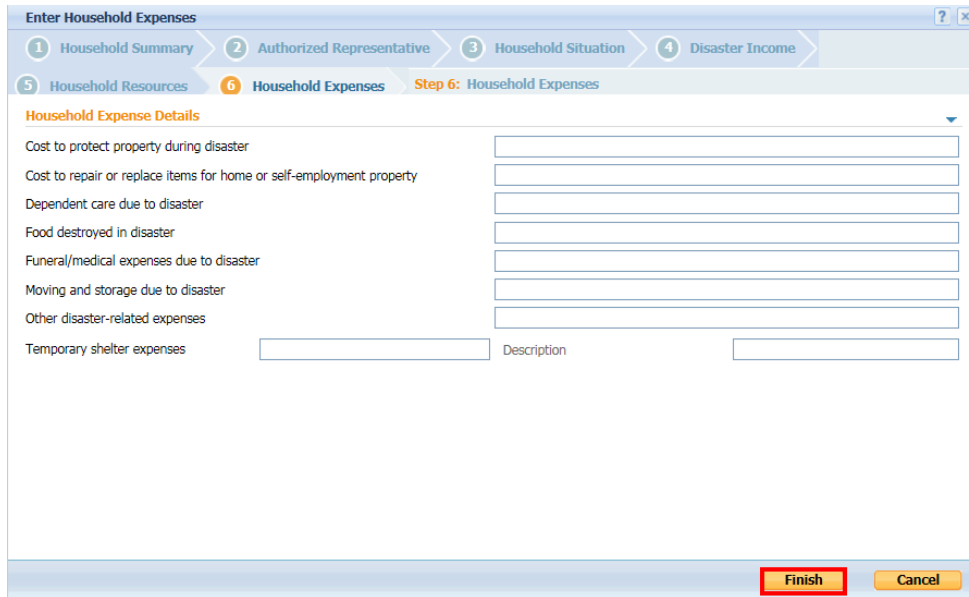


13. The Enter Household Expenses page displays. Complete fields by entering a whole number.

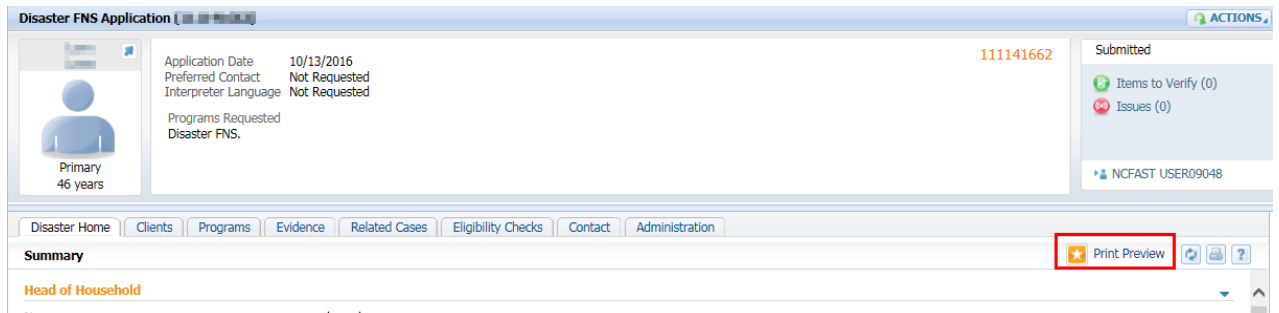
**Note:** If a number is entered in the Other disaster-related expenses field enter the item in the Description field.

a. Click **Finish** to submit application.

**Note:** Applications filed in error should be withdrawn.



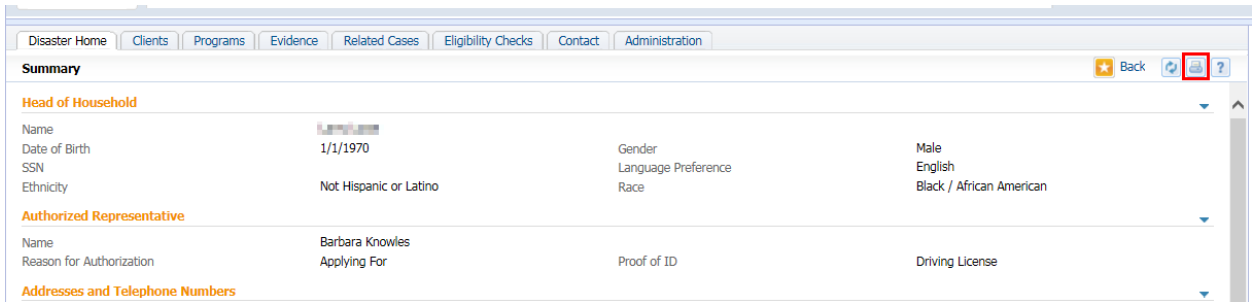
14. The Disaster FNS Application page displays. Under the Disaster Home tab click the **Print Preview** hyperlink.



