

**The Low-Income Home Energy
Assistance Program (LIHEAP)**

Pennsylvania Advocates Manual
2011-2012 Edition

*Produced by the Pennsylvania Utility Law Project
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LIHEAP: PA Advocates Manual
2011-2012 Edition
Prepared by the Pennsylvania Utility Law Project

Preface

We are pleased to provide you with the 2011-2012 electronic edition of *The Low-Income Home Energy Assistance Program (LIHEAP) Pennsylvania Advocates Manual*. It has been developed and produced by the Pennsylvania Utility Law Project (PULP) for use by members of the Pennsylvania Legal Aid Network and others who assist low-income individuals. We hope that you find it to be of value to you and the members of your staff. Please feel free to copy it as needed, to circulate it to those most likely to make use of it and to maintain a copy in your reference library.

The 2011-2012 Manual has been updated and is different from earlier editions circulated in prior years. Please replace any older version. This year's edition has been edited to contain program changes, current forms, references, website links, additional issues and advocacy suggestions. Citations are provided in the footnotes. Contact lists and forms are provided in the Appendices.

Although an essential program, the different aspects and components of LIHEAP change from year to year and are therefore not always well understood by advocates and by applicants. Many eligible consumers do not apply, and those who do often receive less than their full potential benefits. This Manual is intended to be a working reference to aid in providing understanding of and access to the benefits provided by Pennsylvania's LIHEAP. We value and request your input regarding the success of the Manual in meeting your needs and welcome any suggestions for modification.

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Summary of Updates and Changes for the 2011-2012 LIHEAP Program Year¹

• **Program Dates:**

- Cash opens Nov. 1, 2011 and closes March 30, 2012.
- Crisis Exception Payments opens Nov. 1, 2011 and closes Jan. 2, 2012.
- Crisis will open Jan. 3, 2012 and close March 30, 2012.
- Crisis Interface/Weatherization Assistance Program opens Nov. 1, 2011 and closes March 30, 2011.
- DPW may extend or shorten program dates depending on availability of funds.

• **Eligibility:** Eligibility is set at 150% of the Federal Poverty Income Guidelines:

Household Size	Household Income
1	\$16,335
2	\$22,065
3	\$27,795
4	\$33,525
Each additional person	\$5,730

• **Grant Amounts:**

- Minimum Cash grant will be \$100.
- Maximum Cash grant will be \$1,000.
- Minimum Crisis grant will be \$25.
- Maximum Crisis grant will be \$300.

• **Definition for Crisis Exception Payment:**

Program Note: The Cash and Crisis components will open at different times and will not run concurrently until January 3. From November 1, 2011 to January 2, 2012, DPW will be providing what it calls “Crisis Exception Payments.” The criteria for receiving “Crisis Exception Payments” are different from those for receiving a Crisis Payment and are described below.

For purposes of determining eligibility for a Crisis Exception Payment, a household must meet the following criteria:

- The Main Heating Source has been shut off or, if a deliverable fuel, supply is depleted or only sufficient for 15 days or less.

¹ These changes are accurate as of November 15, 2011. However, it is expected that there will be program modifications during the 2011-2012 LIHEAP program year. Please be alert for any additional modifications.

OR

- The Secondary Heating Source (a source needed to operate the main heating source) has been shut off or, if a deliverable fuel, supply is depleted or is only sufficient for 15 days or less.

- **Overpayments Less Than \$25.00:**

DPW will not seek repayment of any overpayment of less than \$25.00 that was caused by fraud, error or misrepresentation, by either the client or vendor.

- **Licensed Businesses Out of the Home:**

A household where an individual is operating a licensed business **and** deducting the home's utilities on their business' tax return will not be eligible for LIHEAP if more than 50% of the home's space is being attributed to business use.

- **Fleeing Felon:**

An individual who is currently incarcerated or fleeing to avoid prosecution, custody, or confinement after a felony conviction (or high misdemeanor in New Jersey) is ineligible to receive LIHEAP benefits. The individual is excluded from the household composition, but his or her income is included in the calculation of household income.

- **Heating Appliances:**

A household will not be eligible for any LIHEAP assistance if the heating appliance isn't installed and operating based on the manufacturer's specifications or current code requirements, whichever is more stringent, and isn't following all applicable building and fire codes.

- **Connecting at a New Address:**

For a customer whose service has been disconnected at their previous address and who needs service to be connected at their new address, DPW will now allow a regulated utility to request 50% of the customer's back balance from the previous address and a reconnection fee in order to restore service. If the customer receives a LIHEAP Cash grant that is more than this 50% of back balance plus reconnection fee, the remainder of the Cash grant must be applied to the household's future bills by the utility, which must also agree to keep service on through the winter moratorium and enroll the customer in a Customer Assistance Program or budget program, if eligible.

- **Households with Zero/Minimal Income:**

Individuals responsible for paying for their main source of heat directly to a vendor, but have the bill paid by someone outside of the household because the household has

zero/minimal income, are considered to have a heating responsibility and are thus eligible for LIHEAP benefits.

CONTINUING FROM THE PREVIOUS PROGRAM YEAR:

- **Crisis Definition for Deliverable Fuels – Final Plan, § 601.62:**

For purposes of determining eligibility for a Crisis grant, DPW interprets the definition of a crisis to include situations where a deliverable fuel customer will run out of its fuel source in less than 15 calendar days.

- **The Crisis must require more than \$25 to be resolved:**

Any household requiring less than \$25 to resolve a home heating emergency will not be eligible to receive a Crisis grant.

- **The utility must apply the LIHEAP Cash grant payment to the CAP customer's "Asked to Pay" amount - Final Plan §601.45:**

Public utilities that operate CAPs (Customer Assistance Programs) are required to apply the LIHEAP Cash component benefits only to the customer's monthly "Asked to Pay" amount. No LIHEAP funds may be pooled or applied to a CAP customer's pre-program arrearages or actual usage amounts.

- **Heat and Eat Initiative:**

DPW will issue a \$1.00 heating assistance benefit to SNAP (Supplemental Nutrition Assistance Program) households that are responsible for heating costs and have not already been approved for LIHEAP during the current program year. This will enable SNAP recipients to maximize the SNAP Standard Utility Allowance (SUA).

- **Statewide Toll Free LIHEAP Hotline - 1-866-857-7095:**

DPW has a statewide toll free Hotline number specifically dedicated to enabling individuals to call regarding LIHEAP issues.

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Introduction

The Low-Income Home Energy Assistance Program (LIHEAP) Pennsylvania Advocates Manual is produced by the Pennsylvania Utility Law Project (PULP) for members of the Pennsylvania Legal Aid Network and others who assist low-income individuals. It is not intended to be a substitute for direct legal advice in individual cases, but it is intended to be used as a general reference guide. Citations are provided in the footnotes. References and a sampling of forms are provided in the Appendices. Website references can be found throughout. The authors welcome receiving your questions, as well as your comments.

LIHEAP in Brief

The Low-Income Home Energy Assistance Program (LIHEAP) provides low-income households with assistance to help pay the costs of home energy consumption. In Pennsylvania, LIHEAP supplements are intended primarily to assist with paying the cost of heating a residence during the cold weather months.²

LIHEAP is funded by the Federal government but administered by the states. In Pennsylvania, the Department of Public Welfare (DPW) is charged with administering the LIHEAP program through local County Assistance Offices and other agencies.

In 2011-2012 LIHEAP assistance may take 4 different forms. A particular household may be entitled to receive one or more of the different forms of assistance. It is therefore essential to review and analyze each household situation:

- **Cash Component:** a single grant,³ available one time each year, to assist a household in meeting heating costs. It is paid either (a) to a heating fuel vendor/utility company or (b) directly to an individual. The amount of the LIHEAP Cash grant provided to each household may differ. The grant amount is based on a set formula discussed below. This year, a household may apply for the LIHEAP Cash component from November 1, 2011-March 30, 2012. The grant amount will range from \$100 to a maximum of \$1000.
- **Crisis Exception:** beginning November 1, 2011 and continuing through January 2, 2012, any LIHEAP eligible household without heat may apply for Crisis Exception assistance. If the amount of the household's Cash grant alone will be sufficient to restore heat, DPW will provide the grant in an expedited manner. However, if the amount of the household's Cash grant alone is insufficient to restore heat, DPW will then provide a Crisis payment, even though the Crisis program is not yet open. Crisis Exception assistance will only be provided if the payment, combined with the Cash grant and other available resources, will result in the restoration of heating services.
- **Crisis Component:** up to \$300 is available to help qualified households resolve a home heating crisis caused by an actual or imminent lack of fuel or utility termination, a problem with a heating system (i.e., furnace), or a weather-related event. Any household

² At times, it has been extended to assist with summer cooling needs.

³ Note, however, that at times, supplemental payments to the Cash grant have been issued by DPW. This usually occurs if additional funding is received after the program has begun.

requiring less than \$25 to resolve a home heating emergency will not be eligible to receive a Crisis grant.

- **Crisis Interface/Weatherization Assistance Component:**⁴ repair or replacement of the heating system or furnace is provided to those with a heating system breakdown. Traditional weatherization and conservation services may supplement the repairs.

The same form may be used to apply for each of the LIHEAP components.

An individual may be able to designate a different vendor to receive different types of grant payments; for example, a Cash grant may be designated to an oil vendor and a Crisis grant to the electricity provider.

An individual may receive more than one Crisis benefit during the 2011-2012 program year, subject to the minimum and maximum amounts allowed and the amount of available Federal funding.

LIHEAP is available to both renters and homeowners. However, renters who pay for heat for their residence indirectly as an undesignated part of rent will receive only 50% of the Cash benefit for which they would otherwise be eligible. Eligible households may reapply for and receive Cash and Crisis assistance each year. LIHEAP is not a public assistance program. There will be no lien attached to a home as a result of receiving any LIHEAP assistance.

DPW maintains a Heating Assistance/LIHEAP website. It is located at:
<http://www.dpw.state.pa.us/foradults/heatingassistanceliheap/index.htm>.

DPW is charged with publishing annually a LIHEAP State Plan with program guidelines and parameters, such as program opening and closing dates, funding levels, and eligibility criteria. A Proposed State Plan is published during the summer months and is subject to public comments and public hearings in which anyone may participate. After comments are received and reviewed, DPW publishes a Final State Plan that governs the LIHEAP operation for that program year. The LIHEAP rules for that year are found in Appendix B of the Final Plan. Information regarding Crisis Interface and the Weatherization Assistance Program may be found in Appendix C of the Final Plan. The current Final Plan is available online at:
http://www.dpw.state.pa.us/ucmprd/groups/webcontent/documents/communication/s_001816.pdf.

DPW also provides a LIHEAP Policy Handbook for its caseworkers. The Handbook includes Operations Memoranda which are issued periodically and which indicate the most recent LIHEAP procedures and policies. The most recent publicly available Handbook is found online at:
<http://services.dpw.state.pa.us/oimpolicymanuals/manuals/bop/le/index.htm>.

The 2011-2012 Cash grant benefit tables, which indicate the amount of the Cash grant to which each household is entitled, may be found online at:
<http://www.dpw.state.pa.us/foradults/heatingassistanceliheap/liheapbenefitamounttable/index.htm>.

⁴ This component is the only component not administered completely within DPW. DPW makes the Crisis eligibility determination, but the Department of Community and Economic Development administers the repair and replacement segment.

A LIHEAP application may be completed online through the COMPASS program at <https://www.humanservices.state.pa.us/compass.web/CMHOM.aspx>, or a paper application may be mailed or hand delivered to the local County Assistance Office. The English version paper application may be downloaded from the DPW website at:

http://www.dpw.state.pa.us/ucmprd/groups/webcontent/documents/form/p_011811.pdf.

The Spanish version may be downloaded at:

http://www.dpw.state.pa.us/ucmprd/groups/webcontent/documents/form/p_011812.pdf.

The addresses of local County Assistance Offices may be accessed online at:

www.dpw.state.pa.us/findfacilsandlocs/countyassistanceofficecontactinformation/index.htm.

Legal Authority

LIHEAP is a Federal block grant program. It is authorized by the Low-Income Home Energy Assistance Act (Pub. L. 97- 35, 42 U.S.C.A. §§8621-8629) as amended by the Human Services Reauthorization Act (Pub. L. 98-558, 98 Stat. 2878), the Human Services Reauthorization Act of 1986 (Pub. L. 99-425, 100 Stat. 966), the Augustus F. Hawkins Human Services Reauthorization Act of 1990 (Pub. L. 101-501), the National Institutes of Health Revitalization Act of 1993 (Pub. L. 103-43), the Low-Income Home Energy Assistance Amendments of 1994 (Pub. L. 103-252), the Coats Human Services Reauthorization Act of 1998 (Pub. L. 105-285), and the Energy Policy Act of 2005 (Pub. L. 109-58).⁵

While Federal law forms the legislative basis for the LIHEAP program, the annual Final State Plan (hereinafter, “the Plan”) contains the policies that govern implementation of the program each year. The Plan is broken into several subsections: an introductory section, an assurances section, and three appendices.

“Appendix B – Determination of Eligibility for LIHEAP Cash and Crisis Benefits” is the key section of the Plan to which the advocate should turn because it provides guidelines for the Cash and Crisis components, the components most usually accessed.

“Appendix C- Weatherization Assistance Program” contains information concerning both the Crisis Interface Program as well as the DCED administered weatherization programs.

Administration

DPW administers LIHEAP in Pennsylvania. DPW uses the County Assistance Offices (CAOs) as the administering agency for the Cash grant.⁶ DPW uses several different agencies to assist in the delivery of the Crisis program. These agencies include CAOs, community action agencies, the Department of Community and Economic Development, and other local organizations. The Crisis Interface/Weatherization Assistance component is administered jointly by DPW and the Department of Community and Economic Development (DCED). DPW makes the Crisis eligibility determination, and DCED administers the heating system repairs and any appropriate weatherization treatments.⁷

⁵ Low-Income Home Energy Assistance Program 2012 Final State Plan at § 601.1.

⁶ Id. at § 601.5.

⁷ Id. at pg. xiii; also see Appendix C of the Final State Plan.

County staff members who deal with the administration of LIHEAP may not always be fully aware of the details of the current year's program because: LIHEAP is only one of many programs implemented through the CAOs; it is available only part of the year; and its operations and guidelines are often modified within the course of a single year. In addition, many of the CAOs hire temporary energy assistance workers to staff the LIHEAP program, and these workers may just be becoming familiar with program guidelines as the first applicants enter the system.

While the final federal 2011-2012 LIHEAP budget appropriation was unknown at the time LIHEAP opened November, 2011 in Pennsylvania, the state LIHEAP budget anticipates LIHEAP funding to be significantly below the amounts appropriated in recent years. Therefore advocates should encourage individuals to apply for Cash grants early, since there are often delays in processing Cash grant applications, and there is the danger of funds running out later in the program year.

An appeal process is available for individuals who are aggrieved.

Timetable

LIHEAP generally opens in November and closes toward the end of March. However, since exact opening and closing dates change between program years, it is important for the advocate to check the annual Final State Plan to know the timetable for that year.⁸ In addition, because the length of the program is dependent on the availability of funds as the program year progresses, it is possible for DPW to shorten or extend the closing date.⁹ In recent years, including 2011, DPW has announced in March that it will be extending the program closing date into April.

In 2011-2012, the Cash component is scheduled to open on November 1, 2011, the Crisis component is scheduled to open January 3, 2012 and both are scheduled to close on March 30, 2012. Crisis Exception Payments will be available November 1, 2011 through January 2, 2012.¹⁰ The Crisis Interface program is scheduled to be open from November 1, 2011 until March 30, 2012.

General Eligibility

In order to qualify for and receive Cash or Crisis benefits, an individual must meet several eligibility requirements relating to household income, home heating responsibility, residency, and non-citizen status. Crisis Exception and Crisis eligibility also require that there be an actual or imminent home heating emergency that will be resolved through receipt of those grants. (For details regarding the specific eligibility requirements for Crisis Exception and Crisis grants, see the "Crisis Exception Payments" and "Crisis Component" sections of this manual.)

⁸ 2012 Final State Plan at § 601.6(a).

⁹ Id. at § 601.6(b).

¹⁰ Id. at pg. ii.

Household Income

Federal law allows states to set the income eligibility level for LIHEAP participation at no more than 60% of the state median income and no less than 110% of the Federal Poverty Income Guidelines.¹¹ For 2011-2012, Pennsylvania has set the income eligibility level for both Cash and Crisis at 150% of the Federal Poverty Income Guidelines.¹²

Income Calculation

To determine income eligibility levels for the 2011-2012 LIHEAP program year, advocates are referred to Appendix A of this Manual or to DPW eligibility charts which may be found online at:

<http://www.dpw.state.pa.us/foradults/heatingassistanceliheap/homeheatingassistanceliheapeligibility/index.htm>.

The **applicant** is given the discretion to decide how gross annual income is calculated.¹³ Applicants may choose to use their income from the 12 months or the 90 days immediately prior to the filing of the application. These amounts are converted to a yearly figure – gross annual income - and used to determine both a household’s eligibility and the Cash grant amount.¹⁴ Advocates should therefore help the applicant determine which of the time frames (12 months or 90 days) yields the income level most advantageous for the household. In some cases, the selection of the time frame to be used, as well as the timing of the Cash grant application, may help lead to a determination of eligibility and may lead to significantly different benefit amounts. Income for household members who receive SNAP, Cash, or Medical benefits from DPW will be annualized based on the gross amount on DPW’s Client Information System.¹⁵

To determine the income level for an applicant household, the administering agency includes the gross annual income from **all** of the following people:

- all household members, regardless of relationship,
- a roomer related by blood, marriage, or adoption to a household member,
- a person living with the applicant who, as a member of another household, has already received a LIHEAP Cash or Crisis grant during the present program year.¹⁶

Gross income is defined as the total earned and unearned income of the household, including:

- employee earnings,
- profit from self-employment,
- income from roomers, boarders or apartment renters, and
- unearned income.¹⁷

¹¹ 2012 Final State Plan at § 601.31(1).

¹² Id. at pg. iv.

¹³ Id. at § 601.83(a).

¹⁴ Id.

¹⁵ Id.

¹⁶ Id. at § 601.81.

¹⁷ Id. at § 601.82.

Each of these categories of earnings has multiple subcategories; see, for example, unearned income at Section 601.82(4)(i)-(x).

Many income sources, such as educational assistance, food stamps, and cash or in-kind heating assistance from public or private agencies, are **excluded** from the calculation of household income for the purposes of establishing eligibility for LIHEAP.¹⁸

Home Heating Responsibility

Applicants must have a home heating responsibility to receive LIHEAP. Persons deemed to have home heating responsibility include:

- Homeowners or renters (including subsidized housing tenants) who pay for home heating fuel or utility service directly to a vendor. (If the bill is paid by someone outside the household because the household has zero/minimal income, the household is still considered to have a heating responsibility and therefore eligible to receive LIHEAP.)¹⁹
- Renters who pay for heat indirectly for their residence as an undesignated part of their rent.²⁰
- Roomers²¹ who pay for their lodging in either a commercial establishment or in a private home which is their permanent and primary home.²²

To establish home heating responsibility for a Cash grant, the household must show responsibility for paying for the main source of heat either directly to a vendor or to a landlord as an undesignated part of rent.²³

To establish home heating responsibility for Crisis, the household must establish the responsibility of paying for either its main *or* secondary source of heat either directly to a vendor or indirectly to a landlord as an undesignated part of rent.²⁴ For an important discussion of main vs. secondary fuel types, please see the Special Issues section of this manual.

DPW does not consider the following housing situations to represent a home heating responsibility, and they are, therefore, not a basis to receive LIHEAP:

- Renters are ineligible if their rental charge includes an undesignated amount for heat AND is based on a fixed percentage of their income or on their source of income. This would apply to subsidized-housing tenants.²⁵

¹⁸ 2012 Final State Plan at § 601.84(1)-(22).

¹⁹ Id. at § 601.31(2)(i)(A).

²⁰ Id. at § 601.31(2)(i)(B).

²¹ A roomer is defined as “an individual whose payment for lodging in a room includes heat and may include a private bathroom or one of the following: (i) Board. (ii) Kitchen or bathroom privileges on a shared basis. (iii) Light housekeeping facilities.” 2012 Final State Plan at § 601.3.

