Minnesota Energy Resources 2017 Gas Affordability Program **Application Form**



Offered by Minnesota Energy Resources. Administered by The Salvation Army.

YOU MUST COMPLETE AND SIGN THIS FORM TO APPLY (PLEASE PRINT)

Customer Name(s) on Minnesota Energy Resources account/bill

Service address				
City	State	ZIP	Phone ()	
Minnesota Energy Reso	ources account number	MUST BE INCLUD	FD)	

The account number can be found under your name in the upper right corner of your bill. If you do not know your account number, contact Minnesota Energy Resources at 800-889-9508.

INCOME INFORMATION

Please include income from <u>ALL</u> sources (except food stamps) and for <u>ALL</u> household members.

What is your total yearly "take home" household income? \$

How many people live in your household?

Do you own or rent? OWN / RENT

By signing this document, I am applying for the Minnesota Energy Resources Gas Affordability Program. I understand that by doing so I am agreeing to the following:

• I agree that I have received a benefit from the Low Income Home Energy Assistance Program (LIHEAP) since October 1, 2016.

- I agree to allow Minnesota Energy Resources to use payment information in the evaluation of the program.
- I agree to allow The Salvation Army to obtain account information, including LIHEAP status, from Minnesota Energy Resources necessary to process this application for the 2017 Gas Affordability Program year.
- I understand I must make my monthly bill payment in order to stay in the program, to receive credit toward past due amounts and to prevent potential service disconnection.
- I understand that enrollment for the program is based on a first-come basis.
- I agree to notify Minnesota Energy Resources if there are changes in my income, household size, or if I move.
- I understand that enrollment in this program will automatically cancel me from any previous agreed upon payment plans including, but not limited to: Budget Billing, Automatic Payment, Cold Weather Rule, etc.

QUESTIONS? Call The Salvation Army (toll-free) at 888-733-8033.

All adults living in your household listed in the LIHEAP application must sign below.

Signature	Date	- 00
Signature	Date	
Signature	Date	
Signatura	Date	
Signature	Date	

MAIL TO: The Salvation Army, Gas Affordability Program, 2445 Prior Ave., Roseville, MN 55113

*If this application is not fully completed it will delay your enrollment in the program.