15. The Application Summary page displays. Click the printer **icon** to print the application for the applicant's signature.

**Note:** Click **Cancel** on the first print menu pop-up to get to the second pop-up for the application.





Disaster Home | Clients | Programs | Evidence | Related Cases | **Eligibility Checks** | Contact | Administration

Summary Back Print Help

**Head of Household**

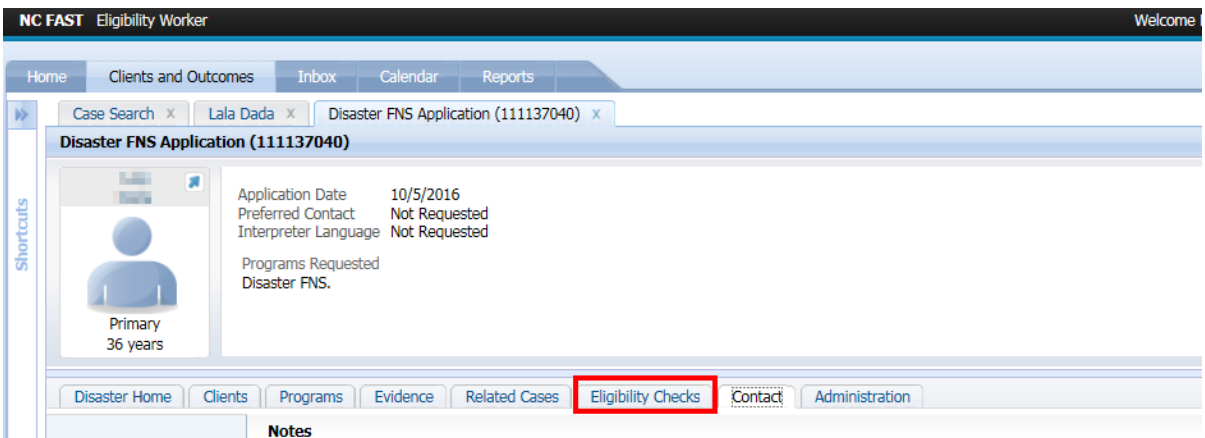
Name	[REDACTED]	Gender	Male
Date of Birth	1/1/1970	Language Preference	English
SSN	[REDACTED]	Race	Black / African American
Ethnicity	Not Hispanic or Latino		

**Authorized Representative**

Name	Barbara Knowles	Proof of ID	Driving License
Reason for Authorization	Applying For		

**Addresses and Telephone Numbers**

16. Click the **Eligibility Checks** tab.




NC FAST Eligibility Worker Welcome

Home | Clients and Outcomes | **Inbox** | Calendar | Reports

Case Search x | Lala Dada x | Disaster FNS Application (111137040) x

**Disaster FNS Application (111137040)**

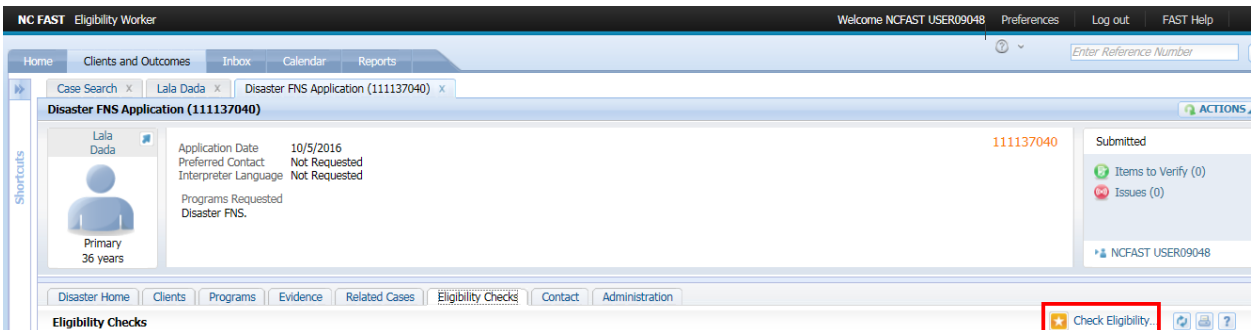
Shortcuts

 Primary 36 years	Application Date 10/5/2016 Preferred Contact Not Requested Interpreter Language Not Requested Programs Requested Disaster FNS.
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Disaster Home | Clients | Programs | Evidence | Related Cases | **Eligibility Checks** | Contact | Administration

