

# ENERGY ASSISTANCE PROGRAM

Mail-in Form (page 1 of 2)

**PLEASE PRINT ALL INFORMATION, fill in each blank**

Head of Household:	Date of Birth:
Address:	Phone: (      )
City:	IN, Zip:
Social Security Number:	Email address:
How many people live in this household (including yourself):	

Below list all people currently living in your household, **including YOURSELF**.

Please use the following race code: African American (B) White (W) Multi-Racial (M) Native American (N) Asian or Pacific Islander (A)

Ethnicity: Hispanic or Latino (H) Non-Hispanic or Non-Latino (N)

Full Name (for additional names, please use separate sheet)	Gender (m or f)	Date of Birth	Last Grade completed	Disabled Yes or No	Social Security Number	Health Ins Yes or No	Race	Ethnicity

**Place an (X) beside those items that apply to your household.**

( ) Live in Single Family House	( ) Live in Mobile Home
( ) Live in apartment or townhouse	( ) Live in Condominium
Own Home or Buying Home ( )	Renting Home ( )

**If renting, indicate monthly rent you pay: \$**

I receive HUD or Section 8 Rent Assistance or live in Public Housing: Yes ( ) No ( )
Is electric included in rent: Yes ( ) No ( ) (if yes, lease needs to state this)
Is heating included in rent: Yes ( ) No ( ) (if yes, lease needs to state this)

**Indicate which fuel is used to heat your home:**

Natural Gas ( ) Oil ( ) LP Gas ( ) Electric ( ) Wood ( ) Coal ( ) Kerosene ( )
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## Energy Assistance Program

### Mail-in Form (Page 2 of 2)

List all household members that are veterans: \_\_\_\_\_

**Place an (X) beside all categories that apply to your household:**

Two Parents ( ) Single Parent ( ) Other: \_\_\_\_\_

Migrant ( ) Seasonal Farm Worker ( ) Farmer ( )

Do you receive food stamps? Yes ( ) No ( ) Amount per month: \$ \_\_\_\_\_

Is any **family** member (not necessarily in household) an employee of REAL Services? Yes \_\_\_ No \_\_\_

(Name: \_\_\_\_\_) This does **NOT** disqualify you from receiving an EAP benefit \_\_\_\_\_

**ALL OF THE FOLLOWING MUST BE SENT WITH YOUR APPLICATION; otherwise your application CAN NOT BE PROCESSED!**

**Copies of Social Security cards for ALL HOUSEHOLD MEMBERS. Or another official document with SS#. Only necessary if you have not previously applied for EAP.**

**Proof of income** for the past 12 months from each household member (see included list of sources of income.

**Copy of your rental lease** (handwritten note NOT sufficient)

**Recent electric bill (preferably a copy)**

**Recent heating bill (preferably a copy)**

**A delivery statement** from your fuel dealer if you use heating fuel, other than electric or gas

Has your house been weatherized by Real Services in the last 10 years? Yes ( ) No ( )

Use the enclosed envelope to send all information requested, along with this application, add your return address, affix 2 - 44cent stamps and return immediately to ( *EAP is NOT providing postage for return envelopes*: **EAP, Real Services, Inc, P. O. Box 1835, South Bend, IN 46634**

Please sign below, indicating that all information enclosed herein and documentation provided by you is correct and that you give EAP permission to sign the application form for you, which will be prepared from the information submitted by you on this form.

With your signature you give permission to your fuel/electric provider to share your utility usage and payment history.

With your signature you give permission to REAL Services, Inc. to use your information for research and evaluation purposes. The use of information will be conducted with a maximum respect for the confidentiality of the information contained in this application.

\_\_\_\_\_  
(Client Signature)

\_\_\_\_\_  
(Date)

**If you have any questions about this form, please call EAP at 1-800-225-3367 or (574)232-6501**

Client survey, please detach and return with your application (**you do NOT have to complete this survey to receive assistance**):

Please mark your answer with an X

The application process is: easy \_\_\_\_\_ difficult \_\_\_\_\_

It is easy to reach the staff: yes \_\_\_\_\_ no \_\_\_\_\_

I found it easy to talk with Energy Assistance staff: yes \_\_\_\_\_ no \_\_\_\_\_

Energy Assistance staff has followed up to request missing information: yes \_\_\_\_\_ no \_\_\_\_\_

The Energy Assistance payment is of benefit to my household: yes \_\_\_\_\_ no \_\_\_\_\_

The moratorium protecting my household from disconnection from Dec 1<sup>st</sup> through March 15<sup>th</sup> is of benefit to my household: yes \_\_\_\_\_ no \_\_\_\_\_

Other comments: