

HOME ENERGY ASSISTANCE PROGRAM (HEAP)
DOCUMENT CHECKLIST and FORMS BUNDLE COVER SHEET

DOCUMENT CHECKLIST

INSTRUCTIONS: Citizenship, Identity and SSN documentation must be uploaded to the corresponding Application File Type. All other documents that are required for the Application should be uploaded to Application File Type "Other".

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| <ul style="list-style-type: none"> 1. <input type="checkbox"/> HEAP Application (signed) 2. <input type="checkbox"/> Permission to Share Personal Information 3. <input type="checkbox"/> Self-Employment Worksheet 4. <input type="checkbox"/> Income Documentation (back-up) 5. <input type="checkbox"/> Electric Utility Bill 6. <input type="checkbox"/> LIAP Application | <ul style="list-style-type: none"> 7. <input type="checkbox"/> File Notes 8. <input type="checkbox"/> Reminder Form 9. <input type="checkbox"/> Lease Agreement or Landlord Affidavit |
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HEAP FORMS BUNDLE

The following forms are contained in the HEAP Forms Bundle.

Required for all Files

- HEAP Application
- Permission to Share Personal Information

Other Forms

- Reminder Form

Forms Pertaining to Income

- Self-Employment Worksheet

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

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| <ul style="list-style-type: none"> • HEAP Application Update Form • Landlord Affidavit • Waiver Request Form | <ul style="list-style-type: none"> • Benefit Return Form • File Notes |
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APPLICANT INFORMATION

Provide the following data and forms will auto-populate.

APPLICANT

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

CAA

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

HEAP APPLICATION

Application ID _____	_____
Application Date _____	_____
Application Received Date _____	_____

FUEL VENDOR

Requested Vendor Name _____	_____
Requested Fuel Type _____	_____
Secondary Fuel Type _____	_____