Notes

17. The Eligibility Checks page displays. Click the **Check Eligibility** hyperlink.



NC FAST Eligibility Worker Welcome NCFast USER09048 Preferences Log out FAST Help

Home | Clients and Outcomes | **Inbox** | Calendar | Reports

Case Search x | Lala Dada x | Disaster FNS Application (111137040) x

**Disaster FNS Application (111137040)** 111137040 ACTIONS

Shortcuts

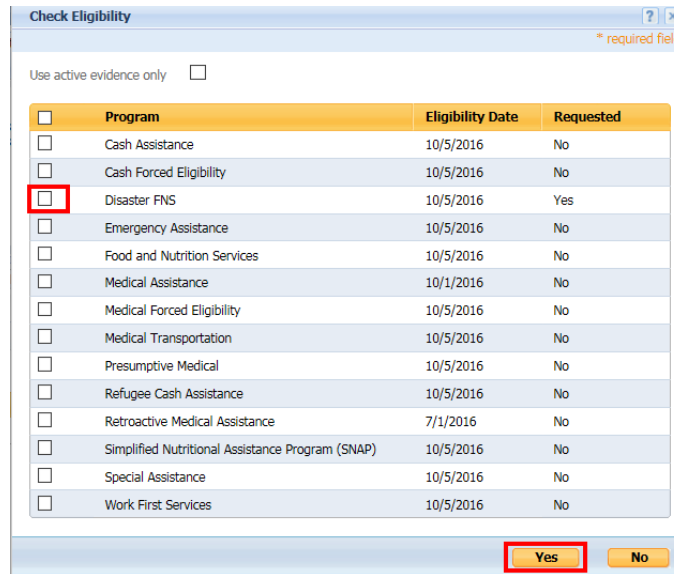
Lala Dada	Application Date 10/5/2016 Preferred Contact Not Requested Interpreter Language Not Requested Programs Requested Disaster FNS.	Submitted Items to Verify (0) Issues (0) NCFast USER09048
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Disaster Home | Clients | Programs | Evidence | Related Cases | **Eligibility Checks** | Contact | Administration

