



August 11 & 12, 2010

St. Cloud

Minnesota

St. Cloud

Civic Center

FFY2011

Application Documents

Part 2. Household Information

INCLUDING YOURSELF, LIST ALL HOUSEHOLD MEMBERS.

Household member names First Name, Middle Initial & Last Name	Social Security Number (required)	Date of Birth MM/DD/YYYY	Race	Hispanic Y/N	Sex M/F	Disability Y/N	Years Of School	Have Income Y/N
1. (self)		/ /						
2.		/ /						
3.		/ /						
4.		/ /						
5.		/ /						
6.		/ /						
7.		/ /						
8.		/ /						

Attach a separate sheet if necessary for any additional household members.

Race: A=Asian B=Black or African American I=American Indian or Native Alaskan
O= Native Hawaiian or Other Pacific Islander W= White or Caucasian

Disability: a physical or mental impairment that substantially limits one or more major life activities.

Is anyone in your household currently a board member or employee of this agency? Yes No
How many people in your household had income in the past 3 months? _____

SOURCES OF INCOME AND OTHER ASSISTANCE (Check all that apply for your household)

<input type="checkbox"/> Wages	<input type="checkbox"/> Social Security or Social Security Disability	<input type="checkbox"/> Diversionary Work (DWP)
<input type="checkbox"/> Self-Employment/Farm Income	<input type="checkbox"/> Supplemental Security Income (SSI)	<input type="checkbox"/> MFIP
<input type="checkbox"/> Rental Income	<input type="checkbox"/> Long/Short-term Disability	<input type="checkbox"/> Food Support (is not income)
<input type="checkbox"/> Unemployment Compensation	<input type="checkbox"/> Retirement Income	<input type="checkbox"/> General Assistance (GA)
<input type="checkbox"/> Workers' Compensation	<input type="checkbox"/> Pension/Annuity (including quarterly and annual)	<input type="checkbox"/> Child or Spousal Support
<input type="checkbox"/> Interest or Dividend Income	<input type="checkbox"/> Earned Income Credit (not counted as income)	<input type="checkbox"/> Other _____
<input type="checkbox"/> Contract for Deed Interest	<input type="checkbox"/> Tribal Bonus or Per Capita Payments	<input type="checkbox"/> No Income (see Instructions)
<input type="checkbox"/> Veterans' Benefits	<input type="checkbox"/> MN Supplemental Aid (MSA)	

**Send Copies of Proof of Gross Income
for the Past 3 Complete Months
for all household members**

except wages for children in grades K-12

If self employed send a copy of your
Federal tax return

Your application will be delayed if you
do not include proof of income

**Applications must be signed
and received by May 31, 2011**

If you sign application in:	Send Proof of income for the months of:
Aug. 2010	May, June, July 2010
Sept. 2010	June, July, August, 2010
Oct. 2010	July, August, Sept., 2010
Nov. 2010	Aug., Sept., Oct., 2010
Dec. 2010	Sept., Oct., Nov., 2010
Jan. 2011	Oct., Nov., Dec., 2010
Feb. 2011	Nov., Dec., 2010, Jan., 2011
March 2011	Dec, 2010, Jan., Feb, 2011
April 2011	Jan., Feb., March, 2011
May 2011	Feb., March, April, 2011

For EAP, you must not exceed these income guidelines for 3 months
(See *Instructions* for Weatherization Income Eligibility Guidelines):

Household	
Size	Income
1	\$5,655
2	\$7,395
3	\$9,135
4	\$10,875
5	\$12,615
6	\$14,355

Part 3. Housing Information

Type of Housing:

- House Apartment/Condo
- Townhouse Mobile Home
- Duplex Triplex
- Fourplex Other _____

How long have you lived in your current home? _____

Do you own or are you buying your home? Yes No

What do you pay every month for your mortgage? \$ _____

Homeowners: Are you having problems with your furnace? Yes No

Describe problem: _____

(Keep our number and call us if you have furnace problems)

Are you self employed? Yes No Do you operate a business in your home? Yes No Do you rent out part of your home to anyone? Yes No If yes, explain: _____

Answer these questions if you Rent: What do **you pay** every month for rent: \$ _____

Do you have a rent subsidy from the government or live in subsidized housing? Yes No

Is your heat included in your rent? Yes No Is electricity included in your rent? Yes No

Landlord's name _____ Phone _____ Address _____

Part 4. Heat Sources (Electricity is only a heat source when used to heat one or more rooms.)