²² Id. at § 601.31(2)(i)(C).

²³ Id. at § 601.31(2).

²⁴ Id.

²⁵ Id. at § 601.31(2)(i)(B).

- A roomer is ineligible if the charge for room/room & board includes an undesignated amount for the main fuel AND is based on a fixed percentage of their income or on their source of income.²⁶
- A household is ineligible if some other person or agency is always responsible for the heating bill (for example, people in subsidized housing who have the bill paid by the housing agency; students).²⁷ However, in 2011-12 DPW has clarified that if the bill is paid by someone outside the household because the household has zero/minimal income, the household is still considered to have a heating responsibility and therefore eligible to receive LIHEAP.²⁸

Residency

Household members must permanently reside in Pennsylvania.²⁹

Temporary Living Arrangements

Individuals in a temporary living arrangement generally do not qualify for eligibility. However, individuals who have temporarily left their permanent residence as a result of a home heating crisis *are* eligible for a grant for their permanent residence.³⁰ People living in institutions, dormitories, fraternity or sorority houses, or boarding homes are ineligible.³¹

Recreational Vehicles

Persons living in recreational vehicles (Campers and RVs) are ineligible for LIHEAP unless they provide verification that they reside in a campground or other licensed facility year-round and are responsible for heating costs.³² However, in specific situations, DPW has found individuals who are living in Campers and RVs that are permanently affixed to the property to be eligible.

Operators of a Licensed Business

Persons operating a licensed business out of the LIHEAP household's residence are ineligible for LIHEAP if they use the home's utilities as a deduction on their business' tax return.³³ However, although not in the State Plan, DPW has issued a policy clarification that it will apply this exclusion only if more than 50% of the home is attributed to the business use. DPW will use line 30 of Schedule C of IRS Form 1040 (Profit or Loss From Business) and block 7 of IRS Form 8829 (Expenses for Business Use of Your Home) to determine LIHEAP eligibility for household business owners.

See Policy Clarification PLA15989605 dated 11/7/11 online at:

<http://services.dpw.state.pa.us/oimpolicymanuals/manuals/bop/le/index.htm>.

²⁶2012 Final State Plan at § 601.31(2)(i)(C).

²⁷ Id. at § 601.31(2)(i)(A).

²⁸ Id. at § 601.31(2)(i)(A).

²⁹ Id. at § 601.31(3).

³⁰ Id. at § 601.105.

³¹ Id. at § 601.31(2)(ii).

³² Id. at §601.31(2) (iii).

³³ Id. at §601.31(2)(iv).

Fleeing Felon

Persons who are currently incarcerated or fleeing to avoid prosecution, custody or confinement after a felony conviction (or high misdemeanor in New Jersey) are ineligible for LIHEAP.³⁴ There is an open question as to whether it is DPW's burden to demonstrate that the person is actually "fleeing." Advocates should carefully scrutinize the facts and, if the situation merits it, file an appeal if the individual in question, while having an outstanding warrant, was not fleeing to avoid prosecution.

Operation of Heating Appliance

A household is ineligible for LIHEAP if the heating appliance isn't installed and operating based on the manufacturer's specifications or current code requirements, whichever³⁵ is more stringent, and isn't following all applicable building and fire codes.

Non-Citizen Status

Lawfully admitted non-citizens are eligible to receive LIHEAP no matter when they arrived in the United States so long as they meet LIHEAP eligibility requirements.³⁶ The Plan lists eight categories of non-citizens "qualified" for LIHEAP.³⁷

Social Security Numbers

One does not need a Social Security number to be eligible for LIHEAP. However, if a Social Security number is not provided, an individual must fill out an energy assistance affidavit, printed on the LIHEAP application in the Certification section. An energy assistance affidavit is not required for children under the age of one.

Applications

In order to qualify for receipt of LIHEAP, an individual must first complete and submit an application. All households that received a LIHEAP grant in 2010-2011 should have had an application mailed to their home in October. As of November 1, 2011 applications are available upon request from different sources in the community, such as CAOs, a LIHEAP administering agency, utility companies, or online at DPW's website.³⁸ An individual also may apply online at DPW's COMPASS website.³⁹

The same form may be used to apply for each of the LIHEAP components.

³⁴ 2012 Final State Plan at §601.31(2)(v).

³⁵ Id. at §601.31(2)(vi).

³⁶ Id. at § 601.31(4).

³⁷ Id. at § 601.31(4)(i-viii).

³⁸ See http://www.dpw.state.pa.us/ucmprd/groups/webcontent/documents/form/p_011811.pdf.

³⁹ See <https://www.humanservices.state.pa.us/compass/CMHOM.aspx> .

An individual may need assistance to complete the application. Homebound individuals have the right to request that LIHEAP staff mail an application to them at their home and may also receive help in filling out the form.⁴⁰

LIHEAP regulations require that a household that received a grant last year be mailed an application for this year. However, because the income eligibility requirements for LIHEAP may differ from year to year and because a household may have experienced changes (such as in income level or size), receipt of an application does not imply current eligibility.

Timing of Application and DPW Response

The date of application is the date the administering agency receives the application.⁴¹ Where an individual is assisted by a utility, community group, or another party in filling out and forwarding an application, the formal date of application is only when the local CAO (the administering agency) receives the application.

DPW has indicated that all households submitting a LIHEAP Cash application in 2011-2012 will receive a system generated notice informing them that their application has been received. This notice will be triggered once the application has been data entered.

The CAO must provide the applicant with a written determination within 30 days of receiving a complete application for a Cash grant.⁴² If the Cash grant application is deemed to be incomplete, the administering agency must send the applicant a notice indicating what information is missing within 10 *working days* of receipt.⁴³ The applicant then will have 15 *days* from the date of that notice to return the missing information to avoid rejection of the application.⁴⁴

It is important to stress that this obligation to provide a determination of eligibility within 30 days of receiving a completed application continues to exist. If county offices are routinely ignoring this deadline, please alert PULP so that we can bring it to the attention of DPW.

Documentation vs. Verification

DPW uses two different classifications for information submitted in association with LIHEAP: “verification” and “documentation.” “Verification” is defined to include “any form of convincing information, including oral statements or documentation.”⁴⁵ “Documentation” is defined to include “written or printed evidence, such as fuel bills, rent receipts, or pay stubs, which is needed to determine LIHEAP eligibility and the type and amount of the LIHEAP benefit.”⁴⁶

⁴⁰ 2012 Final State Plan at § 601.24.

⁴¹ Id. at § 601.21(3).

⁴² Id. at § 601.22.

⁴³ Id. at § 601.23.

⁴⁴ Id.

⁴⁵ Id. at § 601.101(1).

⁴⁶ Id. at § 601.101(2).

Documenting Income

Applicants are required to **document** the amount and source of the income for household members and for anyone in the household who received LIHEAP benefits during the program year as a member of another household.⁴⁷

If an applicant claims little or no income for the household, the applicant will be required to provide **evidence** explaining how the household is meeting its financial obligations.⁴⁸ While the Plan does not specify the form of this evidence, the 2011-2012 Application for LIHEAP does require applicants who have had no income for the past three months or have income that is less than the cost of monthly basic living needs (food, shelter, personal items, etc.) to tell DPW in writing how they are paying for such needs; DPW generally employs a high level of scrutiny to applications of individuals who assert that they have no income at all.

Documenting Heating Responsibility

Cash grant applicants must **document** their responsibility for the main type of fuel for the household.⁴⁹ If the household pays a vendor directly, then home heating responsibility may be documented with a fuel bill or receipt that was issued within two months of the date of the LIHEAP application.⁵⁰ However, receipts from vendors for fuel purchased since January of the previous LIHEAP season may be acceptable to document heating responsibility. If a household chooses to have a benefit paid to the vendor of a secondary fuel type, then the household must document its responsibility for both the primary and secondary fuel types.⁵¹

An applicant for a Crisis grant must prove payment responsibility for either the primary or secondary source of heat.⁵² If, as a result of a prior service termination, the individual does not have a recent bill or receipt, then documentation that service will be activated upon determination of LIHEAP eligibility is required from the vendor.⁵³

For households that pay for heat indirectly as an undesignated part of their rent, verification or documentation from the landlord or rental agent will establish home heating responsibility.⁵⁴ Oral verification by the landlord is sufficient to meet this burden.

In certain situations, proof of home heating responsibility by an applicant for either a Cash or Crisis benefit may be demonstrated, even though the billing payment responsibility is in a name other than the applicant's.⁵⁵ When situations arise, such as those involving the death of the person who has been billed or domestic violence safety concerns, the applicant then must provide written or printed information that he/she lives at the residence address. For example, if the LIHEAP applicant continues to have the utility bill in the name of her deceased spouse, she may then provide a driver's license documenting that she resides at the residence.⁵⁶

⁴⁷ 2012 Final State Plan at § 601.102(a).

⁴⁸ Id. at § 601.103.

⁴⁹ Id. at § 601.104(a).

⁵⁰ Id.

⁵¹ Id.

⁵² Id at § 601.104(b).

⁵³ Id.

⁵⁴ Id at § 601.104(c).

⁵⁵ Id. at § 601.104(d).

⁵⁶ Id.

Documenting Proof of Residence

An applicant temporarily living away from his or her actual residence can still apply for LIHEAP by providing some documentation of the emergency or extenuating circumstances that gave rise to the need to live elsewhere.⁵⁷ The CAO is required, upon request, to assist applicants in these situations in providing appropriate documentation.⁵⁸

Documenting a Crisis

It is the applicant's responsibility to prove that there is a home heating crisis.⁵⁹ Acceptable forms of proof include:

- A utility termination notice or verification of a scheduled termination,
- Verification that utility service has already been terminated, or
- A statement from the applicant that the household's deliverable fuel supply is depleted or will last less than 15 days.

The determination of whether or not a crisis exists is specific to the particular fact situation. For example:

- A termination notice is generally sufficient proof to document a crisis for receipt of a Crisis grant.⁶⁰ *However*, because regulated utility companies cannot terminate service to LIHEAP income-eligible households during the Winter Moratorium (December 1 through March 31), a termination notice issued by a regulated utility company intended to be effective during the Winter Moratorium is not, by itself, accepted by DPW as proof of a home heating emergency.⁶¹ *However*, if funding is available, DPW has made the determination that shut-off notices dated February 1 or later that are issued by regulated utilities will be honored as proof of a crisis.
- Subsidized housing tenants are ineligible for a Crisis grant if their rental charge includes an undesignated amount for heat AND is based on a fixed percentage of their income. *However*, should the household become responsible for any payments directly to a vendor, the household is then potentially eligible once they document their heating responsibility.⁶²

Miscellaneous Documentation

There are a number of miscellaneous situations an advocate may be required to address:

- Although a Social Security number is not required for eligibility, it is often requested by regulated vendors in order to match the grant to the appropriate account. An applicant who does not have a Social Security number or refuses to disclose it may complete an energy assistance affidavit.⁶³ The energy assistance affidavit is printed on the application.

⁵⁷ 2012 Final State Plan at § 601.105.

⁵⁸ *Id.*

⁵⁹ *Id.* at § 601.108.

⁶⁰ *Id.* at § 601.62(2)(ii); 66 Pa.C.S. § 1406(g).

⁶¹ *Id.* at § 601.108.

⁶² *Id.* at § 601.31(2)(i)(B).

⁶³ *Id.* at § 601.106.

- Official documentation from the U.S. Citizenship and Immigration Services is generally sufficient to establish lawfully admitted non-citizen status.⁶⁴ A chart of acceptable documents for proving eligible non-citizen status is provided in the Plan.⁶⁵

Cash Component

The Cash grant component is available to all eligible individuals with a home heating responsibility. An individual may be a renter or an owner and may use *any* type of fuel to provide heat to the residence: gas, oil, electric, wood, propane, etc. The purpose of the Cash grant is to assist low-income households with their financial home heating burden. Therefore, to receive a Cash grant an individual:

- Need **not** be threatened with termination of service;
- Need **not** have an outstanding bill or be in debt to a utility or energy vendor; and
- Need **not** have a direct relationship with a utility or energy vendor.

Grants are calculated based upon a number of household characteristics that impact affordability⁶⁶:

- Household size,
- Household income,
- Heating Region, and
- Primary (or main) Fuel Type.

Based upon these household characteristics, Cash grants for 2011-2012 will be issued in amounts ranging from \$100 to \$1,000 per household. To consult the Benefit Amount Table and determine the size of the Cash grant a household may be awarded, advocates can refer to DPW's website at: <http://www.dpw.state.pa.us/foradults/heatingassistanceliheap/liheapbenefitamounttable/index.htm>. Please note: The Benefit Amount Table only includes income levels up through \$22,999. However, households with incomes above \$22,999 may still be eligible, depending on household size. See Appendix A of this Manual for 2011-2012 PA LIHEAP Income Guidelines.

Although each household is eligible for only one Cash grant per program year,⁶⁷ it is possible that, if additional funding becomes available, DPW will issue one or more supplemental Cash payments to households without the need for those households to file another application. Therefore, even households initially eligible for the minimum Cash grant of \$100 may receive benefits in far greater amounts as a result of these supplemental payments.

If the household pays for fuel directly, then DPW will pay grants to the fuel vendor/utility on behalf of the household.⁶⁸ If the household pays for heat as an undesignated part of the rent, or if

⁶⁴ 2012 Final State Plan at § 601.109.

⁶⁵ Id. at pg. B-24.

⁶⁶ Id. at § 601.41(a)(1-4).

⁶⁷ Id. at § 601.43.

⁶⁸ Id. at § 601.44(a).

the fuel vendor/utility does not participate as a LIHEAP vendor, then DPW pays the grant directly to the applicant.⁶⁹

Entities such as landlords, rental agents, housing authorities, or hotel or rooming house managers are not eligible to receive a direct vendor payment.⁷⁰ Thus, an unscrupulous landlord is not able to intercept or extort a LIHEAP grant from a tenant.

With the advent of competition in electric and natural gas utility service, some households may be purchasing their energy generation from an entity other than their local regulated distribution company. Since these competitive gas or electric suppliers or marketers are currently unable to terminate service to a household, they are not eligible to be registered LIHEAP vendors and are therefore ineligible to receive a direct vendor payment.

The Crediting Of A Cash Grant To A CAP Customer's Account

The “Asked to Pay” amount

The purpose of LIHEAP is to help low-income households meet their home heating needs. The LIHEAP Federal statute, regulations and Pennsylvania's approved state Plan require that LIHEAP funds be applied in full to the account of those households determined LIHEAP eligible. Therefore, in order to assure compliance with federal regulations, utility companies must apply LIHEAP Cash grants only to the “Asked to Pay” amount the CAP customer is required to pay.⁷¹ This policy is specifically incorporated into the Final State Plan at Appendix B §601.45. Application of Benefits. The vendor copy of the Vendor Agreement for the 2011-2012 program year also states that utility companies that operate a CAP will apply the LIHEAP cash component benefit to the customer's account in full to resolve any past due CAP payments and to the current CAP payment. Any remaining funds will be credited to future CAP payments.

Background

Each regulated electric and natural gas distribution company in Pennsylvania is required to provide a Customer Assistance Program (CAP) for the low-income population within its service territory.⁷² These programs are administered by individual companies under the oversight of the Pennsylvania Public Utility Commission. One purpose of these programs is to protect consumers' health and safety by helping low-income customers maintain affordable utility service.⁷³ In CAP, monthly utility bills are generally significantly lower. This is accomplished by providing a reduced rate structure to individuals with household incomes of 150% of the poverty level and below. CAPs also provide for potential forgiveness of pre-program arrears.

Generally, companies provide unique names for their CAP program, and each is administered somewhat differently. Some examples of this diversity may be found in comparing PPL's OnTrack, PGW's Customer Responsibility Program (CRP), NFG's Low-Income Rate Assistance (LIRA), and PECO's CAP Rate programs.

The requirements of LIHEAP and CAP programs often intersect. For example, CAP participants must apply for and designate one LIHEAP grant to the utility administering the CAP; LIHEAP

⁶⁹ 2012 Final State Plan at § 601.44(a) and (b).

⁷⁰ Id. at § 601.44(c).

⁷¹ Id. at viii.

⁷² 66 Pa.C.S.A. § 2803 (electric) and § 2203 (gas).

⁷³ 52 Pa Code § 54.73 (electric) and § 62.3 (natural gas).

Crisis recipients must be offered entrance into the CAP of the utility company designated to receive that Crisis grant; and utility companies accepting Crisis grants are required to enter into payment arrangements for any remaining outstanding balance due.

There are also points of intersection between the two programs which have created complications and led to confusion. Until last year, Public Utility Commission Guidelines and individual utility company Customer Assistance Program plans were in conflict with LIHEAP policy and statute regarding the required and appropriate method of crediting a LIHEAP Cash grant to a CAP customer's account. In many CAP programs, a CAP participant's LIHEAP Cash grant was not credited specifically to the benefit of that individual customer's current bill. Instead, the grant was applied to cover the general costs of the Customer Assistance Program or to frozen pre-program arrears or to the difference between the CAP "Asked to Pay" amount and the amount that the customer actually consumed. To rectify the incorrect application by utilities of the CAP payment, DPW now requires public utilities that operate customer assistance programs to apply the LIHEAP Cash component benefits only to the customer's monthly "Asked to Pay" amount.

Because this represents a change of policy for many utilities, and because their individual Universal Service Plans and accounting systems may not reflect this policy change, advocates will need to carefully review each customer's account to be certain that the LIHEAP Cash grant has, in fact, been credited properly. The review process may be daunting since it is often difficult to trace how utilities are applying the LIHEAP payments. The Commission has recently directed a number of distribution companies to work with Commission staff to make their billing and crediting processes more understandable.⁷⁴ Advocates may need to request that the billing and crediting processes employed by other utilities also be made clearer.

Also because of this change in policy, a number of utilities have sought to recover the value of the LIHEAP grants that were formerly applied to cover the general costs of the Customer Assistance Program. One method that has been applied, called "CAP-Plus, adds a flat fee to each customer's account based on the total value of LIHEAP grants obtained the previous program year. The legality of this process has been challenged⁷⁵ and remains unsettled. Advocates should be aware that LIHEAP clients on CAP may be required to pay this additional charge pending resolution of this issue by the PUC and DPW.

Crisis Exception Payments

The Crisis Exception payment is a recent addition to Pennsylvania's LIHEAP. It is extremely valuable in that **it is intended to expeditiously assist households without heat prior to the opening of the Crisis component.** To be considered for a Crisis Exception, the household's main heating source or its secondary heating source must be completely shut off or depleted. However, DPW has clarified that it will accept applications for a Crisis Exception payment when a household is within fifteen days of having its deliverable fuel fully depleted. To receive a Crisis Exception payment, a household must specifically indicate that it is without heat and that a Crisis Exception Payment is needed. The Department will determine if the Cash grant amount will alleviate the crisis. If the Cash grant is sufficient, the Department will provide that grant on

⁷⁴Herbert Dickson v. National Fuel Gas Distribution, C-2009-2132947, Public Meeting, November 4, 2010.

⁷⁵ Pennsylvania Public Utility Commission v. Columbia Gas of Pennsylvania, Inc., Docket No.: R-2010-2215623.

an expedited schedule. If the Cash grant amount is insufficient, DPW will provide additional funds from the Crisis grant. The Cash and Crisis Exception grants must be sufficient to result in reconnection or both will be denied at that time. A household that does not receive a Cash grant through the Crisis Exception process will still be eligible to receive a Cash grant through the normal Cash grant application process; and will be eligible to apply for a Crisis grant when the Crisis program opens on January 3, 2012. A household receiving a Crisis Exception payment may be entitled to receive more than one Crisis benefit during the 2011-2012 program year, subject to the minimum and maximum amounts allowed and the amount of available federal funding.

Crisis Component

The Crisis component exists to aid households in a home heating related emergency, such as loss of heat due to a heating system failure, actual or scheduled service shut-off, or lack of or imminent depletion of fuel. Crisis grants may be applied to either the main or secondary heat source.⁷⁶

If a crisis arises, then an individual may apply for a Crisis grant as well as for a Cash grant. In recent years, DPW has first looked to the Cash grant amount to resolve the crisis; if that amount is not enough, DPW has then approved the Crisis grant only to the extent necessary to resolve the crisis.

Cash grants, Crisis grants and the Crisis Interface program may be used individually or jointly to resolve the crisis. Types of assistance can include:

- Pipe thawing,
- Gas/fuel lines repair,
- Purchase of a new furnace/heating system,
- Furnace repair,
- Water-heating system repair,
- Broken window repair, or
- Payment of utility bills or for fuel delivery.⁷⁷

Although the Plan notes these particular examples, other heat related emergencies may be addressed. The advocate is encouraged to be creative in combining and leveraging these grants for the purpose of resolving the crisis.

Expedited Processing

Crisis grants must receive expedited processing. An individual who qualifies for a Crisis grant must receive assistance within 48 hours of the application.⁷⁸ In life-threatening situations, assistance must be provided within 18 hours of the application.⁷⁹

⁷⁶ 2012 Final State Plan at § 601.61.

⁷⁷ Id. at § 601.62.

⁷⁸ Id. at § 601.4(2).

⁷⁹ Id. at § 601.4(2).

CAOs and administering agencies often fall behind on the processing of applications because of the number submitted within a limited time period. If the 48 hour/18 hour Crisis deadlines (as well as the 30 day Cash deadline) are not respected, the CAO may be contacted. Each CAO has a LIHEAP administrator who can troubleshoot missed Crisis deadlines. Have your CAO identify that individual, and contact them immediately if a 48 hour/18 hour deadline is missed.

Crisis Eligibility

Crisis applicants must meet distinct eligibility criteria to receive a grant:

- The household must meet all of the general eligibility requirements regarding income, home heating responsibility, residency, and non-citizen status.⁸⁰
- The household must be without heat or in imminent danger of being without heat due to a weather-related event, a home heating system breakdown, a utility shut-off or an energy supply shortage.⁸¹ **DPW has clarified that a household that heats with a deliverable fuel will be considered to be in a home heating emergency if their heating fuel supply will last less than 15 calendar days.**
- The Crisis benefit must alone, or in conjunction with other resources, resolve the home heating emergency.⁸²
- The household must provide proof of the home heating emergency.⁸³

Grant Features

The amount of a Crisis grant is equivalent to the amount needed to resolve the crisis subject to the minimum allowable Crisis grant of \$25 and the maximum allowable Crisis grant of \$300.⁸⁴ The amount of the Crisis grant cannot exceed whatever amount is needed to resolve the crisis.

Crisis grants are paid directly to the approved LIHEAP vendor or utility.⁸⁵ Exceptions, in which Crisis grants are paid directly to the applicant, are rare but may arise in master meter situations or when the vendor is not on the DPW approved vendor list.

Crisis funds can pay reconnection fees, re-start fees, and reasonable delivery charges.⁸⁶ **They may not be used to pay security deposits or late fees.**⁸⁷

⁸⁰ 2012 Final State Plan at § 601.32(1).

⁸¹ Id. at § 601.32(2).

⁸² Id. at § 601.32(3).

⁸³ Id. at § 601.32(4).

⁸⁴ Id. at § 601.61.

⁸⁵ Id. at § 601.64.

⁸⁶ Id. at § 601.62(2)(i) and (ii).

⁸⁷ Id. at § 601.45; 2011 Final State Plan Assurances at pg. 12.

Heating System Repairs

Weather-related heating emergencies may require a range of actions including heating system repairs or heating system replacements. A Crisis grant may be used to pay for the repairs; or a household may be deemed eligible for the Crisis Interface/Weatherization Assistance Program, which will make the necessary repairs or system replacements free of charge to the low-income applicant.

Deliverable Fuels

Special rules apply when the payment of a Crisis grant comes as the result of a shortage of deliverable fuels (e.g., oil, propane, kerosene, wood). A household that heats with a deliverable fuel will be considered to be in a home heating emergency if its heating fuel supply will last less than 15 calendar days. An applicant's statement that their fuel supply will last less than 15 days is acceptable proof of an energy crisis.⁸⁸

Also, in cases where the vendor delivers the fuel, a delivery, up to the \$300 maximum payment, is provided. However, if the vendor does not conduct the delivery and the customer must pick up the fuel, Crisis will pay for the greater of \$75 or the maximum amount of fuel that can be transported by the household in one trip.⁸⁹ A prior statement from the vendor is required to verify the cost of the non-vendor pick-up.⁹⁰

Crisis Resolution

Households are **ineligible** for a Crisis grant if the grant, alone or combined with other resources available to the household, will not resolve the crisis.⁹¹ Given the fragile economic condition of LIHEAP Crisis applicants and the rising cost of energy, it is possible that a \$300 Crisis grant alone will be insufficient to resolve the crisis. Advocates may need to work with applicants, reach out to community organizations, and negotiate with utilities in order to generate the additional resources that will complement the Crisis grant in resolving the home heating crisis.

If a household requires less than \$25 to resolve a home heating emergency, then it will not be eligible to receive a Crisis grant.

If a regulated electric or natural gas vendor accepts a Crisis payment based on a termination notice or based on the reconnection of service to the household, then that vendor must maintain ongoing service to that household for at least 30 calendar days following the resolution of the crisis.⁹²

If a Crisis payment is made pursuant to a grant which is approved within 30 days of or during the Winter Moratorium period, then the earliest allowed termination date is 30 days following the resolution of the crisis or May 1, whichever is later.⁹³ Furthermore, if a utility

⁸⁸ 2012 Final State Plan at §601.108.

⁸⁹ Id. at § 601.61.

⁹⁰ Id.

⁹¹ Id.

⁹² Id.

⁹³ Id.

accepts a Crisis grant, then that utility *must offer* that individual the opportunity to enroll in that utility's Customer Assistance Program (CAP) or into a budget billing plan.⁹⁴

LIHEAP Crisis Grants and the Winter Moratorium

There are conflicting legal principles at work during the Winter Moratorium. In general, customers of regulated electric and natural gas utilities with a household income at or below 250% of the Federal poverty level are protected from service termination from December 1 through March 31 of each year, unless the utility is specifically given permission to terminate by the PUC.⁹⁵ Customers of PGW have separate guidelines.⁹⁶

On one hand, Chapter 14 specifically states that a notice of termination is sufficient proof of a crisis to enable a low-income household to qualify for a Crisis grant.⁹⁷ This would seem to imply that an individual with a termination notice will receive a Crisis grant. However, since the basis for receipt of a Crisis grant is that the household must demonstrate the existence of an imminent or actual crisis, DPW does not generally consider a Moratorium protected low-income household to be in an imminent crisis and will not authorize a Crisis grant to such a household.

As a result, some confusing scenarios arise for advocates and applicants:

- **Scenario #1:** A regulated utility issues a termination notice to someone scheduled to take effect during the Winter Moratorium period. Before the utility may act on that termination notice, it must petition the PUC for permission to do so.⁹⁸ In the extraordinarily rare case that the PUC grants permission to act on the notice and terminate the household, then a crisis exists and a Crisis grant may be issued. DPW does not consider the household to be in crisis until the PUC has given permission for the utility to act.⁹⁹
- **Scenario #2:** A utility issues a termination notice to a household with income at or below 250% of the Federal poverty level that is scheduled to take effect during the Moratorium period. The utility either does not seek PUC permission to act on the notice or seeks PUC permission and is denied. In either case, the applicant is not in an actual crisis, but Chapter 14 would appear to authorize the grant anyway.

DPW treats this situation as a quasi-crisis. In past years, applicants in this situation did not receive an absolute denial, but the processing of the grant was delayed until a later date, pending DPW's determination that there was sufficient funding.

Advocates should be aware of the confusion this will cause for LIHEAP Crisis applicants. The applicant may receive a notice from DPW informing her that she is not presently eligible for a Crisis grant because there is no imminent or immediate crisis, but that she may receive a grant if, towards the end of the program year, she remains in a crisis situation and there is sufficient funding available.

⁹⁴ 2012 Final State Plan at § 601.61.

⁹⁵ 66 Pa. C.S. § 1406(e)(1).

⁹⁶ Id. at § 1406(e)(2).

⁹⁷ 66 Pa. C.S. at § 1406(g).

⁹⁸ Id. at § 1406(e)(1).

⁹⁹ 2012 Final State Plan at § 601.62(2)(ii)(A).

Scenario #3: A utility issues a termination notice in February to a household with income at or below 250% of the Federal poverty level. Because the notice has a sixty day lifespan, it still will be in effect on April 1, after the close of the Winter Moratorium.

A notice issued on or after January 31 may be acted upon because it still will be effective as a termination notice on April 1, the first day after the end of the Moratorium on which the utility can terminate service without PUC permission. Whether DPW will provide a Crisis grant may depend on a number of factors, such as the availability of funds, the actual closing date of the Crisis component, or other policy determinations.

A notice sent prior to January 31 will expire before the end of the Moratorium. It is ineffective, absent permission from the PUC, for the utility to commence the termination. DPW will treat this situation as a non-imminent crisis as in Scenario #2.

Vendors not regulated by the PUC are neither subject to Chapter 14 nor to the Winter Moratorium. Therefore, DPW will treat the customers of those vendors on a case by case basis. For example, some Rural Electric Cooperatives or municipal utilities preclude termination during certain winter months while some others do not.

Crisis Interface/Weatherization Assistance Program Component

The Crisis Interface/Weatherization Assistance Program component is designed to help low-income households who are in a crisis situation due to a heating system or furnace breakdown. The program enables a household to receive necessary repairs to a furnace or to replace the furnace outright. The program is open from November 1, 2011 until March 30, 2012.

Because the situation is designated as a Crisis, action is required to occur within the appropriate time frame of 48 or 18 hours. This initial action, such as the provision of space heaters, may sometimes be a temporary measure taken to ameliorate the crisis. A more permanent solution is intended to occur subsequently within a reasonable amount of time. Unlike the Cash and Crisis components, the Crisis Interface program component provides services rather than grants. It is administered jointly by DPW and DCED in the following manner:

- The applicant must be determined by the DPW administrative agency to be eligible for a Crisis Interface referral;
- The DPW administrative agency refers the applicant to the appropriate local weatherization agency;
- The weatherization agency conducts a home visit to assess the heating system situation and proceeds to take appropriate action to resolve the crisis and, if appropriate, initiate additional weatherization measures.

Special rules apply to eligibility for renters:

- In all cases, prior written permission must be granted by the landlord to enter the premises to provide Crisis or Weatherization Services; and
- In these situations, an agreement is signed between the landlord and the tenant and witnessed by the agency whereby the tenant will not be evicted or suffer a rent increase

for a reasonable time (not less than 18 months), unless the eviction or increase is shown to be related to matters other than the weatherization work performed.¹⁰⁰

Appeals

An individual who has been aggrieved -- such as by being improperly denied LIHEAP benefits; by having benefits unjustly delayed; by being approved for less than the correct amount; or by being assessed for an overpayment -- may appeal the decision in question and request a fair hearing.¹⁰¹ This may be accomplished by completing and signing the appeal section of any notice, sending a written or faxed request to the CAO or telling the CAO. In the latter situation there must be a written follow-up within 3 days. Note however, because LIHEAP is not considered an entitlement, no appeal will lie if the individual applied for LIHEAP after the program closed or where there is a lack of funds.¹⁰²

Detailed procedures for the appeal process are found in Chapter 870 of DPW's Supplemental Handbook, posted online at DPW's website.¹⁰³

Key time frames for the advocate to keep in mind include:

- An appeal must be taken within 30 days of the date of the written notice from the CAO.¹⁰⁴
- An appeal must be taken within 60 days of the CAO's failure to act on a request or an application.¹⁰⁵
- An appeal must be taken within 6 months of the date of the CAO's failure to send a required written notice or where there is administrative error.¹⁰⁶

Note: As long as the program is open, failure to adhere to these time frames as well as other appealable issues often may be resolved by an individual simply filing a new application.

Special Issues

Familiarity with the following issues will enable the advocate to be more effective.

Primary vs. Secondary Heating Fuel Types

LIHEAP designates two fuel types: main and secondary. Main Fuel Type is defined as "the source of energy for the central heating system of the residence used by the household or, if

¹⁰⁰ 2012 Final State Plan at pg. C-7.

¹⁰¹ 2012 Final State Plan at § 601.123(a).

¹⁰² Id.

¹⁰³ See

<http://services.dpw.state.pa.us/oimpolicymanuals/manuals/bop/Su/Table%20of%20Contents.htm>.

¹⁰⁴ 55 Pa Code § 275.3(b)(1); [DPW Supplemental Handbook § 870.12](#).

¹⁰⁵ 55 Pa Code § 275.3(b)(2); [DPW Supplemental Handbook § 870.12](#).

¹⁰⁶ 55 Pa Code § 275.3(b)(3); [DPW Supplemental Handbook § 870.12](#).

the residence is not centrally heated or the central heating system is inoperable, the source of energy used most by the household.”¹⁰⁷

“Secondary Fuel Type” is defined as “the source of energy that is necessary to operate the main heating source.”¹⁰⁸

The definition of secondary fuel type can be used to a household’s advantage. For example, if a household’s oil or gas furnace heating system needs electricity in order to operate, the loss of electric service to the residence may result in the shut-down of the furnace. In this instance, advocates may want to apply for a LIHEAP grant citing electric as a “secondary fuel type” under Section 601.3. Note: according to its Operations Memorandum 09-10-01, October 7, 2009, DPW is no longer considering water as a secondary heating source.

Restrictions

LIHEAP benefits may be used to pay reconnection fees, but may **not** be used for security deposits or for late fees.¹⁰⁹ When attempting to reconnect a household’s utility service, advocates may need to look to other resources or to the utility itself to help generate funds for security deposits or late fees. In many cases, a utility will waive security deposits or late fees for CAP customers. In other situations, a request to a utility to waive security deposits or late fees, particularly when the utility stands to receive a Crisis or Cash grant in exchange for the waiver, may receive a positive response. Additionally, each regulated utility and some other energy vendors have Hardship Funds that will assist struggling utility customers with their bills. Contact the household’s local vendor to inquire about additional company-sponsored customer assistance mechanisms.

Transfer of Service

For customers whose service has been disconnected at their previous address and need services to be connected at their new address, a regulated utility may request 50% of the customer’s back balance from the previous address plus a reconnection fee in order to restore service. If a LIHEAP Cash grant is more than this amount, the regulated utility must apply the remainder of the Cash grant to the household’s future bills. Utilities must also agree to keep service on through the moratorium and enroll the client in a CAP or budget program if eligible.¹¹⁰

Earned Income Treatment

An individual with earned income is eligible to receive a larger Cash grant than an individual with unearned income. When determining a household’s total income for *eligibility* for a Cash grant, all income is included. However, once a household is deemed eligible to receive a Cash grant, the administering agency will reduce by 20% the amount of income earned from employment in order to determine the *grant amount*.¹¹¹ The effect is to increase the level of the grant and reward those households that have earned income from employment.

¹⁰⁷ 2012 Final State Plan at § 601.3.

¹⁰⁸ Id.

¹⁰⁹ 2012 Final State Plan at § 601.45; 2012 Final State Plan Assurances at pg. 12.

¹¹⁰ Id. at §601.31(2)(vii).

¹¹¹ Id. at § 601.41(a)(2).

The Effect of a Regularly Recurring Annual Receipt of Funds on LIHEAP Income

Occasionally a problem arises when a household receives its annual pension or annuity in one larger payment once per year, rather than through smaller payments recurring monthly. The LIHEAP State Plan clearly gives the applicant the option to choose the most favorable time period to use in determining the income to be calculated for LIHEAP eligibility – the past 90 days or 12 months.¹¹² However, DPW generally counts the annual payment as part of the household income, regardless of when that payment is received. This may result in either an eligible household inappropriately being deemed ineligible and denied a LIHEAP grant or, if found eligible, in that household receiving a lower Cash grant. Advocates should be aware of this practice and be prepared to challenge it.

Refunds and Second Payments

Vendors receiving a LIHEAP grant must apply that grant to a customer's account within two program years. The two-year period is limited to end no later than June 30 of the year *following* the year in which the grant was awarded.¹¹³ Any funds not used in that time period must be refunded to DPW.¹¹⁴ Also, if an applicant is awarded a grant and then subsequently dies, changes vendor, or moves from the vendor's service area, then the vendor must refund to DPW any unexpended grant amounts.¹¹⁵

A second payment of these refunded amounts may be issued to a grantee within the two-year period where the grantee's whereabouts are known, the grantee continues to reside in the Commonwealth, and where the grantee retains heating responsibility¹¹⁶ or where the crisis for which benefits were authorized continues to exist.¹¹⁷

In situations where a vendor receives an overpayment and the overpayment was not the result of fraud, error, or misrepresentation by the applicant, then the error is considered an administrative error for which the applicant is not held responsible.¹¹⁸

Master Metering Issues

Special challenges may arise for the advocate when confronted with a tenant who receives utility service via a master metering arrangement. Master metering occurs when a landlord or mobile home park owner receives utility service in his/her own name for a property in which multiple tenants live. When the premises are not submetered, the landlord may pass along the utility costs to the tenants through a formula or calculation that assesses an energy use or heating charge to each tenant.

There are two aspects of this situation that may make it appear that a tenant is ineligible for LIHEAP:

¹¹² 2012 Final State Plan at § 601.83.

¹¹³ Id. at § 601.46; § 601.65(1).

¹¹⁴ Id.

¹¹⁵ Id. at § 601.46(1); § 601.65(1).

¹¹⁶ Id. at 601.46(2).

¹¹⁷ Id. at § 601.65(2).

¹¹⁸ Id. at § 601.144(c).

- First, the utility charge is not an undesignated portion of the rent as it is generally understood for purposes of LIHEAP (i.e., where utilities are “included in the rent”). Thus, one may suppose that these tenants do not have a home heating responsibility pursuant to Section 601.31(2)(i)(B).
- Second, the utility payment by the tenant is not paid to an approved vendor, as defined by the Plan, but to the landlord, management agent, or subcontractor. The Plan specifically excludes landlords from the definition of vendors and precludes landlords from receiving a vendor payment at Section 601.44.

In these circumstances, advocates will need to present facts which demonstrate that the applicant does have a home heating responsibility and that failure to make the required payments will leave the tenant without heat. In these situations, DPW may then, based upon a case by case review, provide Crisis grants directly to the tenants or mobile home park residents. See Section 601.64.