**Eligibility Checks** Check Eligibility Print Help



18. The Check Eligibility pop-up appears. Select the Disaster FNS **check box** then click **Yes**.

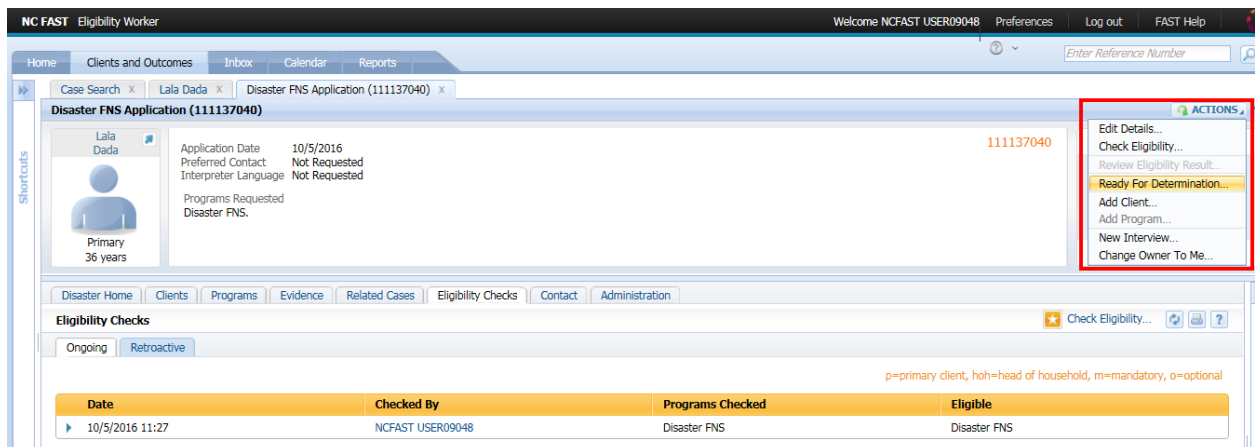


Check Eligibility \* required field

Use active evidence only

<input type="checkbox"/>	Program	Eligibility Date	Requested
<input type="checkbox"/>	Cash Assistance	10/5/2016	No
<input type="checkbox"/>	Cash Forced Eligibility	10/5/2016	No
<input checked="" type="checkbox"/>	Disaster FNS	10/5/2016	Yes
<input type="checkbox"/>	Emergency Assistance	10/5/2016	No
<input type="checkbox"/>	Food and Nutrition Services	10/5/2016	No
<input type="checkbox"/>	Medical Assistance	10/1/2016	No
<input type="checkbox"/>	Medical Forced Eligibility	10/5/2016	No
<input type="checkbox"/>	Medical Transportation	10/5/2016	No
<input type="checkbox"/>	Presumptive Medical	10/5/2016	No
<input type="checkbox"/>	Refugee Cash Assistance	10/5/2016	No
<input type="checkbox"/>	Retroactive Medical Assistance	7/1/2016	No
<input type="checkbox"/>	Simplified Nutritional Assistance Program (SNAP)	10/5/2016	No
<input type="checkbox"/>	Special Assistance	10/5/2016	No
<input type="checkbox"/>	Work First Services	10/5/2016	No

19. If the eligibility check displays the correct result, click the **Tab Actions Menu** then select **Ready for Determination**. Otherwise, edit the evidence as necessary, apply changes then check eligibility again.



NC FAST Eligibility Worker Welcome NCFast USER09048 Preferences Log out FAST Help

Home Clients and Outcomes Inbox Calendar Reports

Case Search x Lala Dada x Disaster FNS Application (111137040) x

**Disaster FNS Application (111137040)**

Lala Dada 111137040

Application Date 10/5/2016  
Preferred Contact Not Requested  
Interpreter Language Not Requested

Programs Requested  
Disaster FNS.

Primary  
36 years

**ACTIONS**

- Edit Details...
- Check Eligibility...
- Review Eligibility Result...
- Ready For Determination...**
- Add Client...
- Add Program...
- New Interview...
- Change Owner To Me...

Disaster Home Clients Programs Evidence Related Cases Eligibility Checks Contact Administration

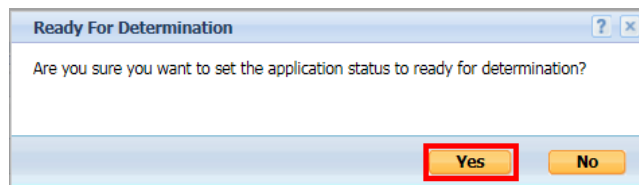
Eligibility Checks Check Eligibility...

Ongoing Retroactive

p=primary client, hoh=head of household, m=mandatory, o=optional

Date	Checked By	Programs Checked	Eligible
10/5/2016 11:27	NCFast USER09048	Disaster FNS	Disaster FNS

20. The Ready for Determination pop-up appears. Click **Yes**.

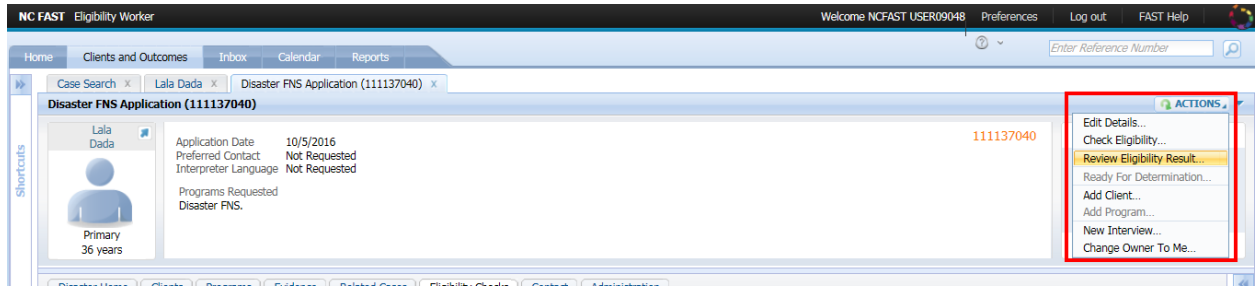


Ready For Determination

Are you sure you want to set the application status to ready for determination?