Put "1" by the **heating** fuel you use the most and "2" by all other heating fuel you use in your home.

Oil Propane/LP Wood Pellets Municipal Steam

Natural Gas Electricity Corn Other Biofuel St. Paul Dist. Heating

Would you like 30% of your grant sent to your electric company? Yes No

WHAT COMPANIES SUPPLY HEAT AND ELECTRICITY TO YOUR HOME?

	Heating No. 1	Heating No. 2	Electric
Company name:			
Name on Account:			
Account number:			

SEND THE MOST RECENT COPIES OF YOUR HEAT AND ELECTRIC BILLS OR FUEL RECEIPT WITH THIS APPLICATION

If you heat with wood, pellets, corn or other biofuel, answer the next 3 questions:

1. How many bedrooms are in your home? _____

(Circle the percent of heat from wood, corn, pellets, other.)

2. Do you cut or grow your own? Yes No

10%	20%	30%	40%	50%	60%	70%	80%	90%	100%
-----	-----	-----	-----	-----	-----	-----	-----	-----	------

3. What percent of your heat does this supply? (use table)

Use sometimes	Half of the time	Almost Always	All
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If you are not registered to vote, would you like a voter registration card? Yes (You do not have to answer this question)

Part 5. Local Questions

Part 6. Cold Weather Rule Protections

If you receive energy assistance, you pre-qualify for Cold Weather Rule protection from October 15 to April 15. You must call your energy companies to get this protection. The Cold Weather Rule helps restart your service for the heating season and stop the energy companies from shutting off your heat between October 15 and April 15. You must make and keep a payment plan to stay protected. Energy assistance does not replace what you need to pay.

Please answer these questions and take the steps needed based on your answers.

I did contact my energy companies and have payment plans. If *No*, contact your energy companies right away to make payment plans. YES NO

I did contact my energy companies to sign up for their discount programs. If *No*, call your energy companies today to find out what they offer (Not all energy companies have discount programs).

Does anyone in your home have an illness that requires heat and/or electricity?
If *Yes*, you may need to submit a doctor's statement to your energy companies.

To get all these protections, you must contact your energy companies and make and keep a payment plan. If you miss a payment, you lose your protection and you could lose your heat.

Part 7. Consent and Signature for October 1, 2010 to September 30, 2011

1. I give my consent for my heating and electric companies to give data about my account and energy use to the Minnesota Department of Commerce (DOC) and DOC's contractors for the Energy Assistance and Weatherization Programs and for the Conservation Improvement Program.
2. I also allow the Social Security Administration and the Minnesota Department of Human Services and its agencies to share data concerning my Social Security Number and public benefits received within the last year for eligibility for benefits with DOC and DOC's contractors for the Energy Assistance and Weatherization Programs.
3. I allow Minnesota Energy Assistance Program to:
 - Contact my employer to verify my income.
 - If I rent, to contact my landlord to confirm my residency and/or heating source.
4. I allow my local Energy Assistance Program provider to contact me for outreach and referral.
5. I allow DOC and the Minnesota Community Action Partnership to share data for the community action information system.
6. My signature below affirms the data in this application is correct. I agree to share this data, as stated above. I know:
 - I may have to prove my statements.
 - I may be held civilly or criminally liable under federal or state law for knowingly making false or fraudulent statements.
 - I have rights under the energy programs. I have received a copy of "Your Rights and Responsibilities."
 - I may appeal agency decisions about my benefits.
 - I understand that filling out this application does not guarantee that my household will receive assistance.

Signature:	Date:
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**We must receive your application within 60 days of the date signed and no later than May 31, 2011.
(Funds may not last, apply early)**

Part 2. Household Information

INCLUDING YOURSELF, LIST ALL HOUSEHOLD MEMBERS.