APPENDICES

See these Appendices on pages which follow:

Appendix A: 2011-2012 Pennsylvania LIHEAP Income Guidelines

Appendix B: Online Resources and Forms

Appendix C: CAO LIHEAP Coordinator Telephone Numbers and E-mails

Appendix D: DPW Forms and Publications

Appendix A: 2011-2012 Pennsylvania LIHEAP Income Guidelines

Household Size	Household Income
1	\$16,335
2	\$22,065
3	\$27,795
4	\$33,525
5	\$39,255
6	\$44,985
7	\$50,715
8	\$56,445
9	\$62,175
10	\$67,905
Each additional person add	\$5,730

* Eligibility information from

<http://www.dpw.state.pa.us/foradults/heatingassistanceliheap/homeheatingassistanceliheapelibility/index.htm>

Appendix B: Online Resources and Forms

Online Resources:

DPW's Heating Assistance Page	PA Department of Public Welfare	http://www.dpw.state.pa.us/foradults/heatingassistanceliheap/index.htm
2012 Final State Plan for PA LIHEAP	PA Department of Public Welfare	http://www.dpw.state.pa.us/ucmprd/groups/webcontent/documents/communication/s_001816.pdf
COMPASS	PA Department of Public Welfare	https://www.humanservices.state.pa.us/compass/PGM/ASP/SC001.asp
LIHEAP Cash Benefit Table for PA	PA Department of Public Welfare	http://www.dpw.state.pa.us/foradults/heatingassistanceliheap/liheapbenefitamounttable/index.htm
LIHEAP Clearinghouse	U.S. Dept. of Health & Human Services Admin. For Children & Families	http://www.liheap.ncat.org/
LIHEAP Homepage	U.S. Dept. of Health & Human Services Admin. For Children & Families	http://www.acf.hhs.gov/programs/liheap/
NEADA	Nat. Energy Assistance Directors Association	http://neada.org/
PA PUC Homepage	Pa Public Utility Commission	http://www.puc.state.pa.us/
DPW LIHEAP Handbook	PA Department of Public Welfare	http://services.dpw.state.pa.us/oimpolicymanuals/manuals/bop/le/index.htm
PULP	Pennsylvania Utility Law Project	http://rhls.org/PULP.asp

DPW Online Forms:*

PWEA 1 - LIHEAP Application Form (English)	http://www.dpw.state.pa.us/ucmprd/groups/webcontent/documents/form/p_011811.pdf or http://services.dpw.state.pa.us/oimpolicymanuals/manuals/bop/le/pwea_1_final.pdf
PWEA 1-S - LIHEAP Application Form (Spanish)	http://www.dpw.state.pa.us/ucmprd/groups/webcontent/documents/form/p_011812.pdf or http://services.dpw.state.pa.us/oimpolicymanuals/manuals/bop/le/pwea_1-s.pdf
PWEA 18 – LIHEAP Brochure	http://services.dpw.state.pa.us/oimpolicymanuals/manuals/bop/le/PWEA_18.pdf
PWEA 32 – LIHEAP Request for Additional Information	http://services.dpw.state.pa.us/oimpolicymanuals/manuals/bop/le/PWEA32.pdf
PWEA 32-S –LIHEAP Request for Additional Information (Spanish)	http://services.dpw.state.pa.us/oimpolicymanuals/manuals/bop/le/PWEA32-S.pdf
PWEA 34 – LIHEAP Vendor Agreement	http://www.dpw.state.pa.us/ucmprd/groups/public/documents/form/s_001818.pdf
PWEA 36 – LIHEAP Landlord Statement	http://services.dpw.state.pa.us/oimpolicymanuals/manuals/bop/le/PWEA36.pdf

PWEA 36-S –LIHEAP Landlord Statement (Spanish)	http://services.dpw.state.pa.us/oimpolicymanuals/manuals/bop/le/PWEA36_S.pdf
PWEA 37 – LIHEAP Program Refund Form	http://www.dpw.state.pa.us/ucmprd/groups/public/documents/form/s_001821.pdf
PWEA 40 – LIHEAP DCED/DPW Crisis Interface Referral	http://services.dpw.state.pa.us/oimpolicymanuals/manuals/bop/le/PWEA40.pdf
PWEA 41 – LIHEAP Electronic Funds Transfer Application Form	http://www.dpw.state.pa.us/ucmprd/groups/webcontent/documents/form/s_001820.pdf

***These are the forms available and online as of November 15, 2011.**

Appendix C: CAO LIHEAP Coordinator Telephone Numbers and E-mails

(See following pages.)

PENNSYLVANIA DPW CAO LIHEAP COORDINATORS

11/03/2011

County	Cty	D	LIHEAP Coordinator	Telephone Number	Email Address pa.gov	Alternate Coordinator	Telephone Number	Email Address pa.gov
Adams	1		Wilhemina Heckman	717-338-2308	wheckman@	Ryan Minnich	717-338-2309	minnich@
Allegheny	2		Karen Randolph	412-565-2219	krandolph@	Richard Cunningham	412-565-7572	ricunnunh@
Armstrong	3		Douglas Fink	724-548-0221	dofink@	Kimbel Kovatch	724-548-0238	kkovatch@
Beaver	4		Noel Shadley	724-773-7410	nshadley@	Sherri Graeser	724-773-7581	sgraessera@
Bedford	5		Janice Leppert	814-624-4002	ileppert@	Linda Brouse	814-624-4008	lbrouse@
Berks	6		Virginia Vicente	610-736-4298	vvicente@	Marilyn Ramirez	610-736-4003	mramirez@
Blair	7		William Berryman	814-946-7154	wberryman@	Robert Smith	814-946-6985	robertsm@
Bradford	8		Patrick Gerrity	570-268-2613	pgerrity@	Frank Richart	570-946-1034	frichart@
Bucks	9		Doree Munetz	215-781-3385	dmunetz@	Cheryl Cole	215-787-3337	chcole@
Butler	10		Valerie Hopkins	724-284-8842	vhopkins@	Marcella Colosimo	724-284-8247	mcolosimo@
Cambria	11		Dianne Hoover	814-533-2328	dihover@	Tanya Shaffer	814-533-2281	tashaffer@
						Holly Burkhardt	814-533-2309	hburkhardt@
Cameron	12		Judy Armanini	814-486-3757	jarmanini@			
Carbon	13		Gail Solomon	610-577-9034	gsolomon@	Pat Sasserath	610-577-9026	psasserath@
Centre	14		Shelly Bowman	814-861-1949	sbowman@	Margo Watson	814-861-1952	mwatson@
Chester	15		Erica Dixon	610-466-1036	erdixon@	Eileen Haviland	610-466-1022	ehaviland@
Clarion	16		Judi Gardner	814-226-1793	jgardner@	Amy Ortz	814-226-1795	aortz@
Clearfield	17		Pamela Mohney	814-205-1101	pmohney@	Jennifer Holt	814-205-1086	jeholt@
Clinton	18		Tara Hough	570-893-4503 or 570-748-2971	tahough@	Suellen Hans	570-893-4506 or 570-748-2971	suhans@
Clinton	18					Jeanine Stevenson	570-893-4504 or 570-748-2971	jstevenson@
Columbia	19		Pamela D'Orazio	570-912-1130	pdorazio@	Diane Belusko	570-387-4222	dbelusko@
Crawford	20		Terri Baker	814-333-3442	tebaker@	Terry Schlosser	814-333-3435	tschlosser@
Cumberland	21		Sarah Bjorkman	717-240-2708	sbjorkman@	Sharon Smith	717-240-2727	sharonmit@
Dauphin	22		Kathy Schintz	717-771-1139	kschintz@	Processing completed by York Co.		
Delaware	23	1	Kevin Moran	610-447-3234	kmoran@	Patricia Weldon	610-447-5393	paweldon@
		1	Jane Richards	610-447-5500	jarichards@	Hao Dinh	610-461-3901	hdinh@
		2	Carolyn Hartey	610-461-3890	chartey@	Constance Ballard	610-461-3800	coballard@
Elk	24		Pamela Freeburg	814-776-0340	pfreeburg@	Janice Eberly	814-776-0303	jaeberly@
Erie	25		Aaron Jones	814-461-2339	ajones@	Laurie Kubaney	814-461-2114	lkubaney@
Fayette	26		Andrea Myers	724-439-7115	anmyers@	Monica Duda	724-439-7202	moduda@
Forest	27		Randolph Teska	814-755-2105	rteska@	Barb Benedict	814-755-2111	bbenedict@
Franklin	28		Tom Walsh	717-262-6570	thowalsh@	Lisa Hunt	717-262-6539	lhunt@
Fulton	29		Nina Souders	717-325-1212	nsouders@	Tom Walsh	717-262-6570	thowalsh@
Greene	30		Mary Yoders	724-627-2808	myoders@	Dave Johnson	724-627-2821	davijohnso@
Huntingdon	31		David Miller	814-641-6447	davidmille@	Sharon Mason	814-641-6424	smason@
Indiana	32		Christine Cresson	724-357-2908	ccresson@	Alfred Boden	724-357-2924	aboden@
Jefferson	33		Sandra Paulina	814-938-1339	spaulina@	Rebecca Mitchell	814-938-1302	remitchell@
Juniata	34		Lance Musser	717-320-1074	lmusser@			
Lackawanna	35		Karen Trently	570-963-3183	ktrently@	Frank Muraca	570-963-4454	fmuraca@

Lancaster	36	Yvette Diaz	717-299-7501	ydiaz@	Farah Hynes	717-606-0163	fhynes@
Lawrence	37	Diana Iervoline	724-656-3207	diervoline@	Tessa Begley	724-656-3011	tbegley@
Lebanon	38	Carol Maya	717-270-3672	cmaya@	Mario Lucioti	717-270-3677	mlucioti@
Lehigh	39	Peter Romanyshyn	610-821-6580	promanyshv@	Matt Brady	610-821-6732	mattbrady@
Luzerne	40	Ted Christian	570-826-2573	tchristian@	Stacey Boshier	570-826-2217	sboshier@
Lycoming	41	Patricia English	570-327-3305	penglish@	Patricia Lechniak	570-327-3312	plechniak@
Mckean	42	Susan Martin	814-362-5334	susmartin@	Kimberly Hahn	814-362-5340	kihahn@
Mercer	43	Amy Lytle	724-983-5023	alytle@			
Mifflin	44	Carole McCardle	717-242-6087	cmccardle@	Susan Klinger	717-242-6075	suklinger@
Monroe	45	Douglas Dunay	570-424-3966	ddunay@	Charles Deubler	570-424-3900	cdeubler@
Montgomery	46	Trina Holmes	610-270-3575	trholmes@	Angelina Castro	610-270-1396	acastro@
Montour	47	Kristi Bower (45 & 52)	570-271-3601	krbower@	Michael Bucher	570-271-3621	mibucher@
	47	Christina Bright (54)	570-271-3637	chbright@			
	47	Kenneth Chappell (39)	570-271-3636	kchappell@			
	47	Dyan Leslie (58, 66, 49)	570-271-3638	dleslie@			
	47	Roxanne Yurkiewicz (19, 47, 13)	570-271-3602	ryurkiewicz@			
Northampton	48	Angel Rivera	610-250-1886	anrivera@	Charles Dreisbach	610-250-1746	cdreisbach@
Northumberland	49	Debi Sandri	570-988-5960	dsandri@	Diane Lepley	570-988-5924	dlepley@
Perry	50	Antonio Andrade	717-582-5002	aandrade@	Joni Abeling	717-582-5008	jabeling@
Philadelphia	51	1 Sandra Byrd	215-560-4733	sabyrd@			
	51	2 Dennis Kessler	215-560-2603	dekessler@			
	51	3 Donald McCrae	215-560-2965	dmccrae@			
Pike	52	Bette Pike	570-296-3110	bpike@	James Pollard	570-296-3116	jpollard@
Potter	53	Michelle Valenti	814-274-4106	mvalenti@	Jim Keltz	814-274-4104	jkeltz@
Schuylkill	54	James Heckman	570-621-3025	jamheckman@	Joan Stoudt	570-621-3007	jstoudt@
Snyder	55	Julie Eister	570-372-7222	jerster@	James Wirth	570-372-7204	iwirth@
Somerset	56	Michele Peters	814-445-1114	mipeters@	James Thome	814-445-1137	ithome@
Sullivan	57	Frank Richart	570-946-1034	frichart@	Patrick Gerrity	570-268-2613	pgerrity@
Susquehanna	58	Yvonne Gatto	570-278-5145	ygatto@			
Tioga	59	Cathy L. Kreger	570-724-9684	ckreger@	Cheri Wheatley	570-724-9672	cwheatley@
Union	60	Bruce Wikkins	570-522-5260	bwikkins@	James Wirth	570-522-5278	iwirth@
Venango	61	Sandra Zacherl	814-437-4359	szacherl@	Kim Irwin	814-437-4360	kiirwin@
Warren	62	Lisa Eldridge	814-726-8821	leldridge@	David Dickerson	814-726-8802	ddickerson@
Washington	63	1 Debbie Young	724-223-4343	debyoung@	Bill Pelini	724-223-4511	wpelini@
	63	2 Sharon Bagnell	724-379-1512	sbagnell@	Kate Jewell	724-379-1511	kaiewell@
Wayne	64	Thomas O'Neill	570-251-7211	thoneill@	Therese Dux	570-253-7111	tdux@
Westmoreland	65	Gail Heskey	724-832-5206	gheskey@	Margaret Goldberg	724-858-1212	magoldberg@
	65	1 Gail Heskey	724-832-5206	gheskey@	Berni Strychalski	724-832-5238	bstrychals@
	65	2 Gail Heskey	724-832-5206	gheskey@	Robert Small	724-339-6835	rsmallin@
	65	4 Gail Heskey	724-832-5206	gheskey@	Diana Kerestes	724-379-1568	dkerestes@
	65				Robert Hixson	724-832-5209	rhixson@
Wyoming	66	Jeffery Zimmerman	570-996-4110	jezimmerma@	Yvonne Gatto	570-836-8523	ygatto@
York	67	Kathy Schintz (22)	717-771-1139	kschintz@	Jen Hardman (46)	717-771-1254	jhardman@
	67	Kara Ziegler (67)	717-771-1140	kziegler@			

Appendix D: DPW Forms and Publications

- PWEA 1 LIHEAP Application Form (English) – 8/11
- PWEA 1-S LIHEAP Application Form (Spanish) – 8/11
- PWEA 18 LIHEAP Brochure (English) – 8/11
- PWEA 18-S LIHEAP Brochure (Spanish) – 8/11
- PWEA 32 LIHEAP Request for Additional Information (English) – 7/10
- PWEA 32-S LIHEAP Request for Additional Information (Spanish) – 10/10
- PWEA 34 LIHEAP Vendor Agreement – 7/10
(DPW Copy and Vendor Copy)
- PWEA 36 LIHEAP Landlord Statement (English) – 7/10
- PWEA 36-S LIHEAP Landlord Statement (Spanish) – 8/10
- PWEA 37 LIHEAP Program Refund Form - 9/10
- PWEA 40 LIHEAP DCED/DPW Crisis Interface Referral Form – 10/07
- PWEA 41 LIHEAP Electronic Funds Transfer Application Form – 7/11

APPLICATION FOR THE LOW INCOME HOME ENERGY ASSISTANCE PROGRAM (LIEAP)

To apply for Energy Assistance, you must complete all questions front and back and sign at the red "X". Be sure your correct and complete name and address is entered below. If incorrect, cross out and PRINT correctly in space provided below. **YOU CAN ALSO APPLY ONLINE AT WWW.COMPASS.STATE.PA.US**

YOUR NAME AND ADDRESS

Your County Assistance Office Address

If you do not understand these instructions, contact your local county assistance office.

1 Please complete this section for the head of household.

Name (Include Last, First, Middle Initial)		Date of Birth	Sex <input type="checkbox"/> M <input type="checkbox"/> F	Social Security Number
Home Address (Include Street, Apt. Number, City, State & Zip Code+4)				
Mailing Address If different (Include Street, Apt. Number, City, State & Zip Code+4)				
County You Live In	Citizenship*	Race (Optional)*	Ethnicity (Optional)*	Are you currently receiving Cash, Medical Assistance or SNAP benefits? <input type="checkbox"/> Yes <input type="checkbox"/> No

*Use the codes from page 2 to help provide the details.

DPW USE ONLY	
<input type="checkbox"/> CRISIS	<input type="checkbox"/> CASH
Application Registration Number	
County	
District	
Record Number	
Worker I.D.	
<input type="checkbox"/> Rejected	<input type="checkbox"/> Approved
Date	

2 Do you read, write and understand English? Yes No If no, what language? _____
Phone number where you can be reached () _____ - _____

3 Does anyone in your household receive financial assistance for a disability? Yes No

4 Show the name and address of the utility company or fuel dealer to whom you want payment sent.

Name of Utility Company or Fuel Dealer	Account Number
Address (Include Street, City, State & Zip Code+4)	

5 Are You:

<input type="checkbox"/> Renting with heat included	<input type="checkbox"/> Renting subsidized housing/Section 8 housing with heat included
<input type="checkbox"/> Renting with heat not included	<input type="checkbox"/> Renting subsidized housing/Section 8 housing with heat not included
<input type="checkbox"/> An unrelated roomer	<input type="checkbox"/> An owner or are you buying your home <input type="checkbox"/> Other: _____

If you are in subsidized/public housing, do you receive a utility allowance check? Yes No
If yes, how much? \$ _____

(If heat is included in your rent, attach a note from your landlord stating that heat is included as well as what type of fuel is used.)



Apply online at www.compass.state.pa.us
Pennsylvania's Fast And Easy Way To Apply For Your LOW-INCOME HOME ENERGY ASSISTANCE PROGRAM

6 What is your main heating source? **This question is asking about your main heating source, the one that heats your home. Attach a copy of your last bill. See Instructions on last page. If you have no previous bills, but will be paying your own heat, attach a statement from a utility or fuel dealer stating the type of fuel and that you are accepted as a customer.**

Electric
 Fuel Oil
 Coal
 Natural Gas
 Kerosene
 Propane or Bottled Gas
 Wood/Other

Answer question 7 only if you want payment sent to the vendor of your second heating source. A second heating source is used to run your main heating source in addition to the main fuel (example: electricity to run a gas furnace), or used if the main heating source is not working.

7 What is your second heating source - if any?

Electric
 Fuel Oil
 Coal
 Natural Gas
 Kerosene
 Propane or Bottled Gas
 Wood/Other

(Attach a copy of your last bill for your main and second heating sources.)

8 List the people who live with you at this address. Include all children and adults. Include related roomers. Include all unrelated roomers who share household expenses. Do not include anyone in jail/prison. Do not include the household member listed in block 1. **See instructions on the last page.**

Use the codes below to help provide the details for all individuals in your household. Use additional sheets if needed.

CITIZENSHIP*: (1) U.S. Citizen, (2) Permanent Alien, (3) Temporary Alien, (4) Refugee, (5) Other-not eligible for benefits (All non-U.S. citizens must provide proof of citizenship status.)

RACE*: (1) Black or African American, (3) American Indian or Alaskan Native, (4) Asian, (5) White, (optional) (7) Native Hawaiian or other Pacific Islander. List all groups that apply.

ETHNICITY*: (1) Non-Hispanic, (2) Hispanic or Latino (optional)

NAME (Last, First, M.I.)	Date of Birth	Sex		Social Security Number	Citizenship	Race (Optional)	Ethnicity (Optional)	Relationship to You	Do you receive Cash, MA, or SNAP benefits? *Yes/No
		M	F						
Total persons in household		▶		*If yes, you must complete question 9.					

If you have additional people in your house, please provide their information on a separate piece of paper and send it along with this application.

9 Complete question 9 only if someone listed above is receiving Cash Assistance, Medical Assistance or Supplemental Nutrition Assistance Program, SNAP benefits.

Has your income stayed the same in the last 3 months? Yes No

May we use the information you gave us for your other benefits to determine your eligibility for LIHEAP? Yes No

If you answered **yes** to both questions and everyone in your house is receiving Cash, MA or SNAP benefits, you do not need to complete question 10. If you have answered **no** to either question, or if there are household members not receiving Cash Assistance, MA or SNAP benefits, complete block 10.

10 Tell us about income for the people in your household. Please tell us about all income, before taxes and deductions.

Name of person with income	Kind of income	Start Date	Date of First Paycheck	How much each month?
Name of person with income	Kind of income			How much each month?
Name of person with income	Kind of income			How much each month?
Name of person with income	Kind of income			How much each month?

Attach proof of income for all household members listed for the past 3 months or 12 months. If you provide 3 months of income, this amount will be converted to a yearly figure.

Income includes money from: Employment, Veteran's Benefits, Unemployment Compensation, Black Lung benefits, Social Security, Support, Workers Compensation, Interest/Dividends, Rental Income.

We will use the income information you send us to see how much you earn in one year. Please send one of the following:

- Send proof for one month of income if your income is the same every month (Salary, Social Security, Pension, etc).
- If the amount of your income is not the same every month, please send proof of your income for the last three months.
- If you had changes in income over the past 12 months (Periods of Unemployment, Changes in Jobs, Seasonal Work, etc.), send proof of your income for the past 12 months.
- If you have no income for the past three months, or if your income is less than the cost of your monthly basic living needs, you must tell us in writing how you are paying for your basic living needs (Food, Shelter, Personal Items, etc).
- Proof of income includes (Pay Stubs, Award Letters, Employer Statements, etc).

11 Are you interested in weatherization services? Yes No Weatherization Services include home insulation and heating system repair or replacement.

