Tri-County Community Action Program, Inc. Energy Assistance Services No/Low Income



NO/LOW INCOME

| Applicant Name: | |
|--|--|
| Reasons for no or low household income: | |
| Are you unemployed? Yes / No If yes, date unemployed: Last place of employment: Current employer start date: | Income Verification Form: If employment ended in the last 8 weeks. |
| Applied for unemployment? Yes/No Are benefits pending? Yes/No Has your unemployment ended? Yes/No | DES Verification Form: If unemployed for 1 yr or less. Date ended: |
| Are you receiving city/town welfare? Yes / No | Letter from city/town welfare |
| Are you receiving state welfare or cash assistance? Yes / No | EBT print out , letter, or application |
| Are you receiving food stamps? Yes / No | EBT print out , letter, or application |
| Has your spouse left? Yes / No | Date: Address: |
| Are you receiving child support? Yes / No | Proof of Amount Received or Paid |
| Is your rent overdue (heat included)? Yes / No Have you been evicted (heat included)? Yes / No Have your utilities been disconnected? Yes / No | Disconnection date: |
| Received help from family or friend (not in household)? Yes / No | Support letter or statement |
| Used saving, checking and/or credit card? Yes / No | Bank and/or credit statement |
| Received other help (churches, etc.)? Yes / No | Explain in comment section below |
| Comments: | |
| Please explain how you provided food, rent/mortgage, heat & utilities for be required. Use reverse if more room is needed. | the last 30 days. Documentation may |
| Food: | |
| Rent/mortgage: \$ | |
| Heat: | |
| Utilities: | |
| I have given a true and complete statement of facts necessary to allow determined if I knowingly give inaccurate or incomplete information about my househor prosecuted for fraud, resulting in possible imprisonment and/or fine. | • |
| Signature: | Date: |