Household member names First Name, Middle Initial & Last Name	Social Security Number (required)	Date of Birth MM/DD/YYYY	Race	His-panic Y/N	Sex M/F	Dis-ability Y/N	Years Of School	Have Income Y/N
1. (self)		/ /						
2.		/ /						
3.		/ /						
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How many people in your household had income in the past 3 months? _____

SOURCES OF INCOME AND OTHER ASSISTANCE (Check all that apply for your household)

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<input type="checkbox"/> Workers' Compensation	<input type="checkbox"/> Pension/Annuity (including quarterly and annual)	<input type="checkbox"/> Child or Spousal Support
<input type="checkbox"/> Interest or Dividend Income	<input type="checkbox"/> Earned Income Credit (not counted as income)	<input type="checkbox"/> Other _____
<input type="checkbox"/> Contract for Deed Interest	<input type="checkbox"/> Tribal Bonus or Per Capita Payments	<input type="checkbox"/> No Income (see Instructions)
<input type="checkbox"/> Veterans' Benefits	<input type="checkbox"/> MN Supplemental Aid (MSA)	

IF THERE IS NO CHANGE OF INCOME SINCE LAST YEAR YOU DO NOT NEED TO SEND PROOF OF INCOME

If your household income has changed, contact the agency listed on the front of this application for instructions.

Applications must be signed and received by May 31, 2011

If you sign application in:

Send Proof of income for the months of:

Aug. 2010

May, June, July 2010

Sept. 2010

June, July, August, 2010

Oct. 2010

July, August, Sept., 2010

Nov. 2010

Aug., Sept., Oct., 2010

Dec. 2010

Sept., Oct., Nov., 2010

Jan. 2011

Oct., Nov., Dec., 2010

Feb. 2011

Nov., Dec., 2010, Jan., 2011

March 2011

Dec, 2010, Jan., Feb, 2011

April 2011

Jan., Feb., March, 2011

May 2011

Feb., March, April, 2011

For EAP, you must not exceed these income guidelines for 3 months (See *Instructions* for Weatherization Income Eligibility Guidelines):

Household

Size	Income
1	\$5,655
2	\$7,395
3	\$9,135
4	\$10,875
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- House Apartment/Condo
- Townhouse Mobile Home
- Duplex Triplex
- Fourplex Other _____

How long have you lived in your current home? _____

Do you own or are you buying your home? Yes No

What do you pay every month for your mortgage? \$ _____

Homeowners: Are you having problems with your furnace? Yes No

Describe problem: _____

(Keep our number and call us if you have furnace problems)

Are you self employed? Yes No Do you operate a business in your home? Yes No Do you rent out part of your home to anyone? Yes No If yes, explain: _____

Answer these questions if you Rent: What do **you pay** every month for rent: \$ _____

Do you have a rent subsidy from the government or live in subsidized housing? Yes No

Is your heat included in your rent? Yes No Is electricity included in your rent? Yes No

Landlord's name _____ Phone _____ Address _____

Part 4. Heat Sources (Electricity is only a heat source when used to heat one or more rooms.)

Put "1" by the **heating** fuel you use the most and "2" by all other heating fuel you use in your home.

Oil Propane/LP Wood Pellets Municipal Steam

Natural Gas Electricity Corn Other Biofuel St. Paul Dist. Heating

Would you like 30% of your grant sent to your electric company? Yes No

WHAT COMPANIES SUPPLY HEAT AND ELECTRICITY TO YOUR HOME?

	Heating No. 1	Heating No. 2	Electric
Company name:			
Name on Account:			
Account number:			

SEND THE MOST RECENT COPIES OF YOUR HEAT AND ELECTRIC BILLS OR FUEL RECEIPT WITH THIS APPLICATION

If you heat with wood, pellets, corn or other biofuel, answer the next 3 questions:

1. How many bedrooms are in your home? _____

(Circle the percent of heat from wood, corn, pellets, other.)

2. Do you cut or grow your own? Yes No

10%	20%	30%	40%	50%	60%	70%	80%	90%	100%
-----	-----	-----	-----	-----	-----	-----	-----	-----	------

3. What percent of your heat does this supply? (use table)

Use sometimes	Half of the time	Almost Always	All
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If you are not registered to vote, would you like a voter registration card? Yes (You do not have to answer this question)

Part 5. Local Questions

Part 6. Cold Weather Rule Protections

If you receive energy assistance, you pre-qualify for Cold Weather Rule protection from October 15 to April 15. You must call your energy companies to get this protection. The Cold Weather Rule helps restart your service for the heating season and stop the energy companies from shutting off your heat between October 15 and April 15. You must make and keep a payment plan to stay protected. Energy assistance does not replace what you need to pay.

