2018 Home Energy Assistance Program Negligible / No Income Reported Form

Iress	s:	Street	Cit	y/Town	State	Zip Code	
۱.		Determination of I		•			
	Α.	Landlord Name:	-				
		Address: Telephone:	Weekly R	ent:	Monthly F	 Rent:	
		Amount of Rent Pa					
	C.	Describe Arrangem	ent with Landlor	rd:			
II.		Amount and source	ces of Income:				
		Previous Twelve			Previous Nine		
	ourc	ce (describe)			lescribe)		
III. ——		Anticipated Amou	nt and Source	of Income (f	or the next ni	nety days) Desc	ribe:
		******	THIS DOCUM	MENT MUS	T BE NOTO	 RIZED ********	
com	nple	y certify that the abo te and accurate. I ur t to defraud the Fede	ve description of nderstand that su	f my financial upplying false	situation and	arrangement with	my landlord ar
App	lica	nt Signature		Date	Notary		Date
****	****	This form must be	completed and	notarized b	efore the inta	ke worker can si	gn off********
	ke \	Worker		Date	Reviewe	r	Date