12 Are you or anyone in your household fleeing to avoid prosecution or custody for a crime, or an attempt to commit a crime that would be classified as a felony? Yes No
If yes, who? _____

13 Is anyone in the U.S. Military or has anyone been in the U.S. Military? Yes No
If yes, who? _____

Is anyone a widow, spouse or child (under age 18) of anyone in the U.S. Military or anyone who has been in the U.S. Military? Yes No
If yes, who? _____

Certification

1. My signature on this application gives my permission to the Department of Public Welfare or its authorized agent to:
(a) check any information I give about where I live, my jobs, income, resources, energy supply and energy supplier;
(b) find out about the costs of my shelter, heating and heating use; and (c) complete any survey in connection with energy assistance.
2. If you fail to provide a Social Security number or completed Energy Assistance Affidavit, you will not be eligible for benefits. I certify that: (check all that apply)
 I provided Social Security numbers for all household members.
 To the best of my knowledge, these household members do not have Social Security numbers:

_____ Print Name _____ Print Name

_____ Print Name _____ Print Name
3. I authorize the release of limited information to approved agencies which provide other energy/weatherization assistance for which I may be eligible.
4. I understand I have the right to appeal any decision or undue delay in decision which I consider improper regarding this application.
5. I affirm that Pennsylvania is my legal residence.
6. I understand any Social Security number(s) given will be used in the administration of this program, including cross matches with other programs.
7. I understand that I will be sent a notice of eligibility or ineligibility and, if eligible, the notice will state the amount of my benefit.
8. I further understand that if my household is eligible for a LIHEAP cash benefit, it must be sent directly to my utility company or fuel dealer unless I am a renter and my heat is included in my rent or my fuel is supplied by a fuel dealer who does not accept vendor payment.
9. I certify that, subject to penalties provided by law, the information I gave is true, correct and complete to the best of my knowledge.
10. I know that if I give false information, I can be penalized by fine and/or imprisonment.
11. I understand by signing this application, I may not qualify because LIHEAP money has run out.

Please Sign Here - Use Ink

X

Signature

Date

Did you remember to...

- | | |
|---|--|
| <input type="checkbox"/> Fill out all required information clearly and completely. | <input type="checkbox"/> Send proof of all household income.
Example: If you apply in November 2011 and are sending: <ol style="list-style-type: none"> a) one month of income, send proof for October 2011. b) three months of income, send proof for August, September and October 2011. c) 12 months of income, send proof for November 2010 through October 2011. |
| <input type="checkbox"/> Provide Social Security numbers for <u>all</u> household members or complete the Energy Assistance Affidavit in the Certification section on previous page. | <input type="checkbox"/> Send a statement explaining how your household pays for basic living needs (food, rent, etc.) only if you told us you have no income, or if your income is less than the cost of your monthly basic living needs. |
| <input type="checkbox"/> Send proof of immigration status if you are a non-U.S. citizen. | <input type="checkbox"/> Sign and date your application, |
| <input type="checkbox"/> If you rent with heat included, send a copy of your lease or a signed, written statement from your landlord explaining how you pay for heat. | <input type="checkbox"/> Mail your completed application and all documents to your local county assistance office. |
| <input type="checkbox"/> If you pay for heat, send a bill for your main heating source. Attach copy of your utility bill dated within 2 months of the date you submit your application. For other fuels provide a bill/receipt dated after January 1, 2011. | |
| <input type="checkbox"/> If you would like payment sent to your secondary heating provider, enclose a copy of your main AND secondary heating bills. | |

PROOF INCLUDES PAY STUBS, AWARD LETTERS, EMPLOYER STATEMENTS, ETC.

IF YOU DO NOT SEND THE PROOF WE NEED WITH THIS FORM, WE WILL NOT BE ABLE TO PROCESS YOUR APPLICATION.

Voter Registration (Optional)

If you or any other adult in your household is not registered to vote where you live now, would you like to register to vote? Yes No
 If yes, enter the names below. **IF YOU DO NOT CHECK 'YES' OR 'NO', OR RETURN THE FORM, YOU ARE CHOOSING NOT TO REGISTER TO VOTE AT THIS TIME.**

To register, you must: 1) Be at least 18 on the day of the next election; 2) Be a citizen of the United States for at least one month PRIOR TO THE NEXT ELECTION; 3) Reside in Pennsylvania and the voting district at least 30 days prior to the next election.

LINE NO CAO ONLY	LAST NAME	FIRST NAME	LINE NO CAO ONLY	LAST NAME	FIRST NAME

YOUR BENEFITS WILL NOT BE AFFECTED IF YOU REGISTER OR DO NOT REGISTER.

If you need help filling out the voter registration form, we will help you. The decision whether to seek or accept help is yours. You may fill out the application form in private. Please contact the county assistance office if you need help. If you believe that someone has interfered with your right to vote, or to decline to register to vote, your right to privacy in deciding whether to register or in applying to register to vote, or your right to choose your own political party or other political preference, you may file a complaint with the Secretary of the Commonwealth, PA Department of State, Harrisburg, PA 17120. (Toll-free telephone number 1-877-VOTESPA.)

DO NOT COMPLETE: COUNTY ASSISTANCE OFFICE USE ONLY

- | | | |
|---|---|---|
| <input type="checkbox"/> Given to Client <u> </u> / <u> </u> / <u> </u> | <input type="checkbox"/> Sent to voter registration <u> </u> / <u> </u> / <u> </u> | <input type="checkbox"/> Mailed to Client <u> </u> / <u> </u> / <u> </u> |
| <input type="checkbox"/> Declined, not interested <u> </u> / <u> </u> / <u> </u> | <input type="checkbox"/> Not a U.S. citizen <u> </u> / <u> </u> / <u> </u> | <input type="checkbox"/> Declined, already registered <u> </u> / <u> </u> / <u> </u> |



If you have a disability and need this application in large print or another format, please call our Helpline at **1-800-692-7462**.
TDD Services are available at **1-800-451-5886**.

Apply online at www.compass.state.pa.us

SOLICITUD PARA EL PROGRAMA DE ASISTENCIA DE ENERGÍA PARA HOGARES DE BAJOS INGRESOS (LIHEAP)

Para solicitar el beneficio de asistencia de energía, debe completar todas las preguntas del frente y reverso y firmar donde está la "X" de color rojo. Asegúrese de que su nombre y dirección completos estén ingresados correctamente debajo. En caso de no estar correctamente ingresados, tache y ESCRIBA correctamente con letra de imprenta en el espacio provisto a continuación. **TAMBIEN PUEDE SOLICITAR EL BENEFICIO EN LINEA EN WWW.COMPASS.STATE.PA.US**

SU NOMBRE Y DIRECCIÓN

Dirección de su Oficina de Asistencia del Condado

Si no comprende estas instrucciones, contacte a su oficina de asistencia del condado local.

1 Complete esta sección con los datos del jefe del grupo familiar.

Nombre (incluya apellido, nombre, inicial del segundo nombre)		Fecha de nacimiento	Sexo <input type="checkbox"/> M <input type="checkbox"/> F	Número de Seguro Social
Dirección particular (incluya calle, número de departamento, ciudad, estado y código postal+4)				
Dirección postal, si es diferente (incluya calle, número de departamento, ciudad, estado y código postal+4)				
Condado en el que reside	Ciudadanía*	Raza (opcional)*	Grupo étnico (opcional)*	¿Recibe beneficios del programa SNAP Asistencia Médica o Asistencia Monetaria en la actualidad? <input type="checkbox"/> Sí <input type="checkbox"/> No

*Use los códigos de la página 2 para ayudar a proporcionar los detalles.

2 ¿Lee, escribe y entiende el idioma inglés? Sí No Si la respuesta es no, ¿qué idioma lee, escribe y entiende? _____ Número de teléfono donde se lo puede ubicar () _____ - _____

3 ¿Alguien en su grupo familiar recibe asistencia económica por una discapacidad? Sí No

4 Indique el nombre y dirección de la empresa de servicios públicos o proveedor de combustible al que desea que se envíe el pago.

Nombre de la empresa proveedora del servicio público o del proveedor de combustible	Número de cuenta
Dirección (incluya calle, ciudad, estado y código postal+4)	

5 ¿Usted:

<input type="checkbox"/> alquila y los gastos de calefacción están incluidos?	<input type="checkbox"/> alquila una vivienda subsidiada/del programa "Section 8" con gastos de calefacción incluidos?
<input type="checkbox"/> alquila y los gastos de calefacción no están incluidos?	<input type="checkbox"/> alquila una vivienda subsidiada/del programa "Section 8" con gastos de calefacción no incluidos?
<input type="checkbox"/> vive con este grupo familiar sin ser pariente?	<input type="checkbox"/> es propietario o está comprando su vivienda? <input type="checkbox"/> Otro: _____

Si vive en una vivienda subsidiada/pública, ¿recibe un cheque en concepto de asignación por servicios públicos? Sí No
Si la respuesta es sí, ¿por cuánto? \$ _____

(Si el gasto de calefacción está incluido en su alquiler, adjunte una nota del propietario que le alquila la vivienda en la que declare que el gasto de calefacción está incluido, así como el tipo de combustible utilizado.)



Solicite el beneficio en línea en www.compass.state.pa.us

La forma rápida y fácil de solicitar su beneficio del
PROGRAMA DE ASISTENCIA DE ENERGÍA PARA HOGARES DE
BAJOS INGRESOS en Pennsylvania

6 ¿Cuál es su fuente principal de calefacción? **Esta pregunta se refiere a su fuente principal de calefacción, la que brinda calor a su vivienda. Adjunte una copia de su última factura. Lea las instrucciones en la última página. Si no tiene facturas anteriores pero pagará su propia calefacción, adjunte una declaración de un proveedor de servicios públicos o de combustible en la que se indique el tipo de combustible y que usted fue aceptado como cliente.**

Electricidad
 Aceite combustible
 Carbón
 Gas natural
 Querosén
 Gas propano o envasado
 Madera/Otros

▶ Responda la pregunta 7 solamente si desea que el pago se envíe al proveedor de su fuente secundaria de calefacción. Una fuente secundaria de calefacción se utiliza para operar su fuente principal de calefacción además del combustible principal (por ejemplo, electricidad para operar un horno de gas), o se utiliza si la fuente principal de calefacción deja de funcionar.

7 ¿Cuál es su fuente secundaria de calefacción, si la tuviera?

Electricidad
 Aceite combustible
 Carbón
 Gas natural
 Querosén
 Gas propano o envasado
 Madera/Otros

(Adjunte una copia de su última factura por su fuente principal y su fuente secundaria de calefacción.)

8 Liste las personas que viven con usted en esta dirección. Incluya a todos los niños y adultos. Incluya a las personas que son parientes. Incluya a todas las personas que no son parientes, pero que comparten los gastos del grupo familiar. No incluya a ninguna persona que esté en la cárcel/prisión. No incluya al miembro del grupo familiar indicado en el bloque 1. **Lea las instrucciones en la última página.**

Use los códigos a continuación para ayudar a proporcionar los detalles para todas las personas en su grupo familiar. Utilice hojas adicionales si es necesario.
CIUDADANÍA*: (1) Ciudadano de los Estados Unidos, (2) Extranjero residente permanente, (3) Extranjero residente temporal, (4) Refugiado, (5) Otros –no elegibles para recibir beneficios (Quienes no son ciudadanos de los EE. UU. deben proporcionar comprobantes de su condición de ciudadanía.)
RAZA*: (1) Negra o afroamericana, (3) Indígena norteamericana o nativa de Alaska, (4) Asiática, (5) Blanca, (opcional) (7) Nativa de Hawai u otra de las Islas del Pacífico. Liste todos los grupos que correspondan.
ORIGEN ÉTNICO*: (1) No hispano, (2) Hispano o latino (opcional)

NOMBRE (Apellido, nombre, inicial del 2.º nombre)	Fecha de nacimiento	Sexo		Número de Seguro Social	Ciudadanía	Raza (Opcional)	Origen étnico (Opcional)	Relación con usted	¿Recibe beneficios del programa SNAP, Asistencia Médica o Asistencia Monetaria? *Sí/No
		M	F						
Total persons in household ▶				*Si la respuesta es sí, debe completar la pregunta 9					

Si otras personas viven en su hogar, proporcione la información correspondiente a dichas personas en una hoja de papel separada y envíela junto con esta solicitud.

9 Complete la pregunta 9 solamente si alguna persona mencionada en el punto anterior recibe Asistencia Monetaria, Asistencia Médica o beneficios del Programa de Asistencia Nutricional Suplementaria (por sus siglas en inglés, SNAP).

¿Sus ingresos se mantuvieron iguales en los últimos 3 meses? Sí No

¿Podemos usar la información que nos proporcionó para sus otros beneficios para determinar su elegibilidad para recibir los beneficios de LIHEAP? Sí No

Si respondió sí a ambas preguntas y todos en su hogar reciben beneficios de los programas de Asistencia Monetaria, MA o SNAP, usted no necesita completar la pregunta 10. Si respondió no a cualquiera de las preguntas, o si hay miembros del grupo familiar que no reciben beneficios de Asistencia Monetaria, MA o SNAP, complete el bloque 10.

10 Proporcione información sobre los ingresos de las personas de su grupo familiar. Proporcione información sobre todos los ingresos, antes de impuestos y deducciones.

Nombre de la persona con ingresos	Tipo de ingreso	Fecha de inicio	Fecha del primer cheque de pago	Cantidad mensual
Nombre de la persona con ingresos	Tipo de ingreso			Cantidad mensual
Nombre de la persona con ingresos	Tipo de ingreso			Cantidad mensual
Nombre de la persona con ingresos	Tipo de ingreso			Cantidad mensual

Adjunte comprobantes de los ingresos, de los últimos 3 ó 12 meses, para todos los miembros del grupo familiar listados. Si proporciona comprobantes de los ingresos de los últimos 3 meses, esta cantidad se convertirá a una cifra anual.

Los ingresos incluyen dinero proveniente de: empleo, beneficios para veteranos, compensación por desempleo, beneficios por neumooniosis o pulmón negro, seguro social, sostén económico o manutención, compensación a trabajadores, intereses/dividendos, ingresos de alquileres.

Usaremos la información sobre ingresos que nos proporcione para ver cuánto gana en un año. Envíe uno de los siguientes:

- **Envíe comprobante de su ingreso de un mes, si su ingreso es el mismo todos los meses (salario, seguro social, jubilación, etc.).**
- **Si el monto de su ingreso no es el mismo todos los meses, envíe comprobantes de sus ingresos de los últimos tres meses.**
- **Si tuvo cambios en sus ingresos en los últimos 12 meses (periodos de desempleo, cambios de trabajo, trabajo por temporada, etc.), envíe comprobante de sus ingresos de los últimos 12 meses.**
- **Si no tuvo ningún ingreso durante los tres últimos meses, o si su ingreso es menor que el costo de sus necesidades básicas de mantenimiento mensual, debe informarnos por escrito cómo paga por sus necesidades básicas de mantenimiento (comida, vivienda, artículos personales, etc.).**
- **Los comprobantes de ingresos incluyen: recibos de sueldo o nómina, cartas de otorgamiento de beneficios, declaraciones de empleadores, etc.**

11 ¿Está interesado en servicios de climatización? Sí No Los servicios de climatización incluyen aislamiento térmico de la vivienda y reparación o reposición del sistema de calefacción.

12 ¿Está usted, o alguna persona de su grupo familiar, fugándose para evitar acciones legales o ser detenido por un delito, o por un intento de delito que sería clasificado como un delito grave? Sí No
Si la respuesta es afirmativa, ¿quién? _____

13 ¿Alguna de las personas está o ha estado en las Fuerzas Armadas de los EE. UU.? Sí No
Si la respuesta es afirmativa, ¿quién? _____

¿Alguna de las personas es la viuda, cónyuge o hijo/a (menor de 18 años de edad) de alguien que esté o haya estado en las Fuerzas Armadas de los EE. UU.? Sí No
Si la respuesta es afirmativa, ¿quién? _____

Certificación

- Al firmar esta solicitud, otorgo mi permiso al Departamento de Bienestar Público o a su agente autorizado para: (a) verificar cualquier información que proporcione relativa a mi residencia, mis empleos, ingresos, recursos, suministro de energía y proveedor de energía; (b) averiguar sobre los costos de mi vivienda, calefacción y consumo de calefacción; y (c) completar encuestas relacionadas con la asistencia de energía.
- Si no proporciona un número de Seguro Social o una declaración jurada de asistencia de energía completa, no será elegible para recibir los beneficios. Certifico que: (marque todas las opciones que correspondan)
 - Proporcioné los números de Seguro Social de todos los miembros del grupo familiar.
 - A mi leal saber y entender, estos miembros del grupo familiar no tienen números de Seguro Social:

____ Nombre completo _____ Nombre completo
____ Nombre completo _____ Nombre completo
- Autorizo la divulgación de información limitada a las agencias aprobadas que proveen otra asistencia para energía/climatización para la cual puedo ser elegible.
- Entiendo que tengo el derecho de apelar cualquier decisión o demora excesiva en la decisión, que considere incorrecta con respecto a esta solicitud.
- Declaro que mi residencia legal es en Pennsylvania.
- Entiendo que el/los número(s) de Seguro Social provisto(s) será(n) utilizado(s) en la administración de este programa, incluyendo las referencias cruzadas con otros programas.
- Entiendo que me enviarán una notificación de elegibilidad o de no elegibilidad y que, de ser elegible, dicha notificación indicará la cantidad de mi beneficio.
- También entiendo que si mi grupo familiar es elegible para recibir un beneficio en efectivo del programa LIHEAP, el dinero se enviará directamente a la empresa que me provee los servicios públicos o al proveedor de combustible, a menos que yo sea inquilino/arrendatario y que el gasto de calefacción esté incluido en el alquiler, o que el combustible sea proporcionado por un proveedor que no acepta pago a proveedores.
- Certifico que, sujeto a las penalidades previstas por ley, la información que brindé es, a mi leal saber y entender, verdadera, correcta y completa.
- Sé que si proporciono información falsa, puedo ser penado con multa o prisión.
- Entiendo, al firmar esta solicitud, que puedo no calificar debido a que el dinero del programa LIHEAP se haya agotado.

Firme aquí – Utilice tinta



Firma

Fecha

¿Recordó...

- | | |
|---|--|
| <input type="checkbox"/> completar toda la información requerida de manera clara y completa?
<input type="checkbox"/> proporcionar los números de Seguro Social de todos los miembros del grupo familiar, o completar la declaración jurada de asistencia de energía incluida en la sección Certificación en la página anterior?
<input type="checkbox"/> enviar comprobantes de la condición de inmigrante si usted no es ciudadano de los EE.UU.?
<input type="checkbox"/> enviar una copia del contrato de alquiler o una declaración escrita y firmada por su arrendador explicando cómo paga los gastos de calefacción, si usted alquila y los gastos de calefacción están incluidos?
<input type="checkbox"/> enviar una factura de su fuente principal de calefacción, si usted paga los gastos de calefacción? Adjunte una copia de su factura de servicios públicos cuya fecha no supere los 2 meses contados desde la fecha en que presenta su solicitud. Para otros combustibles, proporcione una factura/recibo cuya fecha sea posterior al 1 de enero de 2011.
<input type="checkbox"/> Si desea que se envíe el pago a su proveedor de calefacción secundaria, adjunte una copia de sus facturas de calefacción principal <u>Y</u> secundaria. | <input type="checkbox"/> enviar comprobantes de todos los ingresos del grupo familiar?
Por ejemplo: Si presenta su solicitud en noviembre de 2011 y envía:
a) un mes de ingresos, envíe el comprobante de octubre de 2011.
b) tres meses de ingresos, envíe los comprobantes de agosto, septiembre y octubre de 2011.
c) 12 meses de ingresos, envíe los comprobantes desde noviembre de 2010 hasta octubre de 2011.
LOS COMPROBANTES INCLUYEN RECIBOS DE SUELDO O NÓMINA, CARTAS DE OTORGAMIENTO DE BENEFICIOS, DECLARACIONES DE EMPLEADORES, ETC.
<input type="checkbox"/> enviar una declaración explicando cómo su grupo familiar paga las necesidades básicas de mantenimiento (comida, alquiler, etc.), en caso de que nos haya informado que no tiene ingresos o que sus ingresos son inferiores al costo de sus necesidades básicas de mantenimiento.
<input type="checkbox"/> firmar y fechar su solicitud?
<input type="checkbox"/> enviar por correo su solicitud completa y todos los documentos a su oficina de asistencia del condado local? |
|---|--|

SI NO ENVÍA LOS COMPROBANTES QUE NECESITAMOS JUNTO CON ESTE FORMULARIO, NO PODREMOS PROCESAR SU SOLICIT.

