

**\*\*Utility Hardship Assistance Application Template\*\***

---

**\*\*Applicant Information:\*\***

- Full Name: \_\_\_\_\_
- Address: \_\_\_\_\_
- City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_
- Phone Number: \_\_\_\_\_
- Email Address: \_\_\_\_\_
- Date of Birth: \_\_\_\_\_

---

**\*\*Household Information:\*\***

- Number of Household Members: \_\_\_\_\_
  - Names and Ages of Household Members:
    - 1. \_\_\_\_\_ (Age: \_\_\_\_\_)
    - 2. \_\_\_\_\_ (Age: \_\_\_\_\_)
    - 3. \_\_\_\_\_ (Age: \_\_\_\_\_)
    - 4. \_\_\_\_\_ (Age: \_\_\_\_\_)
- (Continue as necessary)

---

**\*\*Income Information:\*\***

- Total Monthly Household Income: \$ \_\_\_\_\_
  - Source(s) of Income (e.g., employment, benefits):
    - 1. \_\_\_\_\_
    - 2. \_\_\_\_\_
    - 3. \_\_\_\_\_
- (Continue as necessary)

---

**\*\*Utility Information:\*\***

- Utility Provider: \_\_\_\_\_
- Account Number: \_\_\_\_\_
- Type of Utility (e.g., gas, electric, water): \_\_\_\_\_
- Monthly Utility Bill Amount: \$ \_\_\_\_\_

---

**\*\*Reason for Assistance Request:\*\***

- Please explain the nature of your financial hardship:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

---

**\*\*Supporting Documents:\*\***

- Please attach copies of the following:
  - Proof of income (pay stubs, benefits statements)
  - Recent utility bill
  - Identification (driver's license, state ID)
  - Any additional supporting documentation

---

**\*\*Certification:\*\***

I hereby certify that the information provided in this application is true and accurate to the best of my knowledge. I understand that providing false information may result in disqualification from the utility hardship assistance program.

- Signature: \_\_\_\_\_
- Date: \_\_\_\_\_

---

**\*\*For Office Use Only:\*\***

- Application Received Date: \_\_\_\_\_

- Application Status: \_\_\_\_\_

- Notes: \_\_\_\_\_

- Approved Amount: \$\_\_\_\_\_

---

**\*\*Thank you for your application!\*\***