Please answer these questions and take the steps needed based on your answers.

I did contact my energy companies and have payment plans. If *No*,
contact your energy companies right away to make payment plans. YES NO

I did contact my energy companies to sign up for their discount programs. If *No*,
call your energy companies today to find out what they offer (Not all energy
companies have discount programs).

Does anyone in your home have an illness that requires heat and/or electricity?
If *Yes*, you may need to submit a doctor's statement to your energy companies.

To get all these protections, you must contact your energy companies and make and keep a payment plan. If you miss a payment, you lose your protection and you could lose your heat.

Part 7. Consent and Signature**For the October 1, 2010 to September 30, 2011 program year**

1. I give my consent for my heating and electric companies to give data about my account and energy use to the Minnesota Department of Commerce (DOC) and DOC's contractors for the Energy Assistance and Weatherization Programs and for the Conservation Improvement Program.
2. I also allow the Social Security Administration and the Minnesota Department of Human Services and its agencies to share data concerning my Social Security Number and public benefits received within the last year for eligibility for benefits with DOC and DOC's contractors for the Energy Assistance and Weatherization Programs.
3. I allow Minnesota Energy Assistance Program to:
 - Contact my employer to verify my income.
 - If I rent, to contact my landlord to confirm my residency and/or heating source
4. I allow my local Energy Assistance Program provider to contact me for outreach and referral.
5. I allow DOC and the Minnesota Community Action Partnership to share data for the community action information system.
6. My signature below affirms the data in this application is correct. I agree to share this data, as stated above. I know:
 - I may have to prove my statements.
 - I may be held civilly or criminally liable under federal or state law for knowingly making false or fraudulent statements.
 - I have rights under the energy programs. I have received a copy of "Your Rights and Responsibilities."
 - I may appeal agency decisions about my benefits.
 - I understand that filling out this application does not guarantee that my household will receive assistance.

Signature:	Date:
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**We must receive your application within 60 days of the date signed and no later than May 31, 2011.
(Funds may not last, apply early)**

Your Rights and Responsibilities

PRIVACY NOTICE

Also known as the Tennesen Warning

Privacy Act Provisions: Federal and state law require us to tell you about your rights and responsibilities before we collect and use information about you that is classified as private or confidential. This form provides you with important information that complies with the federal Privacy Act of 1974, 5 USC section 552a (e) (3) and the Minnesota Government Data Practices Act, Minn. Stat. §13.04 subd. 2.

Please read this *Privacy Notice* carefully before completing and signing the *Minnesota Energy Programs Application*, and keep this *Privacy Notice* in your records for future use. This *Privacy Notice* applies to the Energy Assistance Program (EAP), Weatherization Assistance Program (WAP) and Conservation Improvement Program (CIP), also known as Energy Assistance Programs.

Why do we collect the information on the application?

We will use your information to research, evaluate and administer the energy assistance programs.

We need the information:

- To know you from other individuals.
- To see if you qualify for assistance.
- To allow us to get federal or state funds for the assistance you receive.
- To meet federal or state reporting requirements.

What happens if you do not give us the information?

You have the right to not give us the information we ask for; however, if you do not provide the information, you may not be able to receive services, help with energy bills or your services may be delayed.

Who may see this information?

Staff working in the following agencies or companies who need access to the application information to do their jobs in connection with the Energy Assistance, Weatherization and Conservation Improvement Programs may see and share information related to your energy assistance application:

- Local Energy Program Service Providers under contract with the Minnesota Department of Commerce.
- Energy Program auditors as required by OMB circulars.
- Minnesota Departments of Administration, Commerce, Employment and Economic Development, Human Services, Revenue and the Office of Enterprise Technology.
- United States Departments of Health and Human Services and Energy.
- Minnesota Public Utilities Commission.
- Minnesota Legislative Auditor.
- Minnesota Attorney General's Office, as needed for litigation purposes.
- Your energy vendor for affordability and Energy Assistance Programs.
- Federal and State law enforcement authorities, as needed for litigation purposes.
- Other agencies or entities as allowed by federal or state law.
- Entities and individuals listed on the Minnesota Energy Programs Application, Part 7. Consent and Signature.
- Minnesota Community Action Partnership.
- United States Social Security Administration.