Inscripción de electores (Opcional)

Si usted o algún otro adulto en su grupo familiar no está inscrito para votar en el lugar donde vive actualmente, ¿le gustaría inscribirse para votar? Sí No. Si la respuesta es sí, especifique los nombres a continuación. SI USTED NO MARCA "SÍ" O "NO", O NO DEVUELVE EL FORMULARIO, USTED ESTÁ ELIGIENDO NO INSCRIBIRSE PARA VOTAR EN ESTE MOMENTO.

Para inscribirse, usted debe: 1) tener por lo menos 18 años de edad el día de la próxima elección; 2) ser ciudadano de los Estados Unidos por un mes como mínimo ANTES DE LA PRÓXIMA ELECCIÓN; 3) residir en Pennsylvania y en el distrito de votación al menos 30 días antes de la próxima elección.

LÍNEA NRO. PARA USO DE LA CAO	APELLIDO	NOMBRE	LÍNEA NRO. PARA USO DE LA CAO	APELLIDO	NOMBRE

SUS BENEFICIOS NO SE VERÁN AFECTADOS SI USTED SE INSCRIBE O NO.

Si necesita ayuda para completar el formulario de inscripción para votar, podemos ayudarlo. La decisión de buscar o aceptar ayuda es suya. Puede completar el formulario de solicitud en privado. Comuníquese con la oficina de asistencia del condado si necesita ayuda. Si cree que alguna persona ha interferido con su derecho a votar, o de rechazar la inscripción para votar; su derecho a la privacidad para decidir si se inscribe, o para solicitar la inscripción para votar; o su derecho a elegir su partido político u otra preferencia política, usted puede presentar una queja ante la Secretaría de Estado en: Secretary of the Commonwealth, PA, Department of State, Harrisburg, PA 17120. (Número de teléfono sin cargo 1-877-VOTESPA.)

NO COMPLETAR: PARA USO EXCLUSIVO DE LA OFICINA DE ASISTENCIA DEL CONDADO

- | | | |
|---|---|---|
| <input type="checkbox"/> Given to Client <u> </u> / <u> </u> / <u> </u> | <input type="checkbox"/> Sent to voter registration <u> </u> / <u> </u> / <u> </u> | <input type="checkbox"/> Mailed to Client <u> </u> / <u> </u> / <u> </u> |
| <input type="checkbox"/> Declined, not interested <u> </u> / <u> </u> / <u> </u> | <input type="checkbox"/> Not a U.S. citizen <u> </u> / <u> </u> / <u> </u> | <input type="checkbox"/> Declined, already registered <u> </u> / <u> </u> / <u> </u> |



Si tiene una discapacidad y necesita esta solicitud impresa con letras grandes o en otro formato, llame a nuestra línea de ayuda al número **1-800-692-7462**. Para servicios de TDD, llame al número **1-800-451-5886**.

Solicite el beneficio en línea en www.compass.state.pa.us

Apply online at
www.compass.state.pa.us

Applications are also available at your
local county assistance office.

Statewide
Toll-Free Hotline
1-866-857-7095

Philadelphia County - Call (215) 560-1583
TDD for Hearing Impaired 1-800-451-5886

If you have a heating emergency and need to apply for a crisis grant,
contact your local county assistance office (CAO).

A listing of CAOs can be found at:

www.dpw.state.pa.us/foradults/heatingassistanceliheap

In the following counties, contact the crisis contractor:

Allegheny
(800) 851-3838

Luzerne
(800) 822-0359

Wyoming
(570) 836-4090

To get the number for your local CAO
go to www.dpw.state.pa.us
or your local telephone directory.

Important Information about an Energy Assistance Program

ព័ត៌មានសំខាន់អំពីជំនួយលើថ្លៃ ភ្លើងនិងហ្គាស Información importante sobre un programa
(ENERGY ASSISTANCE PROGRAM) ។ de asistencia para el pago de energía

关于能源补助计划的重要消息

Thông báo quan trọng về
chương trình trợ giúp năng lượng

Важная информация о программе помощи в оплате
счетов за электро- энергию.

If you need help paying
your heating bills, or
have a heating
emergency...

LIHEAP
May Be Able
To Help You



800.692.7462 | www.dpw.state.pa.us

PWEA 18 8/11

What is LIHEAP?

The Low-Income Home Energy Assistance Program (LIHEAP) helps low-income families pay their heating bills. LIHEAP is a grant. You do not have to repay it.

To receive help...

- You don't have to be on public assistance
- You don't need to have an unpaid heating bill
- You can either rent or own your home

How does LIHEAP work?

LIHEAP offers both cash and crisis grants. Families may apply for:

Cash Grants

Cash grants help families pay their heating bills. The grant payment is sent directly to your utility company or fuel provider, and it will be credited on your bill. (In some cases, the check may be mailed to you directly.)

Crisis Grants

In addition to the LIHEAP cash program, households experiencing a heating crisis may be eligible for additional benefits through one of the two components of the LIHEAP crisis program.

Crisis Exception Component

Households without heat may qualify for additional help. To be considered "without heat":

- The main heating source or second heating source (a source that is used to operate the main heating source or used if the main heating source is not working) has been completely shut-off;

OR

- A household has almost run out of their supply of main heating fuel (coal, fuel oil, kerosene, propane, wood, etc.).

Regular Crisis Component

Beginning with the opening of the Regular Crisis Program, additional money may be available if you have an emergency situation and are in jeopardy of losing your heat. Emergency situations include:

- Broken heating equipment or leaking lines that must be fixed or replaced
- Lack of fuel
- Termination of utility service
- Danger of being without fuel (less than a 15 day supply) or of having utility service terminated (received a notice that service will be shut off within the next 60 days)

If you have a heating emergency please call your local county assistance office.

How do I apply?

- **Apply online at: www.compass.state.pa.us**
- Request an application by calling the Statewide LIHEAP Hotline at 1-866-857-7095 or TDD for the hearing impaired 1-800-451-5886
- Applications are available at your local county assistance office

To apply, you will need

- Names of people in your household
- Dates of birth for all household members
- Social Security Numbers for all household members
- Proof of income for all household members
- A recent heating bill

Who is eligible?

You may qualify for a LIHEAP grant if your income meets the following income guidelines:

INCOME GUIDELINES	
2011 - 2012 LIHEAP (For Homeowners and Renters)	
Household Size	Maximum Income
1	\$ 16,335
2	\$ 22,065
3	\$ 27,795
4	\$ 33,525
5	\$ 39,255
6	\$ 44,985
7	\$ 50,715
8	\$ 56,445
9	\$ 62,175
10	\$ 67,905
Each Additional Person Add \$ 5,730	

You will receive a written notice that will tell you if you qualify and the amount of your grant.

Solicite en línea en
www.compass.state.pa.us

También puede obtener una solicitud en la oficina de asistencia del condado local.

Línea de asistencia sin cargo en todo el estado
1-866-857-7095

Condado de Philadelphia - Llame al (215) 560-1583
TDD para personas con problemas auditivos
1-800-451-5886

Important Information about an Energy Assistance Program

ព័ត៌មានសំខាន់អំពីជំនួយលើថ្លៃ ភ្លើងនិងកំហុស
(ENERGY ASSISTANCE PROGRAM) ។
关于能源补助计划的重要消息

Información importante sobre un programa de asistencia para el pago de energía
Thông báo quan trọng về chương trình trợ giúp năng lượng

Важная информация о программе помощи в оплате счетов за электро- энергию.

Si necesita ayuda para pagar sus facturas de calefacción o si tiene una emergencia de calefacción...

Si tiene una emergencia de calefacción y necesita solicitar un subsidio por situación de crisis, comuníquese con la oficina de asistencia del condado (CAO) que le corresponde.

Para ver la lista de las CAOs visite:

www.dpw.state.pa.us/foradults/heatingassistanceliheap

En los siguientes condados, comuníquese con el contratista para situación de crisis:

Allegheny
(800) 851-3838

Luzerne
(800) 822-0359

Wyoming
(570) 836-4090

Para obtener el número de la CAO que le corresponde, vaya a www.dpw.state.pa.us o consulte su directorio telefónico local.

es posible que pueda recibir ayuda de LIHEAP



¿Qué es LIHEAP?

El Programa de Asistencia de Energía para Hogares de Bajos Ingresos (LIHEAP) ayuda a las familias de bajos ingresos a pagar sus facturas de calefacción. LIHEAP es un subsidio. No lo tiene que devolver.

Para recibir ayuda...

- No es requisito que ya esté recibiendo asistencia pública
- No es requisito que tenga facturas de calefacción sin pagar
- Puede alquilar o ser dueño de su vivienda

¿Cómo funciona el programa LIHEAP?

LIHEAP ofrece tanto subsidios en efectivo como subsidios por situaciones de crisis. Las familias pueden solicitar:

Subsidios en efectivo

Los subsidios en efectivo ayudan a las familias a pagar sus facturas de calefacción. El subsidio se envía directamente a la empresa que provee los servicios públicos o al proveedor de combustible y se acredita en su factura. (En algunos casos es posible que le envíen el cheque directamente a usted.)

Subsidios por situación de crisis

Además del programa de subsidio en efectivo de LIHEAP, los grupos familiares que tienen una crisis de calefacción podrán ser aprobados para recibir beneficios adicionales a través de uno de los dos componentes del programa de crisis de LIHEAP.

Componente de crisis de excepción

Los grupos familiares sin calefacción pueden ser aprobados para recibir asistencia adicional. Para ser considerado como un grupo familiar "sin calefacción", se deben reunir estos requisitos:

- que se hayan desconectado completamente la fuente primaria de calefacción o la fuente secundaria de calefacción (una fuente que se usa para operar la fuente primaria de calefacción o que se usa cuando la fuente primaria de calefacción no está funcionando);

O

- que esté casi agotado el suministro del combustible de calefacción principal de un grupo familiar (carbón, aceite combustible, queroseno, propano, madera, etc.).

Componente de crisis regular

A partir del inicio del Programa de Crisis Regular, es posible que haya fondos adicionales disponibles si está en una situación de emergencia y corre el riesgo de quedarse sin calefacción. Entre las situaciones de emergencia se incluyen:

- Equipo de calefacción roto o tuberías con pérdidas o fugas que deban repararse o reemplazarse
- Falta de combustible
- Interrupción de los servicios públicos
- Riesgo de quedarse sin combustibles (suministros para menos de 15 días) o de que se corten los servicios públicos (haber recibido una notificación de que el servicio se cortará dentro de los próximos 60 días)

Si tiene una emergencia de calefacción, llame a la oficina de asistencia del condado que le corresponde.

¿Cómo lo solicito?

- Solicite el beneficio en línea en: www.compass.state.pa.us
- Para pedir una solicitud, llame a la línea de asistencia de LIHEAP en todo el estado al 1-866-857-7095 o desde un dispositivo TDD para personas con dificultades auditivas al 1-800-451-5886
- También puede obtener una solicitud en la oficina de asistencia del condado local

Para solicitar el subsidio, necesitará

- Los nombres de las personas de su grupo familiar
- Las fechas de nacimiento de todos los miembros de su grupo familiar
- Los números de Seguro Social de todos los miembros del grupo familiar
- Comprobante de los ingresos de todos los miembros de su grupo familiar
- Una factura de calefacción reciente

¿Quién lo puede obtener?

Si cumple con los siguientes límites de ingresos, es posible que cumpla los requisitos para recibir un subsidio del programa LIHEAP:

LÍMITES DE INGRESOS

2011 - 2012 LIHEAP
(Para propietarios e inquilinos)

Tamaño del grupo familiar	Ingresos máximos
1	\$ 16,335
2	\$ 22,065
3	\$ 27,795
4	\$ 33,525
5	\$ 39,255
6	\$ 44,985
7	\$ 50,715
8	\$ 56,445
9	\$ 62,175
10	\$ 67,905

Cada persona adicional
agregar \$ 5,730

Recibirá una notificación por escrito que le dirá si cumple los requisitos y la cantidad del subsidio.

LOW-INCOME HOME ENERGY ASSISTANCE PROGRAM
APPLICATION
REQUEST FOR ADDITIONAL INFORMATION

Name: _____ Date of Application: _____ Record Number: _____

PLEASE PROVIDE ALL OF THE INFORMATION CHECKED BELOW IN THE ENCLOSED ENVELOPE BY
OR YOUR APPLICATION WILL BE REJECTED AND YOU WILL HAVE TO REAPPLY
(only the items checked (x) apply to your application)

Date: _____

If you have any questions, or have difficulty in getting the information
I will try to assist you. Please call the number shown below.

Energy Assistance Worker Date
Telephone No. _____

1 A photocopy of your current Social Security check or an up-to-date award letter from the Social Security office. If direct deposit, a bank statement is acceptable. Call 1-800-772-1213 to find the office nearest you. We must have verification for all household members who receive benefits.

2 A photocopy of your unemployment compensation check and stub or benefit determination notice.

3 A photocopy of the following:
 Worker's Compensation check, sick benefit check, or up-to-date award letter
 Veterans benefit check or up-to-date award letter Black lung check Proof of interest and/or dividend income
 Retirement check (if it shows the gross amount before taxes or insurance premiums have been deducted) or letter from employer showing the gross amount received

4 If support is court ordered, send printout or letter from Domestic Relations Office. If not court ordered, a letter from the person paying support with address, telephone number, the amount of support and how often it is paid.

5 Provide proof of earnings for the following persons for the period or periods shown.

Name	From	To	From	To	From	To
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____

6 The attached Landlord Statement (PWEA 36) form completed and signed by your landlord.

7 Heating bill or letter from your dealer stating that you are a customer. You must verify your primary source of heat.
 No bill was enclosed with your application The bill is over 2 months old
 Explain why your heating bill is in a different name Your electric is not for heat
 Your gas bill is for cooking and hot water, not heat Since the benefit is your secondary heat source, send fuel bills for main and secondary source

8 The attached Zero-Income Statement (PWEA 6) completed and signed by you.

9 A photocopy of non-U.S. citizen status card for each non-U.S. citizen who resides in the household.

10 You did not sign the application. Please read the entire certification section on the back of this form and complete the appropriate section of the statement #2. Please sign and date where indicated by the "X."

11 Other

Certification

- 1. My signature on this application gives my permission to the Department of Public Welfare or its authorized agent to: (a) check any information I give about where I live, my jobs, income, resources, energy supply and energy supplier; (b) find out about the costs of my shelter, heating and heating use; and (c) complete any survey in connection with energy assistance.
- 2. If you fail to provide a Social Security Number or completed Energy Assistance Affidavit, you will not be eligible for benefits. I certify that: (check all that apply)

- I provided Social Security Numbers for all household members.
- To the best of my knowledge, these household members do not have Social Security Numbers:

_____ *Print Name* _____ *Print Name*

_____ *Print Name* _____ *Print Name*

- The following household members are exercising their rights under Section 7 of the Privacy Act of 1974, and refuse to disclose their Social Security Number:

_____ *Print Name* _____ *Print Name*

_____ *Print Name* _____ *Print Name*

- 3. I authorize the release of limited information to approved agencies which provide other energy/weatherization assistance for which I may be eligible.
- 4. I understand I have the right to appeal any decision or undue delay in decision which I consider improper regarding this application.
- 5. I affirm that Pennsylvania is my legal residence.
- 6. I understand any Social Security Number(s) given will be used in the administration of this program, including cross matches with other programs.
- 7. I understand that I will be sent a notice of eligibility or ineligibility and, if eligible, the notice will state the amount of my benefit.
- 8. I further understand that if my household is eligible for a LIHEAP cash benefit, it must be sent directly to my utility company or fuel dealer unless I am a renter and my heat is included in my rent or my fuel is supplied by a fuel dealer who does not accept vendor payment.
- 9. I certify that, subject to penalties provided by law, the information I gave is true, correct and complete to the best of my knowledge.
- 10. I know that if I give false information, I can be penalized by fine and/or imprisonment.
- 11. I understand by signing this application, I may not qualify because LIHEAP money has run out.

Please Sign Here - Use Ink

X

_____ *Signature*

_____ *Date*

**SOLICITUD PARA EL PROGRAMA DE ASISTENCIA DE ENERGÍA PARA HOGARES DE
BAJOS INGRESOS
SOLICITUD DE INFORMACIÓN ADICIONAL**

Nombre:	Fecha de solicitud:	Número de expediente::
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PROPORCIONE TODA LA INFORMACIÓN SOLICITADA (EN LAS CASILLAS MARCADAS) EN EL SOBRE ADJUNTO ANTES DEL O SU SOLICITUD SERÁ RECHAZADA Y TENDRÁ QUE VOLVER A SOLICITAR EL BENEFICIO Fecha: _____
(solamente las casillas marcadas [x] son aplicables a su solicitud)

Si tiene preguntas o alguna dificultad para obtener la información, intentaré ayudarlo. Llame al número que aparece abajo.

Trabajador Social de Asistencia de Energía Fecha
Nro. de teléfono: _____

1	<input type="checkbox"/>	Una fotocopia de su cheque actual del Seguro Social actual o una carta de otorgamiento actualizada de la oficina del Seguro Social. Si el pago se realiza a través de depósito directo, se aceptan estados de cuenta bancarios. Llame al 1-800-772-1213 para encontrar la oficina más cercana a su domicilio. Debemos tener comprobantes de todos los miembros del grupo familiar que reciben beneficios.																												
2	<input type="checkbox"/>	Una fotocopia de su cheque de compensación por desempleo y recibo de pago o notificación de determinación del beneficio.																												
3	<input type="checkbox"/>	Una fotocopia de lo siguiente: <input type="checkbox"/> Cheque de compensación a trabajadores, cheque de beneficio por enfermedad o carta de otorgamiento actualizada <input type="checkbox"/> Cheque de beneficio para veteranos o carta de otorgamiento actualizada <input type="checkbox"/> Cheque por neumoconiosis (pulmón negro) <input type="checkbox"/> Comprobante de ingresos por intereses y/o dividendos <input type="checkbox"/> Cheque de jubilación (si muestra la cantidad bruta antes de la deducción de impuestos o primas de seguro) o carta del empleador que muestre la cantidad bruta recibida																												
4	<input type="checkbox"/>	En caso de manutención por orden judicial, envíe la impresión o carta de la Oficina de Relaciones Domésticas. En caso de manutención sin orden judicial, una carta de la persona que paga la manutención con la dirección, el número de teléfono, la cantidad de la manutención y la frecuencia con que se paga.																												
5	<input type="checkbox"/>	Proporcione comprobantes de ingresos para las siguientes personas para el período o períodos que se muestran a continuación. <table style="width:100%; border-collapse: collapse; margin-top: 10px;"> <thead> <tr> <th style="width:30%; text-align: center;">Nombre</th> <th style="width:10%; text-align: center;">Desde</th> <th style="width:10%; text-align: center;">Hasta</th> <th style="width:10%; text-align: center;">Desde</th> <th style="width:10%; text-align: center;">Hasta</th> <th style="width:10%; text-align: center;">Desde</th> <th style="width:10%; text-align: center;">Hasta</th> </tr> </thead> <tbody> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr> </tbody> </table>	Nombre	Desde	Hasta	Desde	Hasta	Desde	Hasta																					
Nombre	Desde	Hasta	Desde	Hasta	Desde	Hasta																								
6	<input type="checkbox"/>	El formulario adjunto Declaración del Arrendador (PWEA 36) completado y firmado por su arrendador.																												
7	<input type="checkbox"/>	Factura de calefacción o carta de su proveedor en la que declare que usted es un cliente. Debe verificar su fuente primaria de calefacción. <input type="checkbox"/> Su solicitud no tenía adjunta la factura <input type="checkbox"/> La factura tiene más de 2 meses de antigüedad <input type="checkbox"/> Explique el motivo por el que su factura de calefacción está a nombre de otra persona <input type="checkbox"/> Su servicio de electricidad no es para la calefacción <input type="checkbox"/> Su factura de gas es para cocinar y para agua caliente, no para la calefacción <input type="checkbox"/> Dado que el beneficio es para su fuente secundaria de calefacción, envíe las facturas de combustible para la fuente principal y secundaria																												
8	<input type="checkbox"/>	El formulario adjunto Declaración de Cero Ingreso (PWEA 6) completado y firmado por usted.																												
9	<input type="checkbox"/>	Una fotocopia de la tarjeta de condición de no ciudadano de los Estados Unidos para cada persona extranjera que resida con el grupo familiar.																												
10	<input type="checkbox"/>	Usted no firmó la solicitud. Lea toda la sección sobre certificación en el reverso de este formulario y complete la sección apropiada de la declaración nro. 2. Firme y coloque la fecha donde se indica con una "X".																												
11	<input type="checkbox"/>	Otros _____ _____																												

Certificación

- Al firmar esta solicitud, otorgo mi permiso al Departamento de Bienestar Público o a su agente autorizado para: (a) verificar cualquier información que proporcione relativa a mi residencia, mis empleos, ingresos, recursos, suministro de energía y proveedor de energía; (b) averiguar sobre los costos de mi vivienda, calefacción y consumo de calefacción; y (c) completar encuestas relacionadas con la asistencia de energía.
 - Si no proporciona un número de seguro social o la Declaración Jurada de Asistencia de Energía completa, usted no será elegible para recibir los beneficios. Certifico que: (marque todo lo que corresponda)
 - Proporcioné los números de Seguro Social de todos los miembros del grupo familiar.
 - A mi leal saber y entender, estos miembros del grupo familiar no tienen números de Seguro Social:

Nombre en letra de imprenta *Nombre en letra de imprenta*

Nombre en letra de imprenta *Nombre en letra de imprenta*

 - Los siguientes miembros del grupo familiar ejercen sus derechos según la Sección 7 de la Ley de Privacidad de 1974 y se niegan a divulgar sus números de Seguro Social:
- _____
Nombre en letra de imprenta *Nombre en letra de imprenta*
- _____
Nombre en letra de imprenta *Nombre en letra de imprenta*
- Autorizo la divulgación de información limitada a las agencias aprobadas que proveen otro tipo de asistencia para energía/climatización para la cual puedo resultar elegible.
 - Entiendo que tengo el derecho de apelar cualquier decisión o demora excesiva en la decisión, que considere incorrecta con respecto a esta solicitud.
 - Declaro que mi residencia legal es en Pensilvania.
 - Entiendo que el/los número(s) de Seguro Social provisto(s) será(n) utilizado(s) en la administración de este programa, incluyendo las referencias cruzadas con otros programas.
 - Entiendo que me enviarán una notificación de elegibilidad o de no elegibilidad y que, de ser elegible, dicha notificación indicará la cantidad de mi beneficio.
 - También entiendo que si mi grupo familiar es elegible para recibir un beneficio en efectivo del programa LIHEAP, el dinero se enviará directamente a la empresa que me provee los servicios públicos o al proveedor de combustible, a menos que yo sea inquilino/arrendatario y que el gasto de calefacción esté incluido en el alquiler, o que el combustible sea proporcionado por un proveedor que no acepta pago a proveedores.
 - Certifico que, sujeto a las penalidades previstas por ley, la información que brindé es, a mi leal saber y entender, verdadera, correcta y completa.
 - Sé que si proporciono información falsa, puedo ser penado con multa y/o prisión.
 - Entiendo, al firmar esta solicitud, que puedo no calificar debido a que el dinero del programa LIHEAP se haya agotado.

