

# 2011 Gas Affordability Program application form



Offered by CenterPoint Energy. Administered by the Energy CENTS Coalition.

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

Name(s) on account \_\_\_\_\_

Service address \_\_\_\_\_

City \_\_\_\_\_

ZIP \_\_\_\_\_

Phone (     ) \_\_\_\_\_

### CenterPoint Energy 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 CenterPoint Energy at 612-372-4727 or 1-800-245-2377.

### 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

What was your total household income for the past three months? \$ \_\_\_\_\_

How many people live in your household? \_\_\_\_\_ Do you own or rent? OWN / RENT \_\_\_\_\_

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

- I agree that I have received, qualified for, or will apply for Energy Assistance for the 2010–2011 Low Income Home Energy Assistance Program (LIHEAP) federal fiscal year, this heating season.
- I understand that if, after calculating my monthly payment, it is determined that my payment is already less than 6 percent of my annual household income, I will be ineligible for the 2011 GAP program.
- I agree to allow CenterPoint Energy to use payment information in the evaluation of the program.
- I agree to allow the Energy CENTS Coalition to obtain account information, including LIHEAP status, from CenterPoint Energy necessary to process this application for the new 2011 Gas Affordability Program.
- 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 service disconnection.
- I understand that enrollment for the program is based on a first-come basis.
- I agree to notify CenterPoint Energy if there are changes in my income or if I move.
- I understand that enrollment in this program will automatically cancel me from my Budget Plan enrollment or any other previously agreed upon payment plan.

CenterPoint Energy account number \_\_\_\_\_

There will be a delay if you do not include your account number.

**QUESTIONS? Call the Energy CENTS Coalition at 651-774-9010 or toll-free 1-888-774-9070**



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

Signature \_\_\_\_\_ Date \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

MAIL TO: Energy CENTS Coalition, 823 E 7th Street, Saint Paul, MN 55106