Why do we collect Social Security Numbers?

We use Social Security Numbers in the administration of the energy assistance programs, weatherization assistance and conservation improvement programs to assure that eligible applicants and their household members receive only allowable benefits. Federal law allows us to require you to disclose your Social Security Number in order to process your application and to prevent, detect and correct fraud and abuse. AUTHORITY: Section 205(c)(2)(C)(i) of the Social Security Act, 42 U.S.C. § 405(c)(2)(C)(i). The primary applicant is required to provide their verifiable Social Security Number in order to process your application. The Social Security Number of other household members will assist us in processing your application more quickly.

Why do we ask for information about your race?

This is voluntary information. It is compiled and recorded for statistical purposes only. The program can not discriminate for reason of race or ethnic background, religion, gender, sexual orientation or political affiliation.

What if you think the facts in your file are wrong?

Talk to your Energy Assistance Program (EAP) Service Provider about what you think is wrong in your file.

What happens if you give false information?

The Energy Assistance Programs or the Minnesota Department of Commerce may check and verify any of the information you give. You may be held civilly or criminally liable under federal or state law for knowingly making false or fraudulent statements on your application.

You have these responsibilities:

You must tell us if you:

- Received help with your energy bills earlier this winter.
- Move to a new address (tell us within 30 days of the move).
- Change your fuel dealer or gas or electric companies.

You must pay your fuel bills. This program will pay only part of your bills. You must pay the rest.

You have certain rights to get help:

You have the right:

- To apply again if you get turned down.
- To apply for more help if you need it.
- To know what the rules are and how we decide what help you get.
- To receive a response within a reasonable time of submitting all information.
- To appeal within 30 days after you are sent the results of your application if:
 - You are turned down or receive a denial letter and you think we used the wrong facts to make the decision.
 - You do not receive the help you were promised.

How do you complain?

If you think your energy payment was not what it should be, or you did not get the services you thought you would, you may contact the local EAP Service Provider listed on the application. If you are not satisfied with their answer, you may write an appeal letter to the local EAP Service Provider. Keep a record of their address and telephone number.

If you are not satisfied with their response to your appeal, write to:

Appeals Officer
Energy Assistance Program
Minnesota Department of Commerce
85 East 7th Place, Suite 500
St. Paul, MN 55101-2198

If you feel you have been treated differently because of your color, race, national origin, religion, sex, age, marital status, political beliefs, or physical, mental or emotional disability, write to one of the following:

Minnesota Department of Human Rights
190 East 5th Street, Suite 700
St. Paul, MN 55101

-OR-

U.S. Department of Health and Human Service
Office for Civil Rights, Region V
233 North Michigan Avenue, Suite 240
Chicago, IL 60601

Ask for Assistance:

Call the local EAP Service Provider listed on the application to request the application in large print or Spanish. If you do not understand the information in this document, call the local EAP Service Provider listed on the application and ask for assistance.

INSTRUCTIONS FOR COMPLETING

2010-2011 MINNESOTA ENERGY PROGRAMS APPLICATION

These instructions will help you complete your application for 2010-2011 Energy Assistance Programs. This application is also used to apply for Weatherization Assistance Programs and the Conservation Improvement Program. The instructions also provide you with information about Cold Weather Rule Protection.

The Minnesota Energy Programs Application is available in large print and Spanish by asking for them from your Service Provider.

To apply for Energy Assistance Programs, you must send us:

- The application** with all questions answered and the last page signed and dated.
- Copies of **proof of income** for each household member for the past three months .
- A copy of your last **heating bill** and your last **electric bill you received**.
- A copy of your last fuel receipt if you have delivered fuel.

Failure to provide required documents may result in delay or denial of your application.

PART 1. Personal Information: Fill in your Social Security Number (SSN), name, address, phone number, and contact information. If the **primary household member/applicant** does not provide a verifiable SSN, your application cannot be processed. A SSN exception may be allowed for religious objections with documented proof of membership in a recognized sect or division.

Authorized Representative: An "Authorized Representative" is someone you give permission (in writing) to act for you. This person will get all of your mail for this program if you include their address on the application.

