

If you think you qualify for the Home Energy Assistance Program (HEAP) based on the income eligibility table below, advise your VP by putting a note in the box in the lobby with your name and apartment number, stating that you think that you qualify for HEAP. HEAP outreach sessions will be scheduled for the week of April 21, 2008.

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Home Energy Assistance Program (HEAP) Eligibility

HEAP Eligibility is determined by whether the household income is below the current New York State Income guidelines that correspond to the household size and the household energy costs. HEAP may be able to offer a benefit even if heat and utilities are included in the rent or the applicant lives in subsidized housing and pays directly for heating costs.

Eligible households that have an energy related emergency, such as a power shutoff, less than ten days supply of heating fuel, or the household owned heating system is not working, may apply for emergency benefits at their local HEAP field offices located throughout the five boroughs or at the Department of Social Services.

- ▶ [HEAP Eligibility Table](#)
- ▶ [HEAP Homebound Unit \(Heat Line\)](#)
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Eligibility is based on household size and monthly income: These are estimates only

House hold	1	2	3	4	5	6	7	8	9	10	11
Income up to	\$1876	\$2454	\$3031	\$3609	\$4186	\$4763	\$4871	\$4980	\$5088	\$5196	\$5626

*For households with more than 11 people, the income limit is \$5,626 + \$435 for each additional person.

HEAP Homebound Unit

HEAT LINE: (212) 331-3150. Available from 9 AM to 5 PM, Monday through Friday.

The Heat Line program functions as the homebound unit for HEAP. The HEAP program is a federally funded program, which provides eligible households a grant toward their utilities, fuel purchase and boiler repair or replacement. Requests and referrals for a home visit can be made by contacting the Heat Line telephone number above.

In addition to HEAP services, the Heat Line staff verifies whether a customer has a medical hardship in the event a public utility is disconnecting services in a building. Utility disconnection often occurs as a result of a landlord not paying for the utilities, and can affect the hallway lights, elevators or the heating system. If there is someone living in the building with a medical hardship, the utility companies must contact the Heat Line to prevent the disconnection. Heat Line will verify the hardship within 30 days. **(back to top)**



Date: _____

Social Security Number: _____

Case Number: _____

Applicant's Name: _____

Applicant's Address: _____

**Home Energy Assistance Program (HEAP)
DOCUMENTATION REQUIREMENTS**

- WHEN YOU APPLY FOR HEAP ASSISTANCE IN PERSON YOU **MUST** PROVIDE PROOF FOR ALL ITEMS LISTED BELOW.
- IF YOU HAVE ALREADY APPLIED FOR HEAP ASSISTANCE, YOU **MUST** PROVIDE PROOF FOR THE ITEMS CHECKED BELOW. BRING THE PROOF NO LATER THAN _____ OR YOUR APPLICATION **MAY BE DENIED**.

ADDRESS (Where you now live)
You must provide one or more of the following:

<input type="checkbox"/> Current rent receipt with the name and address	<input type="checkbox"/> Utility Bill
<input type="checkbox"/> Copy of lease with address	<input type="checkbox"/> Mortgage payment books/receipts with address
<input type="checkbox"/> Water, sewage, or tax bill	<input type="checkbox"/> Homeowners insurance policy
	<input type="checkbox"/> Deed

ALL PEOPLE IN YOUR HOUSEHOLD
You must provide one or more of the following for each person in your household:

<input type="checkbox"/> Birth certificate	<input type="checkbox"/> Social Security card
<input type="checkbox"/> Baptismal certificate	<input type="checkbox"/> Driver's license
<input type="checkbox"/> School records	<input type="checkbox"/> Marriage certificate

VULNERABILITY
You must provide proof of vulnerability (children under 6 years of age, adults 60 years of age or older, or anyone with a permanent disability). To do so, you must provide one or more of the following for the vulnerable members of your household.

<input type="checkbox"/> Birth certificate	<input type="checkbox"/> Passport
<input type="checkbox"/> Copy of benefit check	<input type="checkbox"/> Driver's license
<input type="checkbox"/> Baptismal certificate with date of birth	<input type="checkbox"/> Written statement of eligibility for benefits
<input type="checkbox"/> Award letter	<input type="checkbox"/> Other _____

FUEL/UTILITY BILLS

- If you pay a fuel or utility bill, bring a copy of your most recent fuel/utility bill or a statement from your vendor.
- If you pay for neither heat nor utilities, bring a statement from your landlord that indicates heat and utilities are included in your rent.

INCOME
You must provide proof of income for all household members who receive any type of income, earned or unearned, including but not limited to:

<input type="checkbox"/> Pay stubs for the most recent four weeks	COPY OF MOST RECENT CHECK OR AWARD LETTER
<input type="checkbox"/> If self-employed or have rental income, business records for the most recent three months	
<input type="checkbox"/> Child support or alimony checks	
<input type="checkbox"/> Bankbook/dividend or interest statement	
<input type="checkbox"/> Statement from roomer/boarder	
<input type="checkbox"/> Other _____	
<input type="checkbox"/> Social Security/Supplemental Security Income (SSI)	
	<input type="checkbox"/> Veteran's Benefits
	<input type="checkbox"/> Pensions
	<input type="checkbox"/> Worker's Compensation/Disability
	<input type="checkbox"/> Verification of Unemployment Insurance Benefit amount
	<input type="checkbox"/> Educational Grants/Loans

RESOURCES (For emergency applications only)

<input type="checkbox"/> Cash	<input type="checkbox"/> IRA accounts
<input type="checkbox"/> Checking and/or savings account balances	<input type="checkbox"/> Lump sums from sale of property or insurance settlements.
<input type="checkbox"/> Stocks/bonds	<input type="checkbox"/> Other _____
<input type="checkbox"/> Time Deposit Certificates	

Depending on your circumstances, additional documentation may be required.

Return Information to: _____

If you have any questions, please call _____

Attention: _____