HOME ENERGY ASSISTANCE PROGRAM (HEAP)

WAIVER REQUEST

	CAA FIIOIIE.
CAA Address:	CAA Fax:
	CAA Email:
Applicant Name:	Date of Application:
Physical Address:	Application ID#:
City State Zip:	
INSTRUCTIONS: A Waiver Request is required for any deviation State Plan, or Handbook. Submit request and supporting docume 207-624-5780 (fax).	
Reason for Request:	
Actions/research CAA has completed to justify an exception:	
Identify documentation you are attaching as support:	
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Identify documentation you are attaching as support: CAA Representative Signature	Date
CAA Representative Signature	
	Date
CAA Representative Signature	
CAA Representative Signature	Date
CAA Representative Signature CAA Energy Director Signature	Date
CAA Representative Signature CAA Energy Director Signature MAINEHOUSING	Date DNLY Date Request Received:
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Prepared by MaineHousing Waiver Request HEAP08242020