

DEPARTMENT OF HEALTH AND HUMAN SERVICES

LANSING

ELIZABETH HERTEL DIRECTOR

VEHICLE PURCHASE INFORMATION

MDHHS-5946 (5-21)

Below are some of the criteria for Direct Supportive Services (DSS) for a Vehicle Purchase Assistance through MDHHS, for a vehicle up to \$4,000:

- Customers are limited to assistance with one vehicle purchase per lifetime.
- \$4,000 is the maximum allowed toward the total price **OR** for the down payment.
- Prior approval from MDHHS is required for this service.
- You must be a recipient of the Family Independence Program, Child Development and Care, Family Medicaid, or Family Food Assistance benefits through MDHHS.
- Public transportation is not reasonably available and there is no other means to reach the job site reliably.
- You can afford any payments, insurance, and other expenses associated with owning the vehicle.
- You have a valid Michigan driver's license.

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- The vehicle must be for an eligible group member and insured, at a minimum, with public liability and property damage insurance (PLPD); Note: Do not register or put insurance on the vehicle until you speak to your worker and know that you will be approved.
- Completed Vehicle Purchase form (Must be completed, signed, and dated by all of the following: the seller, licensed mechanic, and you as the buyer).
- You must not have any other vehicles registered in your name at the Secretary of State.
- You must be employed/self-employed and provide proof and demonstrate an ability to maintain the job;
 OR needs a vehicle to accept a verified job offer;
 OR needs a vehicle to participate in family self-sufficiency activities.

Important: There is no entitlement for DSS. The decision to authorize DSS is within the discretion of MDHHS based on local office funding.

VEHICLE PURCHASE CHECKLIST

Once you have obtained the following verifications, please return verifications to the local office or upload to MIBridges at www.michigan.gov/mibridges:

- Valid Michigan Driver's License.
- Completed Vehicle Purchase form (Must be completed, signed, and dated by all of the following: the seller, licensed mechanic and you as the buyer) and provide the bill for purchase of the vehicle.
- Have and can prove the ability to afford any payments, insurance and other expenses associated with owning the vehicle.
- Completed DHS-38, Verification of Employment or last 30 days of pay stubs or proof of family selfsufficiency activities.

The Michigan Department of Health and Human Services will not exclude from participation in, deny benefits of, or discriminate against any individual or group because of race, sex, religion, age, national origin, color, height, weight, marital status, gender identification or expression, sexual orientation, partisan considerations, or a disability or genetic information that is unrelated to the person's eligibility.

VEHICLE PURCHASE INFORMATION

Date	Case Number	er Case I	Number	
SELLER INFORMATION (TO BE COMPLETED BY SELLER)				
Dealer/Seller Name				
Dealer/Seller Address				
Phone Number	Fax Number	Federal ID # or SSN #	SIGMA ID #	
VEHICLE INFORMATION	I			
Year	Make	Model	Body Style	
Body Condition (Check Excellent	cone) Good	Fair	Poor	
Odometer Reading		Vehicle Number (VIN)		
PURCHASE PRICE INFO	RMATION			
Base Price of the Vehic	cle ***			
Tax				
License Plate/Title Trai	nsfer			
TOTAL		0.00		
Seller/Sales Person's N	Name (Print)			
Seller/Sales Person's Signature			Date	
***Our maximum paym	nent on the base price of	f the vehicle is \$4,000.		
INSPECTION (TO BE CO	MPLETED BY LICENCED A	MECHANIC)		
Mechanic Statement: I vehicle is safe and road	•	le listed above and, in my pro	fessional opinion, this	
Mechanic Name (Print))		License #	

Mechanic Signature	Date