PART 2. Household Information: Fill in all of the information for everyone living in your household. ALL people living in the home are household members if they share the kitchen or other living areas in the home. Live-in Care Providers may be excluded as household members with documentation from a health care provider that daily medical care is required.

The Social Security Number for other persons in the household is requested (optional). Non-custodial parents may include their minor children under age 18 as household members.

Sources of Income and Other Assistance:

- Mark (x) all Sources of Income for all members of your household.
- Report income, any and all money paid in the last 3 months, to each household member.
- Attach copies of proof of income for each person living in the household for the previous 3 full calendar months before the month you apply.

Proof of Income by type:

- **Employed:** Check stubs or a written statement signed by employer stating gross wages.
- **MFIP, DWP, MSA, GA:** Letter showing monthly grant award.
- **Child Support, Alimony:** Checks, printout from the child support office, bank deposits or a note signed by the payer stating the amount and dates of received payments.
- **Disability Payments, Veteran's Benefits, Workers' Compensation, Social Security, RSDI and SSI:** Award letters, bank statements showing direct deposits or copy of the check(s).
- **Unemployment Compensation:** Unemployment statement or weekly benefit computer printout from https://www1.uimn.org/ui_applicant/applicant/login.do or award letter.
- **Self Employed, Farm, and Rental Income:** Last year's Federal Tax Return. If you did not file Federal Taxes last year call your Service Provider to get the form you need.
- **Interest, Dividend:** Bank statements or your IRS-1099 or IRS 1040.
- **Retirement Income:** Benefit check(s) or a statement or an award letter.
- **Pensions and annuities:** Benefit check(s) or a statement or an award letter.
- **No Income:** If your households has **no income**, call your EAP service provider for a **no income form** to complete and send it with your application.

(Please send copies of proofs of your income. Originals will not be returned.)

PART 3. Housing Information. Mark the type of housing you live in, how long you have lived in your current home, whether you own or rent and your monthly payment. You are a homeowner if you own, are buying your home, have a home mortgage or “contract for deed.” If you are a **renter**, tell us if you receive a housing subsidy from the government, whether you pay heat or electricity, and your landlord’s name, phone number and address.

PART 4. Heating Sources:

- Put “1” by the heating fuel you use the most and “2” by all other heating fuel used in your home.
 - If your home is heated with more than one heating source, mark all boxes that apply.
 - **If you use Electric heat as a heating source**, it must provide most or all the heat to one or more rooms (excluding bathrooms) or provide heat to the entire home. Electric is not a heat source if just running a furnace or the thermostat.
 - Wood, corn, pellet or other biofuel users, tell us the number of bedrooms in your home, whether you cut or grow your own wood, corn, pellets or other biofuel and how much of your heat it provides.
 - Enter the name of the heating and electric company providing energy to your home.
 - Include the name on the account **and** the account number.
-

PART 5. Local Questions: Please complete if the local Service Provider has questions.

PART 6. Cold Weather Rule Protections: is a regulation that prohibits public utility companies from disconnecting customers who are unable to pay for the energy used to heat their homes during the winter.

- If you use natural gas or electricity to heat your home or you need electricity to operate your thermostat or furnace fan, you **MUST** contact your natural gas or electric companies and arrange for a payment plan to be covered by the Cold Weather Rule.
 - Local EAP Service Provider staff can help you arrange a reasonable payment with your vendor.
-

PART 7. Permissions and Signature: Read the permissions carefully.

Go to the end of the application. Sign and date.

Your application must be received within 60 days of the date signed and no later than May 31, 2011.

- ANY missing information may delay decisions about your eligibility and benefit amount.
- The Energy Assistance Program cannot pay for all of your heating and electric bills.
- To pay your past due energy bills, arrange a payment plan with your vendor and make the payments.
- Your application will be processed as quickly as possible. You will be notified by letter when your application is completed.

Important Notice:

The Energy Assistance Program may provide eligible households with energy crisis assistance. Write down the name and phone number of your Service Provider and call them if:

- Your heating energy services are shut-off,
 - You are unable to get a delivery of fuel, or
 - You own your home and your furnace does not work.
-

Weatherization Income Eligibility Guidelines

You may be eligible for weatherization if your income exceeds the Energy Assistance Program limits. Weatherization is an energy efficiency program provided at no cost to you. Income eligibility for weatherization is 200% of the Federal Poverty Income Guidelines. Three-month income limits for Weatherization Assistance are:

* Guidelines are subject to change based on federal adjustments.

