HOME ENERGY ASSISTANCE PROGRAM (HEAP/Fuel Assistance/ECIP)

DOCUMENT CHECKLIST and FORMS BUNDLE COVER SHEET

DOCUMENT CHECKLIST

INSTRUCTIONS: SSN and photo ID documentation must be uploaded into HEAP Cloud in the designated slots. All other documents that are needed for an application should be scanned in a bundle in the following order and uploaded as one attachment in HEAP Cloud. ***Note:*** Items 1-9 are required documents for all applications. Other documents are required on a case-by-case basis depending on the Household's situation.

1. ☐ HEAP Application (signed)
2. ☐ Permission to Share Personal Information
3. ☐ Income Worksheet
4. ☐ Odd Job Income Affidavit *(if applicable)*
5. ☐ Self-Employment Worksheet *(if applicable)*
6. ☐ Income Documentation (back-up)
7. ☐ Document Verification Form *(if applicable)*
8. ☐ Electric Utility Bill
9. ☐ LIAP Application
10. ☐ Minor Child(ren) Primary Residency Self-Declaration
11. ☐ File Notes
12. ☐ Reminder Form
13. ☐ Subsidized Housing Form
13. ☐ Lease Agreement or Landlord Affidavit (if applicable)

HEAP FORMS BUNDLE

The following forms are contained in the HEAP Forms Bundle.

Required for all Files

☐ HEAP Application
☐ Permission to Share Personal Information

Forms Pertaining to Income

☐ Income Worksheet
☐ Odd Job Income Affidavit
☐ Self-Employment Worksheet

Other Forms

☐ Document Verification Form
☐ Minor Child(ren) Primary Residency Self-Declaration
☐ File Notes
☐ Reminder Form
☐ Subsidized Housing Form
☐ HEAP Income Information Confidentiality Waiver

The following forms are not in the HEAP Forms Bundle and can be downloaded directly from the CAA Portal.

☐ Agreement to Stop Eviction
☐ Change of Address / Change of Product Form
☐ Landlord Affidavit
☐ HEAP Application Voided
☐ Waiver Request Form
☐ Benefit Return Form
☐ Denial Notification
☐ TANF Supplemental Credit Notification Void

APPLICANT INFORMATION

Provide the following data and forms will auto-populate.

PRIMARY APPLICANT

First Name _____ MI _____
Last Name _____
Service Address _____
Apt # _____
City State Zip _____
Mailing Address _____
City State Zip _____
Phone _____
Alternate Phone _____
Email _____

LIHEAP APPLICATION

HEAP Application ID _____
Application Date _____
Income Verification Period From: _____ mm/dd/yyyy
To: _____ mm/dd/yyyy

CAA

CAA Name _____
Mailing Address _____
City State Zip _____
CAA Phone _____
CAA Fax _____
CAA Email _____
Rep Name _____
Rep Phone _____
Rep Email _____
Intake Worker Name _____
Intake Worker Phone _____
Intake Worker Email _____

FUEL VENDOR

Vendor Name _____
Primary Fuel Type _____
Secondary Fuel Type _____