Firme aquí – Utilice tinta

X

Firma

Fecha

LOW-INCOME HOME ENERGY ASSISTANCE PROGRAM VENDOR AGREEMENT

Vendor Name and Address

Vendor Number

DPW COPY

Federal I.D. Number

Telephone Number

E-mail Address

This Agreement is entered into for the purpose of facilitating the provision of Low-Income Home Energy Assistance Program (LIHEAP) benefits to low-income households through the delivery of fuel from the vendor to the LIHEAP beneficiary who is a customer of the vendor. By signing this agreement, vendors agree to participate in all additional programs that distribute LIHEAP funds for which LIHEAP clients may be eligible, and to participate in both the LIHEAP cash and crisis programs.

The _____ (herein referred to as the "vendor") certifies that it is not currently under suspension or debarment by the Commonwealth of Pennsylvania, any other state, or the federal government.

The vendor cannot enter into any subcontracts under this agreement with other subcontractors who are currently suspended or debarred by the Commonwealth or federal government. If any vendor enters into any subcontracts under this agreement with any subcontractors who become suspended or debarred by the Commonwealth or federal government during the term of this agreement or any extensions or renewals thereof, the Commonwealth shall have the right to require the vendor to terminate such subcontracts.

The vendor agrees that it shall be responsible for reimbursing the Commonwealth for all necessary and reasonable costs and expenses incurred by the Office of the Inspector General relating to an investigation of the vendor's compliance with the terms of this or any other agreement between the vendor and the Commonwealth which results in the suspension or debarment of the vendor.

Vendors will adhere to LIHEAP policy and procedures as defined in the LIHEAP State Plan and will report any discovery of fraud and address any questions regarding participation in the LIHEAP to the LIHEAP Project Manager. A copy of the current LIHEAP State Plan can be obtained online at: <http://www.dpw.state.pa.us/servicesprograms/liheap>.

The vendor agrees to the following conditions in order to receive energy assistance payments through the Commonwealth of Pennsylvania:

1. To cooperate with the Department of Public Welfare (DPW) by providing information on fuel usage and cost for LIHEAP households:
 - a) Deliverable fuel vendors must provide a metered delivery ticket for all crisis deliveries. Metered delivery tickets will contain the vendor's name and address, the date and time of delivery, the purchaser's name and address, product identification, the driver's signature or employee number, the delivery vehicle's permanently assigned company truck number, the price per gallon and the volume in terms of gallons to the nearest one-tenth of a gallon.
 - b) Vendors will provide all requested information established in DPW policies and procedures. Vendors will submit all information within 30 calendar days of the date a crisis benefit was authorized. All information must be sent to the appropriate agency, as designated by DPW, via mail, fax, or scanning. Vendors will not receive payment if all information is received on or after the 31st day a crisis delivery was authorized. LIHEAP recipients cannot be billed for services as a result of a vendor's failure to comply with billing requirements in this agreement.
 - c) Deliverable fuel vendors and utility companies must retain all documents related to LIHEAP payments and deliveries for 4 years in an orderly and retrievable manner.
2. To apply the full payment amount of each LIHEAP benefit approved by DPW to the respective account of each LIHEAP recipient whom the vendor serves.
3. To charge a LIHEAP household according to the requirements below.
 - a) The cash price normally charged for energy delivered, not a credit price.
 - b) The same amount a non-LIHEAP household would be billed for an identical delivery, except for additional discounts that may be required by established DPW policies and procedures.
 - c) Public utilities that operate Customer Assistance Programs, CAP, will apply the LIHEAP cash component benefits to the customer's account in full:
 1. to resolve any past due CAP payments,
 2. to the current CAP payment, and
 3. any remaining funds will be credited to future CAP payments.CAP payment is defined as the amount the customer is required to pay under the terms of a utility's CAP agreement.
4. To not discriminate against any eligible household in regard to terms and conditions of sale, credit, delivery service or price, nor treat adversely any household receiving energy assistance because of such assistance.
5. To promptly notify the LIHEAP Project Manager whenever discrepancies in approved fuel applications are found (for example, oil being authorized for a residence serviced 100% by coal) or when the vendor is aware of any potentially fraudulent activity.
6. To apply all payments paid by DPW (for both Cash Component and Crisis Component benefits) on behalf of the customer against that customer's heating costs, subject to subparagraphs "a" through "h" below, and to not use any such funds for security deposits or late payments or other finance charges.
 - a) Late payment charges must be frozen at the amount they are at the time notification of eligibility for LIHEAP (energy assistance) benefits is received by the vendor, and may not be increased for the remainder of the LIHEAP program year; i.e., the date that applications for LIHEAP benefits are no longer accepted.
 - b) Vendors are holding, on DPW's behalf, federal money for the benefit of recipient customers. Vendors are prohibited from using LIHEAP funds for purposes other than home heating. This requirement does not supersede the provisions of the Federal Bankruptcy Act, 11 U.S.C., Section 366.

- c) Cash component payments received on behalf of a LIHEAP customer will be used to cover customer fuel purchases only, and will be available as a credit to the customer to meet additional fuel costs, including resolution of a subsequent fuel crisis, until they are exhausted, or until expiration of the state fiscal year (June 30) following the end of the state fiscal year in which LIHEAP benefits were authorized. Cash grant funds are to be used for fuel purchases only, and cannot be used for repairs (except as described under "d" and "e" below) or for service maintenance contracts.
 - d) If a household receives benefits from the cash component and subsequently applies for crisis benefits, any credit which the household may have with the vendor, including but not limited to LIHEAP cash component benefits, will be used for resolution of the crisis.
 - e) LIHEAP crisis component benefits may be used for energy supply shortage emergencies to provide fuel to a household that is out of fuel or is in imminent danger of being without fuel, or to restore home-heating service to a household that is without heat due to termination of the main or second source of heat by a utility company. Such benefits may include reconnect fees, off-hour delivery charges, or minimal costs (i.e., \$50 or less) to restart the furnace. An eligible household may also receive crisis benefits for weather related emergencies, including the purchase of a new heating system, the repair of an existing heating system, pipe thawing services and the repair of broken windows, fuel lines, or the water heating system, if funding is unavailable through LIHEAP Weatherization. Additionally, crisis component payment for deliverable fuels (oil, coal, etc.) may not be used for unpaid balances, maintenance contracts or finance charges. The amount of a crisis benefit is the minimum amount needed to resolve the crisis. For deliverable fuels, the amount needed to resolve the crisis would be the amount of fuel needed to fill the tank up to the maximum crisis amount. If for any reason, the amount of crisis benefits authorized is in excess of the minimum amount needed to resolve the crisis, the excess must be returned to the Department within 48 hours after the basis for return is known.
 - f) Vendors that accept crisis payments based on utility termination notices or based on reconnection of utility service must agree to maintain ongoing utility service to such households for no less than 30 calendar days from the date of the resolution of the crisis. With regard to crisis payments made pursuant to any grants approved during the Public Utility Commission winter termination procedure referred to in §601.62(ii)(A) of Appendix B of the LIHEAP State Plan, the earliest allowable termination date is 30 days following the resolution of the crisis or May 1, whichever is later.
 - g) In cases in which an eligible LIHEAP household has no present utility service or deliverable fuel supply, a LIHEAP crisis grant tendered to the utility must be accepted as the basis for reconnection of service or for providing a fuel delivery.
 - h) Payment is only guaranteed for LIHEAP grants approved and authorized by DPW or its representatives.
7. To return funds as required, by check, within 48 hours after the basis for return is known, in instances where a customer's whereabouts are unknown or a customer changes vendors, dies or departs the area serviced by the vendor, or receives a duplicate payment, unless otherwise specified in this agreement. The information must be provided as indicated on the refund form issued by DPW. Checks shall be made payable to the Commonwealth of Pennsylvania and forwarded to: DEPARTMENT OF PUBLIC WELFARE, BUREAU OF COMMONWEALTH ACCOUNTING, PENNSYLVANIA OFFICE OF THE BUDGET, COMPTROLLER OPERATIONS, 55 WALNUT STREET, 9th FLOOR, HARRISBURG, PA 17101.
 8. If a security deposit was erroneously paid with LIHEAP funds, or a billing error is detected, the vendor shall contact the LIHEAP Project Manager for appropriate action.
 9. If it is determined that a LIHEAP overpayment has occurred due to vendor error, the vendor is responsible for reimbursement from the vendor's funds, not the customer's account. Vendor error includes, but is not limited to; the vendor failing to provide appropriate or accurate customer account information, non-equitable pricing practice, failure to provide credit balance information, failure to provide service that the LIHEAP funds were sent for, and/or using a communal account for LIHEAP funds.
 10. DPW is authorized to recoup past due LIHEAP balances from vendors by debiting any current or future LIHEAP payment to the vendor for an amount equal to the outstanding unrefunded balance that is due to DPW from the vendor. A record of the balance of funds owed is established by DPW when a vendor error has occurred or a vendor has received a payment on behalf of a client who has subsequently moved to another county and is no longer a customer of the vendor. The vendor must return these funds to DPW. DPW will send the vendor up to three notices requesting payment of the funds. If the vendor has failed to respond after the third notice, the amount of the balance of funds owed to DPW will be deducted from the vendor's next payment(s) until the funds are repaid. The vendor acknowledges that DPW will reduce vendor payments by the amount of the balance of funds owed to allow for the expeditious collection of these debts.
 11. To review customer accounts annually at the end of the LIHEAP program year and identify funds that will be returned to DPW. LIHEAP funds are available for use during a two-year period, which includes the year of receipt and the year immediately following. All LIHEAP funds which have not been expended on or before June 30 of the year immediately following the LIHEAP Program year in which benefits were authorized must be returned to DPW by July 31 of that year. DPW will, on an annual basis, notify the vendors of the need to identify these accounts and request return of the funds. Any LIHEAP funds discovered through the annual review as defined in paragraphs 7, 8, and subparagraph 6e must be returned within 48 hours of discovery.
 12. To return all funds not expended on LIHEAP clients at least 91 days before filing for bankruptcy.
 13. To present for review or reproduction, records maintained by the vendor concerning overall pricing, conditions of sale, credit, and delivery of service, upon request by DPW for audit or investigation purposes, as provided in this agreement.
 14. To provide proof of the company's Federal Employer Identification Number (FEIN) or Social Security Number (SSN) to DPW. Proof would include any tax document generated by the Federal Internal Revenue Service that shows both the name and SSN or FEIN of the company. DPW requires that all vendors must indicate the types of energy (oil, electricity, propane, wood, etc.) that their company provides.
 15. To resolve any crisis payment disputes with DPW at DPW's Bureau of Hearings and Appeals, starting with the 2009 – 10 LIHEAP Program Year and continuing until superseded by a new vendor agreement, if disputes cannot be resolved informally with DPW staff.

Failure to comply with any of these conditions will result in removal from the approved vendor file and suspension of further payments to the vendor for client services.

The Commonwealth reserves the right for State and Federal agencies or their authorized representatives to perform financial and compliance audits, if deemed necessary by Commonwealth or Federal agencies. If an audit of this agreement will be performed, the vendor will be given advance notice.

Vendors will retain all books, records and documents pertaining to LIHEAP payments for a period of four years from the receipt of payment or until all questioned costs or activities have been resolved to the satisfaction of the Commonwealth, or as required by applicable federal laws and regulations. All records must be maintained in a legible, readable condition. If records are maintained in a computer, the vendor must cooperate in providing printed versions of such records. These recipient-specific records should clearly identify for both cash and crisis payments under the LIHEAP, charges to the account, and documentation supporting these entries by individual household.

This agreement will terminate June 30, 2012, unless superseded by a new agreement, or terminated for convenience upon 30 day written notice by either DPW or by the vendor.

Vendors will be required to return all credited LIHEAP funds to DPW upon termination as a participating vendor.

The Vendor will retain one copy of this signed agreement for reference by staff responsible for handling LIHEAP funds, and will return one copy of the signed Agreement to: LIHEAP, P.O. Box 2675, Harrisburg, PA 17105 - 2675 within 30 days of the mail date of this agreement. Failure to complete and return this agreement with the required documents within 30 days will cause your company to be removed from DPW's participating vendor list.

(Signature)

(Position)

(Date)

(Company Name)

Please check all types of energy your company provides:

Electric Fuel Oil Coal Natural Gas Kerosene Propane or Bottled Gas Wood/other

Is your company a regulated utility? Yes No

Which counties does your company do business in? (Please Check)

<input type="checkbox"/> Adams	<input type="checkbox"/> Chester	<input type="checkbox"/> Fulton	<input type="checkbox"/> Mercer	<input type="checkbox"/> Sullivan
<input type="checkbox"/> Allegheny	<input type="checkbox"/> Clarion	<input type="checkbox"/> Greene	<input type="checkbox"/> Mifflin	<input type="checkbox"/> Susquehanna
<input type="checkbox"/> Armstrong	<input type="checkbox"/> Clearfield	<input type="checkbox"/> Huntingdon	<input type="checkbox"/> Monroe	<input type="checkbox"/> Tioga
<input type="checkbox"/> Beaver	<input type="checkbox"/> Clinton	<input type="checkbox"/> Indiana	<input type="checkbox"/> Montgomery	<input type="checkbox"/> Union
<input type="checkbox"/> Bedford	<input type="checkbox"/> Columbia	<input type="checkbox"/> Jefferson	<input type="checkbox"/> Montour	<input type="checkbox"/> Venango
<input type="checkbox"/> Berks	<input type="checkbox"/> Crawford	<input type="checkbox"/> Juniata	<input type="checkbox"/> Northampton	<input type="checkbox"/> Warren
<input type="checkbox"/> Blair	<input type="checkbox"/> Cumberland	<input type="checkbox"/> Lackawanna	<input type="checkbox"/> Northumberland	<input type="checkbox"/> Washington
<input type="checkbox"/> Bradford	<input type="checkbox"/> Dauphin	<input type="checkbox"/> Lancaster	<input type="checkbox"/> Perry	<input type="checkbox"/> Wayne
<input type="checkbox"/> Bucks	<input type="checkbox"/> Delaware	<input type="checkbox"/> Lawrence	<input type="checkbox"/> Philadelphia	<input type="checkbox"/> Westmoreland
<input type="checkbox"/> Butler	<input type="checkbox"/> Elk	<input type="checkbox"/> Lebanon	<input type="checkbox"/> Pike	<input type="checkbox"/> Wyoming
<input type="checkbox"/> Cambria	<input type="checkbox"/> Erie	<input type="checkbox"/> Lehigh	<input type="checkbox"/> Potter	<input type="checkbox"/> York
<input type="checkbox"/> Cameron	<input type="checkbox"/> Fayette	<input type="checkbox"/> Luzerne	<input type="checkbox"/> Schuylkill	<input type="checkbox"/> Statewide
<input type="checkbox"/> Carbon	<input type="checkbox"/> Forest	<input type="checkbox"/> Lycoming	<input type="checkbox"/> Snyder	
<input type="checkbox"/> Centre	<input type="checkbox"/> Franklin	<input type="checkbox"/> McKean	<input type="checkbox"/> Somerset	

Does your company have off-route or emergency delivery fees? Yes No (Specify amounts below):

\$ _____ Same Day Weekday Fee \$ _____ Same Day Weeknight Fee \$ _____ Same Day Weekend Fee \$ _____ Furnace Startup Fee

Does your company require a minimum delivery? Yes No

Minimum delivery: _____ gallons Fee if not met: \$ _____

LOW-INCOME HOME ENERGY ASSISTANCE PROGRAM VENDOR AGREEMENT

Vendor Name and Address

Vendor Number

VENDOR COPY

Federal I.D. Number

Telephone Number

E-mail Address

This Agreement is entered into for the purpose of facilitating the provision of Low-Income Home Energy Assistance Program (LIHEAP) benefits to low-income households through the delivery of fuel from the vendor to the LIHEAP beneficiary who is a customer of the vendor. By signing this agreement, vendors agree to participate in all additional programs that distribute LIHEAP funds for which LIHEAP clients may be eligible, and to participate in both the LIHEAP cash and crisis programs.

The _____ (herein referred to as the "vendor") certifies that it is not currently under suspension or debarment by the Commonwealth of Pennsylvania, any other state, or the federal government.

The vendor cannot enter into any subcontracts under this agreement with other subcontractors who are currently suspended or debarred by the Commonwealth or federal government. If any vendor enters into any subcontracts under this agreement with any subcontractors who become suspended or debarred by the Commonwealth or federal government during the term of this agreement or any extensions or renewals thereof, the Commonwealth shall have the right to require the vendor to terminate such subcontracts.

The vendor agrees that it shall be responsible for reimbursing the Commonwealth for all necessary and reasonable costs and expenses incurred by the Office of the Inspector General relating to an investigation of the vendor's compliance with the terms of this or any other agreement between the vendor and the Commonwealth which results in the suspension or debarment of the vendor.

Vendors will adhere to LIHEAP policy and procedures as defined in the LIHEAP State Plan and will report any discovery of fraud and address any questions regarding participation in the LIHEAP to the LIHEAP Project Manager. A copy of the current LIHEAP State Plan can be obtained online at: <http://www.dpw.state.pa.us/servicesprograms/liheap>.

The vendor agrees to the following conditions in order to receive energy assistance payments through the Commonwealth of Pennsylvania:.