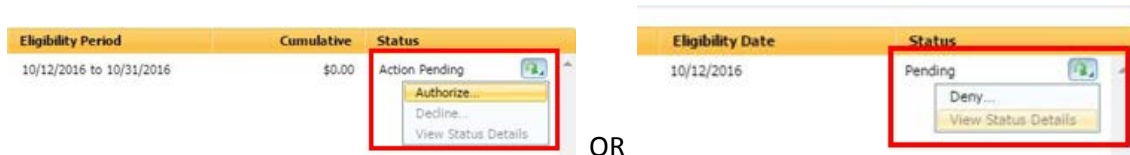


21. Click the **Tab Actions Menu** then select **Review Eligibility Results**.

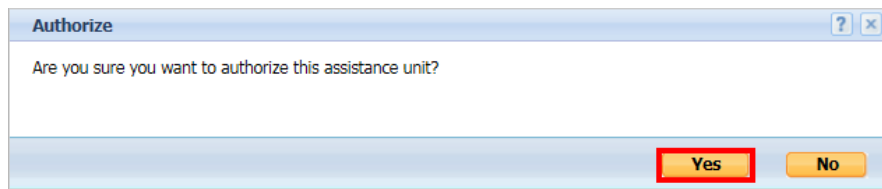


22. The Review Eligibility Results pop-up appears. Click the **List Actions Menu** then select **Authorize** or **Deny**.

**Note:** Prior to authorizing the application, make sure verification of identity has been received.

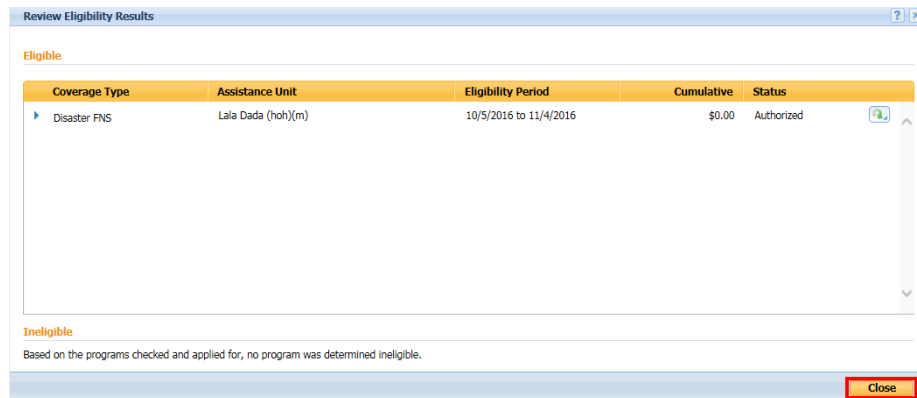


23. The Authorize or Deny pop-up appears. Click **Yes**.



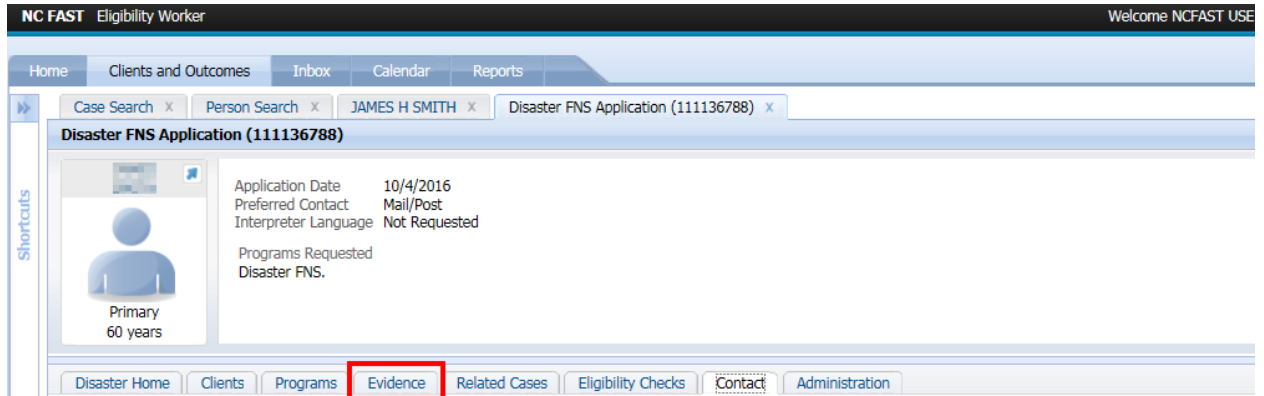
24. Click **Close**.

