

Home Energy Assistance Program

Heating Equipment Clean and Tune Request for Benefit

Applicant Information

Application Date: _____

Case Number: _____

Applicant Name: _____

SSN: _____

Address: _____

Telephone Number: _____

Do you own your own home?

☐ Yes ☐ No

Have you owned your home longer than 12 months?

☐ Yes ☐ No

Is your primary heating equipment at least 12 months old?

☐ Yes ☐ No

Do you have a programmable thermostat?

☐ Yes ☐ No

Do you have a working carbon monoxide detector less than 5 years old? (if no, one will be installed)

☐ Yes ☐ NoHeating Source: ☐ Natural Gas Heat☐ Electric Heat☐ Fuel Oil☐ Kerosene☐ Propane/Bottled Gas☐ Wood/Wood Pellets☐ Coal or Corn☐ Other

Dates of last clean and tune and/or chimney cleaning: _____

Do you have a contract with an HVAC vendor?

☐ Yes☐ No

Does this contract include clean and tune services?

☐ Yes☐ No☐ N/A _____

Vendor Name: _____

Account Number: _____

Agency Use Section

Did the applicant receive a Regular HEAP benefit in the current program year?

☐ Yes☐ No

Has the applicant moved since receiving their Regular HEAP benefit?

☐ Yes☐ No

Only answer the following if the Regular benefit was paid on a Temporary Assistance (TA) or Supplemental Nutrition Assistance Program (SNAP) case:

Has the TA or SNAP case closed since the applicant received their Regular HEAP benefit?

☐ Yes☐ No☐ Pended

Start: _____

End: _____

☐ Denied

Reason: _____

☐ Approved Date: _____

Vendor Name _____

Vendor Number _____

Comments: _____

Worker Signature: _____

Date: _____

Supervisor Signature: _____

Date: _____