

Notice of Utility-Related Action

_____ County Department of Social Services

Customer's Name: _____

To: _____ (Utility)

Service Address: _____

TA Case #: _____

Account Number: _____

This is to inform you that for the above-named individual, the district will take the following action(s):

1. ARREARS ONLY (Non-TA, Non-SSI)

Make an arrears payment of \$_____ for the period _____ to _____. This individual is NOT in receipt of Temporary Assistance (TA) or Supplemental Security Income (SSI). Your company should proceed with its normal collection efforts for future bills.

2. ARREARS AND GUARANTEE (TA and SSI)

Make an arrears payment of \$_____ for the period _____ to _____ and guarantee payment of all future utility bills for a period of six months effective from _____ to _____.

2A. DIRECT VOUCHER (TA)

Send all future bills to this agency. This department will pay future utility bills as billed until the end of the guarantee period, or until you are notified of the termination of the indirect payment.

2B. DIRECT VOUCHER SUBJECT TO LIMIT (TA)

Send all future bills to this agency. This individual is in receipt of TA subject to a limit and this district will pay \$_____ per month until the end of the guarantee period, or until you are notified of the termination of the indirect payment.

3. DIRECT VOUCHER ONLY (TA)

Send all future bills to this agency. This department will pay future utility bills as billed until the termination of the indirect payment or until the individual's case is discontinued from TA.

4. DIRECT VOUCHER SUBJECT TO LIMIT ONLY (TA)

Send all future bills to this agency. This individual is in receipt of TA subject to a limit and this district will pay \$_____ per month until the termination of the indirect payment or until the case is discontinued from TA.

5. CHANGE OF ADDRESS

Please transfer service from _____ to _____, effective _____.

6. TERMINATION

Terminate indirect (vendor) payment for the above-named individual, effective _____.

Terminate 6 month guarantee for the above-named individual, effective _____.

Worker Name Printed: _____

Phone #: _____

Instructions For Notice Of Utility-Related Action

For utility arrears payments:

- If making a **utility arrears payment** for an individual **not on** TA or SSI, check and complete **option 1**. The company will proceed with its normal collection efforts for future bills.
- If making a **utility arrears payment** for an individual **on** TA or SSI, check and complete **option 2**. All previously outstanding monies owed the company by this individual shall be exempt from collection for as long as such individual continues to receive, or would become in need of, Temporary Assistance or Supplemental Security Income if the collection were made. The company will proceed with its normal collection efforts for future bills and provide the district with written notification should the above person fail to make payment and the company issues a notice of non-payment. Such notification will be made to the district at the same time the individual is issued a notice of non-payment.
- If then placing the individual on **direct voucher as billed** after a utility arrears payment, check and complete **option 2A in addition to option 2**.
- If then placing the individual on **direct voucher subject to limit** after a utility arrears payment, check and complete **option 2B in addition to option 2**.

For other utility actions:

- If placing an individual on **direct voucher as billed without** a utility arrears payment, check and complete **option 3**. The district will pay future utility bills as billed until the termination of the indirect payment or until the case is discontinued from TA.
- If placing an individual on **direct voucher subject to limit without** a 131-s arrears payment, check and complete **option 4**. The district will pay this amount for future utility bills until the termination of the indirect payment or until the case is discontinued from TA. Any additional amount not paid by this department is the sole responsibility of the individual and the company will proceed with normal efforts to collect this additional amount from the individual.
- For **change of address** complete **option 5**.
- For **termination of an indirect vendor payment** or **termination of a 6-month guarantee**, complete **option 6**.

Note: Districts are not required to utilize this form to notify the utility of the termination of an indirect vendor payment. If an end date to a 6-month guarantee has already been provided through the initial notice, a second notice is not required. Districts may utilize and send/transmit a separate termination notice.