HOME ENERGY ASSISTANCE PROGRAM (HEAP)

HEAP APPLICATION UPDATE FORM

CAA Name:CAA Address:	CAA Phone: CAA Fax: CAA Email:
Primary Applicant: Current Phone:	Client Number: Email:
INSTRUCTIONS : Return completed and signed form to the CAA identified above. If Household has moved and is responsible for electric costs, a current utility/electricity bill must be provided. Additional documentation may be needed upon request.	
Check all that apply: Change of Address Change of Product Change of Vendor Account Info Change	
EFFECTIVE DATE OF CHANGE:	
Old Mailing Address: Cur (If moved/changed)	rent Mailing Address:
Old Physical Address: Cur (If moved)	rent Physical Address:
New Dwelling Information:	□ Does Not Apply
Owner Type (check one):	/n 🗌 Roomer / Boarder
Dwelling Type (check one):	artment Dobile / Manufactured Condo / Duplex
Did everyone in the household move? Yes No D	o you now live in subsidized housing? Yes No
Is heat included in rent? Yes No Is	electricity included in rent? Yes No
New Vendor Information:	□ Does Not Apply
Electric/Utility Company Name:	
Name on Electric/Utility Account:	
Electric/Utility Account Number:	*If moved and household is responsible for electric costs, copy of bill MUST be provided.
Fuel Vendor Name:	Location:
Name on Fuel Account:	Account # :
New Heating System Information:	Does Not Apply
Heating System Type: Furnace Boiler Stove Baseboar	d Other:
Heating System Location:	Fuel Tank Size:
Fuel Tank location (<i>check one</i>):	
Fuel Type: 🗌 Oil 🗌 Kerosene Propane Electri	c Pellets Natural Gas
□ Wood Size/Type:	□ Other:
Applicant Signature:	Date: