*<INSERT MAIL OUT DATE>*

*<INSERT LOCAL DISTRICT NAME, ADDRESS, PHONE and FAX NUMBER if applicable>*

*<INSERT RECIPIENT NAME, ADDRESS AND CASE NUMBER>*

Dear Temporary Assistance (TA) and/or Supplemental Nutrition Assistance Program (SNAP) Recipient:

In preparation for the 2024-2025 Home Energy Assistance Program (HEAP), we need updated information about your utility/heating situation. Providing your updated energy vendor information will ensure HEAP benefits are issued to your fuel or utility provider. Please call the number listed at the top of this letter if you have any questions when completing this form.

Please answer the questions below and return this form **WITH COPIES OF YOUR MOST RECENT HEAT AND/OR UTILITY BILLS** no later than **<insert return date>** to the address above or if your district participates in the NYDocSubmit, submit electronically by using the NYDocSubmit mobile application. For more information regarding the NYDocSubmit mobile application, please visit the Apple App Store or Google Play Store.

Daytime phone number \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Best time to be contacted \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**What is your current heating situation? Please select one of the three options listed below.**

[ ]  **1.** **My heat is included in my rent.**

Do you live in subsidized housing? [ ]  YES [ ]  NO

Do you pay an electric bill? [ ]  YES [ ]  NO

If yes, enter your electric company’s name and your account number:

Utility Company Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_­\_

Utility Account Number\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Is the electric bill in your name? [ ]  YES [ ]  NO

If no, enter the name on the bill \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

[ ]   **2. I live in someone else’s household, rent a room, or live in a hotel/motel.**

[ ]  **3.** **I pay for heat directly to a vendor.**

 Is the bill in your name? [ ]  YES [ ]  NO

If no, enter the name on the bill \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

What is your **main type** of heat? [ ]  Natural Gas [ ]  Electric [ ]  Propane [ ]  Oil

 [ ]  Kerosene [ ]  Coal [ ]  Wood or Wood Pellets

 [ ]  Other, list fuel type \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

For your main type of heat, list your vendor’s name and address, and your account number:

Heating Company Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Heating Company Address\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Account Number\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

If you heat with oil or kerosene, do you have a written service contract? [ ]  YES [ ]  NO