



North Brookfield  
Hearts for Heat

## CONFIDENTIAL APPLICATION FOR ASSISTANCE - 2012

<http://www.heartsforheat.org/NorthBrookfield/index.html>

**Applications will be reviewed after January 10, 2012.** To be considered for assistance, please mail completed form along with all requested documentation and receipts to the North Brookfield Hearts for Heat, P.O. 44, North Brookfield, MA 01535.

**Note:** To be considered an emergency distribution, all awarded assistance must be delivered by March 15<sup>th</sup>. Extensions can be made at the discretion of the board due to bad cold weather.

For more immediate questions, email [michelle@heartsforheat.org](mailto:michelle@heartsforheat.org).

Date of Application \_\_\_\_\_

### A. IDENTIFICATION

Name of Applicant: \_\_\_\_\_ Home Phone: \_\_\_\_\_

Legal residence: \_\_\_\_\_

Mailing Address (if Different) \_\_\_\_\_

Cell Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Own: _____	Rent: _____	<b>Type of Fuel (Circle One)</b>	Oil	Electric	Natural Gas
			Pellets	Cord Wood	Propane

Home Phone: \_\_\_\_\_ Number in Household: \_\_\_\_\_

Cell /Work Number: \_\_\_\_\_ Number of Dependents: \_\_\_\_\_

### B. REASON FOR REQUESTING ASSISTANCE: REQUIRED

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Check box**  Have you attached a copy of your current heating bill?  
Relevant documentation is required for processing application.

**IMPORTANT NOTE:** It is REQUIRED that you apply for aid through (WCAC) Worcester Community Action Council prior to seeking support from Hearts for Heat. WCAC assists home owners and renters with heating bills, past due balances, providing forgiveness credit, and setting up monthly payments. WCAC can be reached by calling (508) 754-1176 [ext. 145 or 147]

Failure to do so may affect the outcome of your Hearts for Heat application.

Have you applied to WCAC?  Yes  No Approved Amount: \$ \_\_\_\_\_

Outcome summary: \_\_\_\_\_ Remaining Balance: \$ \_\_\_\_\_

Have you applied to other fuel assistance programs?  Yes  No Approved Amount: \$ \_\_\_\_\_

Outcome summary: \_\_\_\_\_ Remaining Balance: \$ \_\_\_\_\_

**C. INCOME**

**Applicant**

**Household**

Gross income from all sources in the past 6 weeks:

\_\_\_\_\_

\_\_\_\_\_

Total adjusted gross income from the prior year's IRS 1040:

\_\_\_\_\_

\_\_\_\_\_

**D. MAJOR MONTHLY EXPENSES**

Rent/Mortgage (Principal, Interest, Taxes, and Insurance):

\_\_\_\_\_

\_\_\_\_\_

Car or Equipment Loan:

\_\_\_\_\_

\_\_\_\_\_

Credit Card Payment:

\_\_\_\_\_

\_\_\_\_\_

Other: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Other: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**E. MEDICAL EXPENSES:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**F. BANK ACCOUNTS:**

**1. Name and Address of Banks:**

**Value of Account**

\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**2. Stocks, bonds, securities, etc:**

**Value of Account**

\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**3. Other personal property (includes vehicles, motorcycles, trailers, etc.):**

**Value of Account**

\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**G. ADDITIONAL INFORMATION:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**SIGNATURE OF APPLICANT:** \_\_\_\_\_ **DATE:** \_\_\_\_\_

**For Official Use Only:**  
\_\_\_\_\_  
\_\_\_\_\_