

# 2012 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 have received, qualified for, or will apply for Energy Assistance for the 2011–2012 Low Income Home Energy Assistance Program (LIHEAP) .
- If it is determined that my payment is already less than 4 percent of my annual household income, I will not be eligible for the 2012 GAP program.
- I allow CenterPoint Energy to use payment information to evaluate the program.
- I allow the Energy CENTS Coalition to obtain necessary account information from CenterPoint Energy, including LIHEAP status, to process my 2012 GAP application.
- 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.
- Enrollment in the program is based on a first-come basis.
- I will notify CenterPoint Energy if there are changes in my income or my address.
- Enrollment in this program will automatically cancel 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**