

HOME ENERGY ASSISTANCE PROGRAM (HEAP)
SELF-EMPLOYMENT INCOME WORKSHEET

CAA Name: _____ CAA Phone: _____
CAA Address: _____ CAA Fax: _____
_____ CAA Email: _____

Applicant: _____ Application Date: _____
Application ID: _____

INSTRUCTIONS: Use this Worksheet only when the Applicant cannot provide a federal tax return for the most recent or previous calendar year, or the Applicant's tax return does not show his/her self-employment and/or rental income.

Complete one form for EACH separate type of self-employment business.

****Documentation such as bank account statements, business ledgers, or accountant's records must be attached to this completed worksheet. Incomplete or ambiguous information will not be accepted.**

Name of Applicant with self-employment and/or rental income: _____

If rental income, address of rental property: _____

Description of business or trade: _____ Date business started: _____
mm/yyyy

Period covered by this worksheet (12 calendar months): From: _____ To: _____
mm/yyyy mm/yyyy

List monthly business income in the table below, only for months that the business was in operation.
(Enter \$0 if no income for that month. Do not enter \$0 for months prior to the start of the business).

<i>Month & Year Income Received Example: January 2025</i>	<i>Gross Amount Income Received Example: \$500.00</i>	<i>Month & Year Income Received Example: January 2025</i>	<i>Gross Amount Income Received Example: \$500.00</i>
	\$		\$
	\$		\$
	\$		\$
	\$		\$
	\$		\$
	\$		\$
Total Gross Income			\$

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.

Applicant/Business Owner Signature _____

Date _____