## **Reverend Doherty Fuel Fund**

Application for Heating Cost Assistance

Section								
1	Complete this section for the hea	d of household						
Name (Last,	First, Middle Initial)	Date o	f Birth					
		/	/					
Home Addre	ss (Street, Apt. Number, City, State & Zip C	ode)						
Mailing Address if different from above (Street, Apt. Number, City, State & Zip Code)								
Email Addres	SS	Phone Num	ber	Primary Residence Municipality				
		( )						
Section								
2	Select those that apply to you:							
☐ Renting	With Heat Included in Rent	☐ Other (ex	xplain)					
☐ Renting	With Heat NOT Included in Rent							
☐ Own my	primary residence							
Section								
3	What is your <i>primary</i> heating so	urce? (permanently in	stalled - not	"space" heaters)				
☐ Fuel Oil	☐ Kerose	ene		□ Wood				
☐ Natural	Gas 🗆 Propai	ne/Bottled Gas		☐ Other				
☐ Coal	☐ Blende	ed fuel						
Section								
4	Select any that apply to you:							
☐ Receive	shut off notice for gas   Currently out of fuel							
☐ Will run out of fuel within 15 days ☐ Main heat source			Explain					
	☐ Gas is shut off not working			2				
Section		8						
5	What utility company would fund	ds he dispersed to? (	nrimary or s	econdary heat source fuel provider)				
			Account Number					
Address (Street, City, State & Zip Code)			Name on Acc	count				
	• • • • • • • • • • • • • • • • • • • •							
Section								
_	Do you have a secondary source of heat in your home?							
6	Do you have a secondary source of	of heat in your home	e?					
6	Do you have a secondary source of ☐ YES If yes, exp	•	e?					

	_							
Section	Do you or any other mo	ember of vour hous	sehold receiv	ve anv utility subsidi	es on a regular basis			
7	(more than once a year)	on or jour nous		to unif utility substant				
•	☐ YES	If yes, explain:						
	□ NO	ii yes, explain.						
Section								
Section	Have you or any other	member of your ho	ousehold rec	eived a one-time util	ity subsidy? (once a			
8	Have you or any other member of your household received a one-time utility subsidy? (once a year or less)							
	☐ YES	If yes, explain:						
	□ NO							
Section	<del> </del>							
9	Have you or any other member of your household received benefit from the Reverend Doherty Fuel Fund within the past 5-years?							
	☐ YES	If yes, when:						
	□ NO	ii yes, when.						
C4:	List the people who live	a with you at this a	dduoss Incl	uda all abilduan & a	dulta Inaluda nalatad			
Section	roomers. Include all u	•						
10	applicant listed in Secti			dischold expenses. D	o not include the			
	Name (Last, First, Middle		Date of	Birth	elationship to You			
			/	/				
			/	/				
			,	,				
			/	/				
			/	/				
			/	/				
			/	/				
			/	/				
			/	/				
Section	Tell us about income (b	pefore taxes & dedu	ictions) for	ALL people in your	household. Include			
	money from: Employm							
12	Workers Compensation				·			
Nam	e of Person with Income	Income Source		Date of First Check	Monthly Amount			
		+						
My signatur	re on this application gives permi	ission to the Rorough of	Honesdale &/o	r it's annointees to verify a	ny information I have			
	n this application including but r							
-	orough of Honesdale &/or its app	-						
	ourposes. I authorize sharing of i							
	determining my household's eligi that if I am selected to receive be							
	vent that the Borough of Honesd							
	andom. I certify that all informat							
					,			
	D ' / 31			C. M				
	Print Name			Sign Name	Date			

## **Reverend Doherty Fuel Fund**

Checklist for Heating Cost Assistance

## Please use this checklist in conjunction with your application to ensure your application is complete.

Did you check Page 4 to confirm that you are eligible for assistance?				
Did you ensure that your primary residence is within the Borough of Honesdale?				
Did you fill out <u>ALL</u> required information clearly & completely?				
	your own heat, enclose the most recent bill for fuels, provide most recent bill or receipt of a			
If you are requesting payment to be sent to your secondary heating provider, enclose a copy of your primary AND secondary heating bills				
Enclose proof of income in the form of two (2) most recent paystubs, employer statement, etc.				
If you listed no sources of income or your income is less than the cost of your monthly basic living needs, enclose a statement explaining how your household pays for basic living needs (food, rent, etc.)				
Did you sign & date your application?				
When you have completed the checklist & the application, remit by mail to:				
	Borough of Honesdale Reverend Doherty Fuel Fund 958 Main Street Honesdale, PA 18431			
Or by email to:				

revdfund@gmail.com

Subject: Reverend Doherty Fuel Fund Application

All completed <u>applications</u>, <u>checklists & attachments</u> will be accepted by email, mail or dropped off at Borough Hall.

## **Reverend Doherty Fuel Fund**

2024 Eligibility Guidelines

The following are the requirements to be eleigible for receipt of benefit from the Reverend Doherty Fuel Fund

1) You must meet the following income requirements:

Household Size	Annual Household Income Limit			
1	\$18,735			
2	\$25,365			
3	\$31,995			
4	\$38,625			
5	\$45,255			
6	\$51,885			
7	\$58,515			
8	\$65,145			
For each additional person add \$6,630				

\* - all numbers are before taxes

- 2) You may rent/lease or own the dwelling at which you are requesting assistance.
- 3) The dwelling you are requesting heating assistance for MUST be your primary residence. Investment properties, rental properties, vacation homes, secondary homes, etc. are not eligible for assistance.
- 4) The dwelling you are requesting heating assistance for MUST be located within the Borough of Honesdale, Pennsylvania.
- 5) Your household will be ineligible to receive benefit this application period if a utility/heating bill for you or your household has been paid by the Reverend Doherty Fund two (2) times or more within the past two (2) calendar years.
- \* Meeting elegibility requirements does not guarantee receipt of benefit from the fund. In the event that the Borough of Honesdale receives more eligible applications than the dedicated fund can fulfill, recipients may be chosen at random.