**Note:** For a denied application, this is the last step.



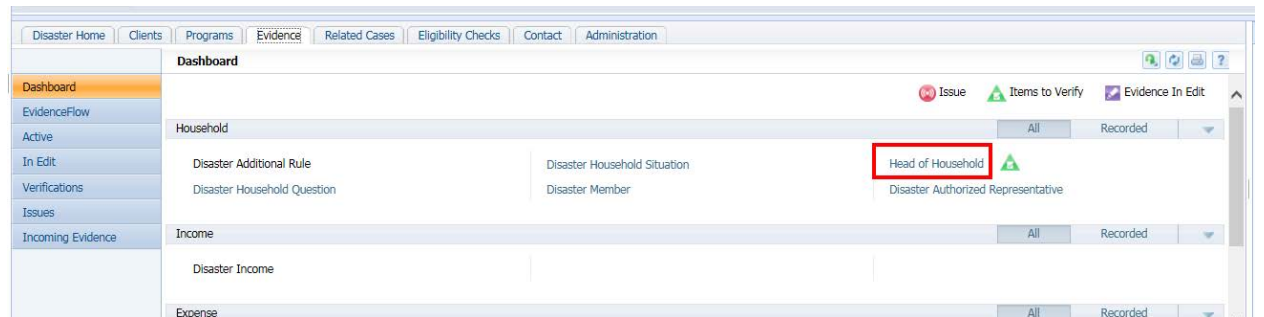


25. Click the **Evidence** tab to display the Evidence Dashboard.



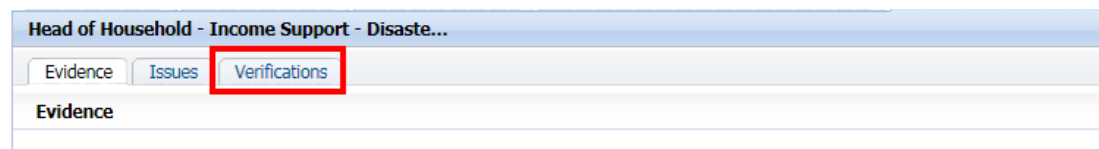
The screenshot shows the NC FAST Eligibility Worker interface. The top navigation bar includes Home, Clients and Outcomes, Inbox, Calendar, and Reports. Below this, there are tabs for Case Search, Person Search, JAMES H SMITH, and Disaster FNS Application (111136788). The main content area displays details for the Disaster FNS Application (111136788), including Application Date (10/4/2016), Preferred Contact (Mail/Post), Interpreter Language (Not Requested), and Programs Requested (Disaster FNS). A red box highlights the Evidence tab in the bottom navigation bar.

26. The Dashboard displays. Click **Head of Household** hyperlink.



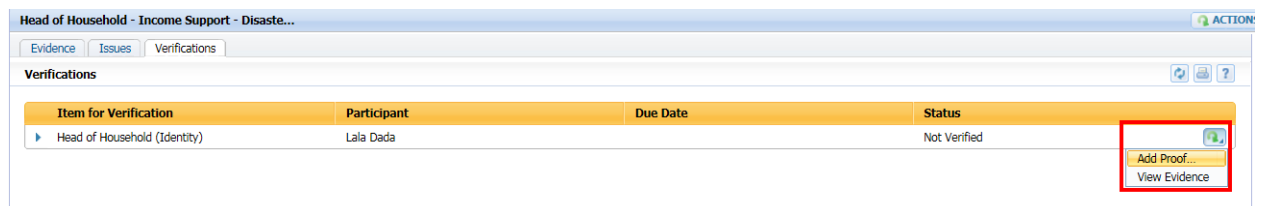
The screenshot shows the Evidence Dashboard. The left sidebar contains a navigation menu with options like Dashboard, EvidenceFlow, Active, In Edit, Verifications, Issues, and Incoming Evidence. The main content area displays a grid of evidence items. A red box highlights the 'Head of Household' hyperlink under the Household section.

27. The Head of Household Evidence page displays. Click the **Verifications** folder and add the required verification.



The screenshot shows the 'Head of Household - Income Support - Disaste...' page. The top navigation bar includes Evidence, Issues, and Verifications. A red box highlights the Verifications folder.

28. The Verifications page displays. Click the **List Actions Menu** then select **Add Proof**.

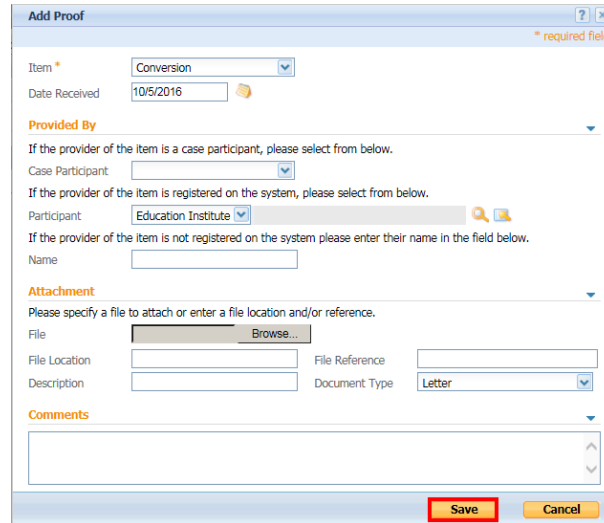


The screenshot shows the Verifications page. The top navigation bar includes Evidence, Issues, and Verifications. The main content area displays a table of verifications. A red box highlights the 'Add Proof...' button in the List Actions Menu.

