## HOME ENERGY ASSISTANCE PROGRAM (HEAP)

## MINOR CHILD(REN) PRIMARY RESIDENCE SELF-DECLARATION

CAA Name: CAA Address:	CAA Phone: CAA Fax: CAA Email:
Primary Applicant: Client Number:	Create/Intake Date:

## **APPLICANT (Custodial Parent/Guardian):**

I declare that I am the custodial parent/guardian for the minor child(ren) listed below and that said child(ren) reside in my home 50% or more of the time.

The non-custodial parent of the child(ren) pays me:		
(enter amount and check frequency)	weekly	🗆 biweekly 🛛 monthly

Child support is:

- Collected and issued by DHHS, Support Enforcement
- □ Paid/issued directly to me

Names of children this agreement applies to:				

Notes:		

Under penalty of perjury, I certify that the information I gave is true, correct, and complete to the best of my knowledge. I will provide additional documentation upon request. If I have knowingly given false, misleading, or incomplete information, I understand I may be subject to criminal prosecution, liable to MaineHousing for repayment of any benefits received, and/or risking my future eligibility for benefits.

Custodial Parent/Guardian Signature

Date