**Weatherization Program
Income Eligibility Guidelines***

Household	
Size	Income
1	\$ 5,415
2	\$ 7,285
3	\$ 9,155
4	\$11,025
5	\$12,895

INSTRUCTIONS FOR COMPLETING

2010-2011 MINNESOTA ENERGY PROGRAMS APPLICATION - RECERTIFICATION

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Authorized Representative: An "Authorized Representative" is someone you give permission (in writing) to act for you. This person will get all of your mail for this program if you include their address on the application.

PART 2. Household Information: Fill in all of the information for everyone living in your household. ALL people living in the home are household members if they share the kitchen or other living areas in home. Live-in Care Providers may be excluded as household members with documentation from a health care provider that daily medical care is required.

The Social Security Number for other persons in the household is requested (optional). Non-custodial parents may include their minor children under age 18 as household members.

SOURCES OF INCOME AND OTHER ASSISTANCE

You are **not required** to provide proof of your household's income this year unless it has changed. Because you receive a fixed income, EAP will process your application based on the information you provided to us previously.

If there is any change in your household's income, check all your income sources on the application and send copies of income documentation. If you have any questions, contact your Service Provider.

PART 3. Housing Information. Mark the type of housing you live in, how long you have lived in your current home, whether you own or rent and your monthly payment. You are a homeowner if you own, are buying your home, have a home mortgage or "contract for deed." If you are a **renter**, tell us if you receive a housing subsidy from the government, whether you pay heat or electricity, and your landlord's name, phone number and address.

PART 4. Heating Sources:

- Put “1” by the heating fuel you use the most and “2” by all other heating fuel used in your home.
- If your home is heated with more than one heating source, mark all boxes that apply.
- **If you use Electric heat as a heating source**, it must provide most or all the heat to one or more rooms (excluding bathrooms) or provide heat to the entire home. Electric is not a heat source if just running a furnace or thermostat.
- Wood, corn, pellet or other biofuel users, tell us the number of bedrooms, whether you cut or grow your own wood, corn, pellets or other biofuel and how much of your heat it provides.
- Enter the name of the heating and electric company providing energy to your home.
- Include the name on the account **and** the account number.

PART 5. Local Questions: Please complete if the local Service Provider has questions.

PART 6. Cold Weather Rule Protections: is a regulation that prohibits public utility companies from disconnecting customers who are unable to pay for the energy used to heat their homes during the winter. If you use natural gas or electricity to heat your home or you need electricity to operate your thermostat or furnace fan, you **MUST** contact your natural gas or electric companies and arrange for a payment plan to be covered by the Cold Weather Rule. Local EAP Service Provider staff can help you arrange a reasonable payment with your vendor.

PART 7. Permissions and Signature: Read the permissions carefully. **Go to the end of the application. Sign and date.**

Your application must be received within 60 days of the date signed and no later than May 31, 2011.

- ANY missing information may delay decisions about your eligibility and benefit amount.
- The Energy Assistance Program cannot pay for all of your heating and electric bills.
- To pay your past due energy bills, arrange a payment plan with your vendor and make the payments. Your application will be processed as quickly as possible. You will be notified by letter when your application is completed.

Important Notice:

The Energy Assistance Program may provide eligible households with energy crisis assistance. Write down the name and phone number of your Service Provider and call them if:

- Your heating energy services are shut-off,
- You are unable to get a delivery of fuel, or
- You own your home and your furnace does not work.

Weatherization Income Eligibility Guidelines

You may be eligible for weatherization if your income exceeds the Energy Assistance Program limits. Weatherization is an energy efficiency program provided at no cost to you. Income eligibility for weatherization is 200% of the Federal Poverty Income Guidelines.

Three-month income limits for Weatherization Assistance are:

* Guidelines are subject to change based on federal adjustments.

**Weatherization Program
Income Eligibility Guidelines***

Household	
Size	Income
1	\$ 5,415
2	\$ 7,285
3	\$ 9,155
4	\$11,025
5	\$12,895