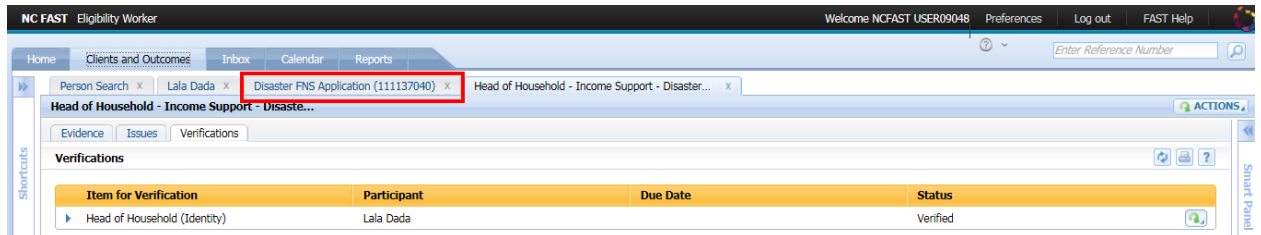
Item for Verification	Participant	Due Date	Status
Head of Household (Identity)	Lala Dada		Not Verified



29. The Add Proof pop-up appears. Enter and select the applicable information then click **Save**.

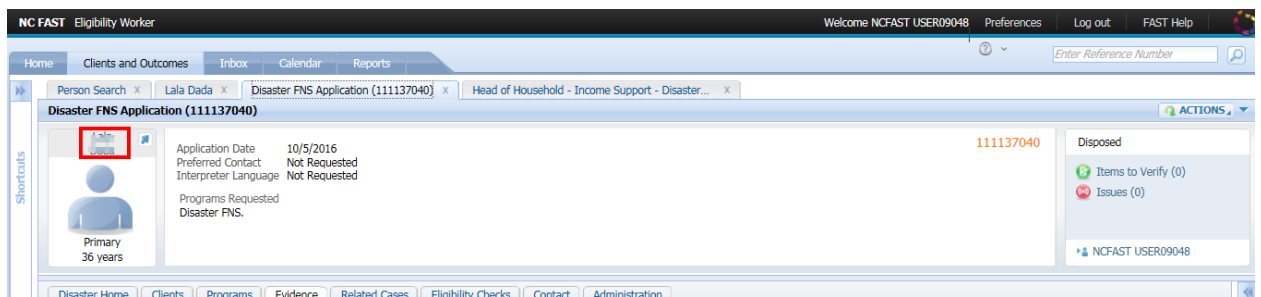


30. Click the **Disaster FNS Application** tab.



Item for Verification	Participant	Due Date	Status
Head of Household (Identity)	Lala Dada		Verified

31. Click Head of Household's name **hyperlink** in the context panel to navigate to the Person page.



Disaster FNS Application (111137040)

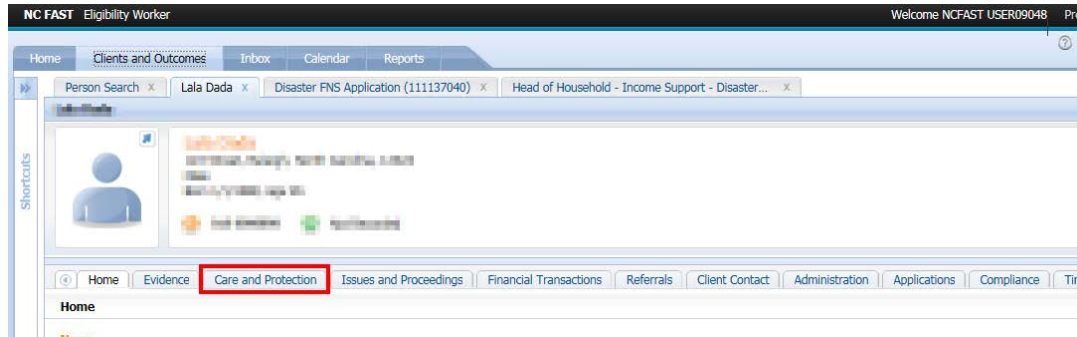
Application Date: 10/5/2016  
Preferred Contact: Not Requested  
Interpreter Language: Not Requested  
Programs Requested: Disaster FNS.