1. To cooperate with the Department of Public Welfare (DPW) by providing information on fuel usage and cost for LIHEAP households:
 - a) Deliverable fuel vendors must provide a metered delivery ticket for all crisis deliveries. Metered delivery tickets will contain the vendor's name and address, the date and time of delivery, the purchaser's name and address, product identification, the driver's signature or employee number, the delivery vehicle's permanently assigned company truck number, the price per gallon and the volume in terms of gallons to the nearest one-tenth of a gallon.
 - b) Vendors will provide all requested information established in DPW policies and procedures. Vendors will submit all information within 30 calendar days of the date a crisis benefit was authorized. All information must be sent to the appropriate agency, as designated by DPW, via mail, fax, or scanning. Vendors will not receive payment if all information is received on or after the 31st day a crisis delivery was authorized. LIHEAP recipients cannot be billed for services as a result of a vendor's failure to comply with billing requirements in this agreement.
 - c) Deliverable fuel vendors and utility companies must retain all documents related to LIHEAP payments and deliveries for 4 years in an orderly and retrievable manner.
2. To apply the full payment amount of each LIHEAP benefit approved by DPW to the respective account of each LIHEAP recipient whom the vendor serves.
3. To charge a LIHEAP household according to the requirements below.
 - a) The cash price normally charged for energy delivered, not a credit price.
 - b) The same amount a non-LIHEAP household would be billed for an identical delivery, except for additional discounts that may be required by established DPW policies and procedures.
 - c) Public utilities that operate Customer Assistance Programs, CAP, will apply the LIHEAP cash component benefits to the customer's account in full:
 1. to resolve any past due CAP payments,
 2. to the current CAP payment, and
 3. any remaining funds will be credited to future CAP payments.CAP payment is defined as the amount the customer is required to pay under the terms of a utility's CAP agreement.
4. To not discriminate against any eligible household in regard to terms and conditions of sale, credit, delivery service or price, nor treat adversely any household receiving energy assistance because of such assistance.
5. To promptly notify the LIHEAP Project Manager whenever discrepancies in approved fuel applications are found (for example, oil being authorized for a residence serviced 100% by coal) or when the vendor is aware of any potentially fraudulent activity.
6. To apply all payments paid by DPW (for both Cash Component and Crisis Component benefits) on behalf of the customer against that customer's heating costs, subject to subparagraphs "a" through "h" below, and to not use any such funds for security deposits or late payments or other finance charges.
 - a) Late payment charges must be frozen at the amount they are at the time notification of eligibility for LIHEAP (energy assistance) benefits is received by the vendor, and may not be increased for the remainder of the LIHEAP program year; i.e., the date that applications for LIHEAP benefits are no longer accepted.
 - b) Vendors are holding, on DPW's behalf, federal money for the benefit of recipient customers. Vendors are prohibited from using LIHEAP funds for purposes other than home heating. This requirement does not supersede the provisions of the Federal Bankruptcy Act, 11 U.S.C., Section 366.

- c) Cash component payments received on behalf of a LIHEAP customer will be used to cover customer fuel purchases only, and will be available as a credit to the customer to meet additional fuel costs, including resolution of a subsequent fuel crisis, until they are exhausted, or until expiration of the state fiscal year (June 30) following the end of the state fiscal year in which LIHEAP benefits were authorized. Cash grant funds are to be used for fuel purchases only, and cannot be used for repairs (except as described under "d" and "e" below) or for service maintenance contracts.
 - d) If a household receives benefits from the cash component and subsequently applies for crisis benefits, any credit which the household may have with the vendor, including but not limited to LIHEAP cash component benefits, will be used for resolution of the crisis.
 - e) LIHEAP crisis component benefits may be used for energy supply shortage emergencies to provide fuel to a household that is out of fuel or is in imminent danger of being without fuel, or to restore home-heating service to a household that is without heat due to termination of the main or second source of heat by a utility company. Such benefits may include reconnect fees, off-hour delivery charges, or minimal costs (i.e., \$50 or less) to restart the furnace. An eligible household may also receive crisis benefits for weather related emergencies, including the purchase of a new heating system, the repair of an existing heating system, pipe thawing services and the repair of broken windows, fuel lines, or the water heating system, if funding is unavailable through LIHEAP Weatherization. Additionally, crisis component payment for deliverable fuels (oil, coal, etc.) may not be used for unpaid balances, maintenance contracts or finance charges. The amount of a crisis benefit is the minimum amount needed to resolve the crisis. For deliverable fuels, the amount needed to resolve the crisis would be the amount of fuel needed to fill the tank up to the maximum crisis amount. If for any reason, the amount of crisis benefits authorized is in excess of the minimum amount needed to resolve the crisis, the excess must be returned to the Department within 48 hours after the basis for return is known.
 - f) Vendors that accept crisis payments based on utility termination notices or based on reconnection of utility service must agree to maintain ongoing utility service to such households for no less than 30 calendar days from the date of the resolution of the crisis. With regard to crisis payments made pursuant to any grants approved during the Public Utility Commission winter termination procedure referred to in §601.62(ii)(A) of Appendix B of the LIHEAP State Plan, the earliest allowable termination date is 30 days following the resolution of the crisis or May 1, whichever is later.
 - g) In cases in which an eligible LIHEAP household has no present utility service or deliverable fuel supply, a LIHEAP crisis grant tendered to the utility must be accepted as the basis for reconnection of service or for providing a fuel delivery.
 - h) Payment is only guaranteed for LIHEAP grants approved and authorized by DPW or its representatives.
7. To return funds as required, by check, within 48 hours after the basis for return is known, in instances where a customer's whereabouts are unknown or a customer changes vendors, dies or departs the area serviced by the vendor, or receives a duplicate payment, unless otherwise specified in this agreement. The information must be provided as indicated on the refund form issued by DPW. Checks shall be made payable to the Commonwealth of Pennsylvania and forwarded to: DEPARTMENT OF PUBLIC WELFARE, BUREAU OF COMMONWEALTH ACCOUNTING, PENNSYLVANIA OFFICE OF THE BUDGET, COMPTROLLER OPERATIONS, 55 WALNUT STREET, 9th FLOOR, HARRISBURG, PA 17101.
 8. If a security deposit was erroneously paid with LIHEAP funds, or a billing error is detected, the vendor shall contact the LIHEAP Project Manager for appropriate action.
 9. If it is determined that a LIHEAP overpayment has occurred due to vendor error, the vendor is responsible for reimbursement from the vendor's funds, not the customer's account. Vendor error includes, but is not limited to; the vendor failing to provide appropriate or accurate customer account information, non-equitable pricing practice, failure to provide credit balance information, failure to provide service that the LIHEAP funds were sent for, and/or using a communal account for LIHEAP funds.
 10. DPW is authorized to recoup past due LIHEAP balances from vendors by debiting any current or future LIHEAP payment to the vendor for an amount equal to the outstanding unrefunded balance that is due to DPW from the vendor. A record of the balance of funds owed is established by DPW when a vendor error has occurred or a vendor has received a payment on behalf of a client who has subsequently moved to another county and is no longer a customer of the vendor. The vendor must return these funds to DPW. DPW will send the vendor up to three notices requesting payment of the funds. If the vendor has failed to respond after the third notice, the amount of the balance of funds owed to DPW will be deducted from the vendor's next payment(s) until the funds are repaid. The vendor acknowledges that DPW will reduce vendor payments by the amount of the balance of funds owed to allow for the expeditious collection of these debts.
 11. To review customer accounts annually at the end of the LIHEAP program year and identify funds that will be returned to DPW. LIHEAP funds are available for use during a two-year period, which includes the year of receipt and the year immediately following. All LIHEAP funds which have not been expended on or before June 30 of the year immediately following the LIHEAP Program year in which benefits were authorized must be returned to DPW by July 31 of that year. DPW will, on an annual basis, notify the vendors of the need to identify these accounts and request return of the funds. Any LIHEAP funds discovered through the annual review as defined in paragraphs 7, 8, and subparagraph 6e must be returned within 48 hours of discovery.
 12. To return all funds not expended on LIHEAP clients at least 91 days before filing for bankruptcy.
 13. To present for review or reproduction, records maintained by the vendor concerning overall pricing, conditions of sale, credit, and delivery of service, upon request by DPW for audit or investigation purposes, as provided in this agreement.
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(Signature) (Position) (Date)

(Company Name)

Please check all types of energy your company provides:

Electric Fuel Oil Coal Natural Gas Kerosene Propane or Bottled Gas Wood/other

Is your company a regulated utility? Yes No

Which counties does your company do business in? (Please Check)

<input type="checkbox"/> Adams	<input type="checkbox"/> Chester	<input type="checkbox"/> Fulton	<input type="checkbox"/> Mercer	<input type="checkbox"/> Sullivan
<input type="checkbox"/> Allegheny	<input type="checkbox"/> Clarion	<input type="checkbox"/> Greene	<input type="checkbox"/> Mifflin	<input type="checkbox"/> Susquehanna
<input type="checkbox"/> Armstrong	<input type="checkbox"/> Clearfield	<input type="checkbox"/> Huntingdon	<input type="checkbox"/> Monroe	<input type="checkbox"/> Tioga
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<input type="checkbox"/> Bedford	<input type="checkbox"/> Columbia	<input type="checkbox"/> Jefferson	<input type="checkbox"/> Montour	<input type="checkbox"/> Venango
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<input type="checkbox"/> Blair	<input type="checkbox"/> Cumberland	<input type="checkbox"/> Lackawanna	<input type="checkbox"/> Northumberland	<input type="checkbox"/> Washington
<input type="checkbox"/> Bradford	<input type="checkbox"/> Dauphin	<input type="checkbox"/> Lancaster	<input type="checkbox"/> Perry	<input type="checkbox"/> Wayne
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<input type="checkbox"/> Cambria	<input type="checkbox"/> Erie	<input type="checkbox"/> Lehigh	<input type="checkbox"/> Potter	<input type="checkbox"/> York
<input type="checkbox"/> Cameron	<input type="checkbox"/> Fayette	<input type="checkbox"/> Luzerne	<input type="checkbox"/> Schuylkill	<input type="checkbox"/> Statewide
<input type="checkbox"/> Carbon	<input type="checkbox"/> Forest	<input type="checkbox"/> Lycoming	<input type="checkbox"/> Snyder	
<input type="checkbox"/> Centre	<input type="checkbox"/> Franklin	<input type="checkbox"/> McKean	<input type="checkbox"/> Somerset	

Does your company have off-route or emergency delivery fees? Yes No (Specify amounts below):

\$ _____ Same Day Weekday Fee \$ _____ Same Day Weeknight Fee \$ _____ Same Day Weekend Fee \$ _____ Furnace Startup Fee

Does your company require a minimum delivery? Yes No

Minimum delivery: _____ gallons Fee if not met: \$ _____

LANDLORD STATEMENT

CLIENT:	CASE NO.:	DATE:
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Dear Landlord:

The person listed above has applied for an energy assistance grant and stated that he/she rents a unit from you at

This office is requesting your assistance in verifying this rental information. It will enable us to determine his/her eligibility for an energy assistance grant. Please complete the following questions. If you have any questions, please call the LIHEAP Hotline at 1-866-857-7095.

1. Does the applicant rent a unit from you at the above address? <input type="checkbox"/> Yes <input type="checkbox"/> No	
2. Does the rent include heat? <input type="checkbox"/> Yes <input type="checkbox"/> No	3. Amount of Monthly Rent _____
4. Is this a subsidized housing unit (HUD, Section 8)? <input type="checkbox"/> Yes <input type="checkbox"/> No	5. Number of Occupants _____
6. Is the rent cost a fixed percent of your tenant's income? <input type="checkbox"/> Yes <input type="checkbox"/> No	
7. Describe the Unit: <input type="checkbox"/> Apartment <input type="checkbox"/> House <input type="checkbox"/> Mobile Home <input type="checkbox"/> Room Note: A room may include a private bathroom, board, kitchen or bathroom use on shared basis, light housekeeping facilities	
8. Main Source of Heat: <input type="checkbox"/> Electric <input type="checkbox"/> Fuel Oil <input type="checkbox"/> Natural Gas <input type="checkbox"/> Kerosene <input type="checkbox"/> Propane or Bottled Gas <input type="checkbox"/> Coal <input type="checkbox"/> Wood <input type="checkbox"/> Other _____	
9. Does the tenant pay the utility company for the electricity that runs the heating system? <input type="checkbox"/> Yes <input type="checkbox"/> No	
10. Is there a relationship between you and the tenant? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, what is the relationship? _____	

Thank you for helping to process your tenant's application.

Landlord Signature _____

Landlord Address _____

Landlord Telephone _____

Date _____

DECLARACIÓN DEL ARRENDADOR

CLIENTE:	CASO NRO.:	FECHA:
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Estimado arrendador:

La persona que se menciona anteriormente solicitó un subsidio de asistencia para energía e indicó que usted le alquila una vivienda/unidad ubicada en la siguiente dirección

Nuestra oficina necesita su colaboración para verificar esta información de alquiler. Esto nos permitirá determinar la elegibilidad del solicitante para recibir un subsidio de asistencia para energía. Le agradeceremos que responda a las siguientes preguntas.

Si tiene alguna pregunta, llame a la línea directa de LIHEAP al 866-857-7095.

1. ¿Usted le alquila una vivienda/unidad al solicitante ubicada en la dirección antes indicada? Sí No

2. ¿El alquiler incluye los gastos de calefacción? Sí No

3. Cantidad del alquiler mensual _____

4. ¿Se trata de una unidad de vivienda subsidiada (HUD, Section 8)? Sí No

5. Número de ocupantes _____

6. ¿El costo del alquiler es un porcentaje fijo de los ingresos de su inquilino? Sí No

7. Describa la vivienda/unidad: Apartamento Casa Casa móvil Habitación
Nota: Una habitación puede incluir un baño privado, pensión, o uso compartido del baño o cocina, e instalaciones para tareas domésticas leves

8. Fuente principal de calefacción: Electricidad Aceite combustible Gas natural Querosén
 Gas propano o envasado Carbón Leña Otro _____

9. ¿Paga el inquilino a la empresa de servicios públicos por la electricidad que se usa para operar el sistema de calefacción? Sí No

10. ¿Existe alguna relación entre usted y el inquilino? Sí No
En caso afirmativo, ¿qué tipo de relación? _____

Le agradecemos su ayuda para procesar la solicitud de su inquilino.

Firma del arrendador _____

Dirección del arrendador _____

Teléfono del arrendador _____

Fecha _____

LIHEAP PROGRAM REFUND


VENDOR NAME AND ADDRESS

VENDOR NUMBER

USE THIS FORM TO PROVIDE DATA NEEDED TO ENSURE PROPER CLIENT CREDIT FOR REFUND

SEND TO: **DEPARTMENT OF PUBLIC WELFARE
BUREAU OF COMMONWEALTH ACCOUNTING
PENNSYLVANIA OFFICE OF THE BUDGET
COMPTROLLER OPERATIONS
555 WALNUT ST., 9TH FLOOR
HARRISBURG, PA 17101**

IF YOU HAVE QUESTIONS - CALL THE LIHEAP VENDOR HOTLINE AT 1-877-537-9517.


If you have more than one vendor number, use the number under which the original payment was made.

CLIENT INFORMATION	AMOUNT BEING REFUNDED	PROGRAM YEAR OF PAYMENT BEING REFUNDED	PROGRAM COMPONENT (CHECK ONE)			REASON FOR REFUND
			CASH	CRISIS	SUP.	
INDIVIDUAL NUMBER						
CLIENT NAME (Last, First, M.I.)						
ADDRESS (Include Street, City, State)						
INDIVIDUAL NUMBER						
CLIENT NAME (Last, First, M.I.)						
ADDRESS (Include Street, City, State)						
INDIVIDUAL NUMBER						
CLIENT NAME (Last, First, M.I.)						
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INDIVIDUAL NUMBER						
CLIENT NAME (Last, First, M.I.)						
ADDRESS (Include Street, City, State)						
INDIVIDUAL NUMBER						
CLIENT NAME (Last, First, M.I.)						
ADDRESS (Include Street, City, State)						

SIGNATURE (VENDOR)

DATE
PWEA 37 9/10

DCED/DPW CRISIS INTERFACE REFERRAL FORM

PART A - To be completed by CAO or Crisis Contractor

Client Name		Individual Number		County	
Client Address (Include Street, City, State & Zip code)					
Telephone (Work Number)		Telephone (Home Number)		Alternate (Number)	
Total Occupants In Household	No. 0-2 yrs.	No. 3-5 yrs.	No. 6-59 yrs.	No. 60 yrs. or older	No. Disabled

Annual Income \$	Income Levels: (Check One)				
	Under 75% poverty level: <input type="checkbox"/>	75-100% poverty level: <input type="checkbox"/>	101-115% poverty level: <input type="checkbox"/>	116-125% poverty level: <input type="checkbox"/>	126-135% poverty level: <input type="checkbox"/>

Owner/Landlord Name	Building Type (Check One) Single Family <input type="checkbox"/> Multi Family <input type="checkbox"/> Mobile home <input type="checkbox"/>	Telephone Number
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Owner/Landlord Response to Crisis:

Fuel Types (Mark as 1st and 2nd)

Natural Gas Fuel Oil Coal Wood Propane Kerosene Electric

Is there currently fuel available to the dwelling Yes No

Delivery Source (Mark as 1st and 2nd)

Forced Air Hot Water Steam Wood Stove Gravity Space Heater

Other (Explain)

Heating Vendor Name	Telephone Number	Has a Heating Contractor verified nature of the crisis? <input type="checkbox"/> Yes <input type="checkbox"/> No
If yes, name if different heating contractor	Telephone Number	Nature of the crisis and/or needed repair
How are you heating your home at present time?		Do you need auxiliary heat, i.e., an electric heater? <input type="checkbox"/> Yes <input type="checkbox"/> No
Is temporary shelter available? <input type="checkbox"/> Yes <input type="checkbox"/> No	Referred to DCED by:	Date <input type="checkbox"/> AM <input type="checkbox"/> PM

PART B - To be completed by Weatherization provider: (Check off Code)

Weatherization Code:	DPW Data Entry Code:	Date Referral Received	Date Completed
<input type="checkbox"/> D Repair of heating system	<input type="checkbox"/> P <input type="text"/>	Name of Contractor	
<input type="checkbox"/> E Loan of auxiliary heater	<input type="checkbox"/> Q <input type="text"/>		
Date of Loan: <input type="text"/>		Date Referred to Temporary Shelter	
<input type="checkbox"/> F Repair of gas or other fuel lines	<input type="checkbox"/> R <input type="text"/>	If referral is rejected: (Explanation)	
<input type="checkbox"/> G Replacement of heating system	<input type="checkbox"/> S <input type="text"/>		
<input type="checkbox"/> H Repair of hot water heating system	<input type="checkbox"/> T <input type="text"/>	Agency Name	
<input type="checkbox"/> I Pipe thawing service	<input type="checkbox"/> U <input type="text"/>		
<input type="checkbox"/> J Repair of broken window	<input type="checkbox"/> V <input type="text"/>		
<input type="checkbox"/> K Loan of blanket	<input type="checkbox"/> W <input type="text"/>	_____ Authorized Signature Date	



pennsylvania

DEPARTMENT OF PUBLIC WELFARE

Commonwealth of Pennsylvania
Department of Public Welfare

**LOW-INCOME HOME ENERGY ASSISTANCE PROGRAM (LIHEAP)
ELECTRONIC FUNDS TRANSFER
APPLICATION FORM**

Complete all fields on this application and attach a voided check. **This application cannot be processed if submitted without a voided check.**

Vendor Name _____ Legal Entity _____

Vendor's Financial Coordinator _____ FEIN Number _____

Telephone Number _____ LIHEAP Vendor Number(s) _____
(13 digits)

The Name of the Bank Receiving the Deposit _____

ABA Transit Routing Number _____

Vendor's Bank Account Number _____

Type of Authorization: Start Cancellation Change

Type of Account: Checking Savings

I hereby authorize the Commonwealth of Pennsylvania to post payments into the financial account referenced above. I understand that I am responsible for the validity of the information on this form. If the EFT transmission fails, I would like payment by check to be mailed to the address below:

Company Name _____

Street _____

City and State _____

Zip Code _____

County _____

Vendor's Signature or
Signature of Authorized Officer of Vendor

Date

MAIL APPLICATIONS TO: LIHEAP
 P.O. Box 2675
 Harrisburg, PA 17105
 Attention: N. Silks