

ASSISTANCE IS DEPENDENT UPON AVAILABILITY OF FUNDS!!

NAME: _____ Intake # _____

APPOINTMENT: MON TUE WED THU FRI

NOVEMBER: _____ AT: _____ AM PM

REQUIRED DOCUMENTS FOR APPLICATION:

PICTURE I.D. FOR CITIZENSHIP AFFIDAVIT - for applicant only. (NEW REQUIRMENT)

SOCIAL SECURITY NUMBER VERIFICATION - for every member of the household

PROOF OF AGE- for every member of the household

PROOF OF ALL INCOME FOR THE PAST 30 DAYS – for every member of the household

PROOF OF ANY INTEREST INCOME FOR 2012 – for every member of the household

CURRENT HEATING BILL - less than 2 months old

If applying for someone else, you must have an AUTHORIZATION FORM signed by the person.

IF you cannot keep your appointment please call _____ to
cancel/reschedule.

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