Primary  
36 years

111137040  
Disposed  
Items to Verify (0)  
Issues (0)  
NCFAST USER09048



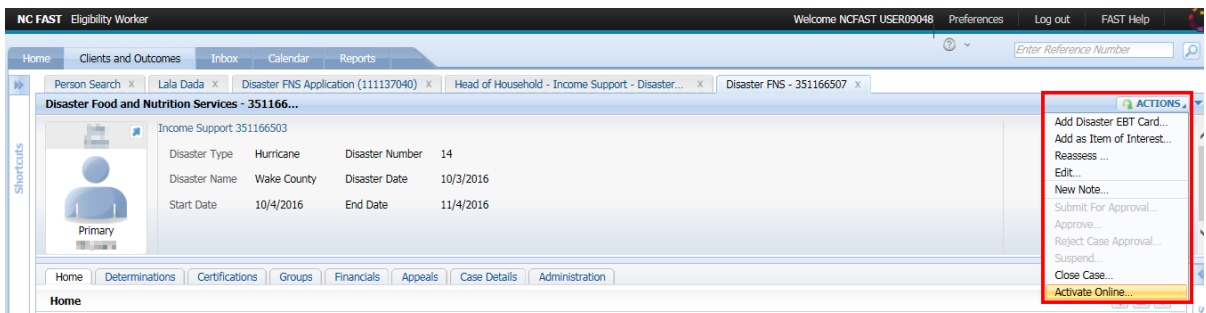
32. Click the **Care and Protection** tab.



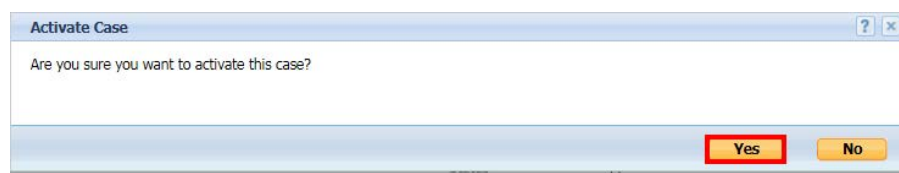
33. The Cases page displays. Select the Disaster FNS PDC reference number **hyperlink**.

Reference	Name	Role	Owner	Start Date	Status
351166503	Income Support - Disaster FNS	Primary Client	NCFAST USER09048	10/3/2016	Open
351166507	Disaster FNS		NCFAST USER09048	10/3/2016	Approved
351112242	Income Support	Primary Client	NCFAST USER08098	7/26/2016	Open
351112280	Medical Assistance		NCFAST USER08098	7/1/2016	Active

34. The Disaster Food and Nutrition Services page displays. Click the **Tab Actions Menu** then select **Activate Online**.



35. The Activate Case pop-up appears. Click **Yes**.





36. Click the **Tab Actions Menu** then select **Add Disaster EBT Card**.



37. The Add Disaster EBT Card pop-up appears. Enter PAN and SUI numbers and verify that numbers are associated with correct case and client. Re-verify PAN and SUI numbers then click **Save**.

**Note:** PAN and SUI numbers cannot be edited once saved and benefits will not be issued to the client if incorrect numbers are entered. If the SUI/PAN numbers are entered incorrectly, it is the county's responsibility to facilitate a fix.

**Note:** A designated Authorized Representative for a case will not receive a separate EBT Card.

38. The Disaster Food and Nutrition Services home page displays showing the EBT Card Issued under Recent Changes.

Event Type	Description	Date Time	Created By
EBT Card Issued	EBT card assigned for SUI - 8000367744, PAN - 5081610069090345.	10/20/2016 14:40	NCFast USER09048
Product Delivery Activated	Disaster FNS - 351182928 case for Zoe Rich activated	10/20/2016 14:34	NCFast USER09048
Product Delivery Approved	Disaster FNS - 351182928 case approved for Zoe Rich	10/20/2016 14:34	SYSTEM
User Role Added	NCFast USER09048 added as a Case Reviewer to Disaster FNS - 351182928	10/20/2016 14:34	SYSTEM
Product Delivery Submitted	Disaster FNS - 351182928 case submitted for approval for Zoe Rich	10/20/2016 14:33	NCFast USER09048
Certification Added	Certification added from 10/8/2016 to 11/30/2016	10/20/2016 14:33	NCFast USER09048
Case Created	Disaster FNS - 351182928 created for Zoe Rich	10/20/2016 14:33	NCFast USER09048