

Minnesota Energy Resources 2012 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)

Name(s) on Minnesota Energy Resources account _____

Service address _____

City _____

ZIP _____

Phone () _____

Minnesota Energy Resources account number (MUST BE INCLUDED)

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 ALL sources (except food stamps) and for ALL household members.

What is your total yearly household income? \$ _____

a year _____

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 Energy Assistance for the 2011-2012 Low Income Home Energy Assistance Program (LIHEAP) federal fiscal year.
- 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 2012 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 Plan, 10 Percent Plan, Inability to Pay Plan, 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 _____

Signature _____

Date _____

Signature _____

Date _____

Signature _____

Date _____

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

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