

**2020-2021 HOME ENERGY ASSISTANCE PROGRAM
PRE-AUTOPAY REQUEST FOR VENDOR INFORMATION**

<INSERT MAIL OUT DATE>

<INSERT LOCAL DISTRICT NAME, ADDRESS AND PHONE NUMBER>

<INSERT RECIPIENT NAME, ADDRESS AND CASE NUMBER>

Dear Temporary Assistance (TA) or Supplemental Nutrition Assistance Program (SNAP) Recipient:

In preparation for the 2020-2021 Home Energy Assistance Program (HEAP), we need updated information about your utility/heating situation. Providing your updated energy vendor information will ensure HEAP benefits are issued to your fuel or utility provider. Please call the number listed at the top of this letter if you have any questions when completing this form.

Please answer the questions below and return this form **WITH COPIES OF YOUR MOST RECENT HEAT AND/OR UTILITY BILLS** no later than **<insert return date>** to the address above, or submit electronically by using the NYDocSubmit mobile application.

Daytime phone number _____ Best time to be contacted _____

What is your current heating situation? Please select one of the three options listed below.

1. My heat is included in my rent.

Do you live in subsidized housing? YES NO

Do you pay an electric bill? YES NO

If yes, enter your electric company's name and your account number:

Utility Company Name _____

Utility Account Number _____

Is the electric bill in your name? YES NO

If no, enter the name on the bill _____

2. I live in someone else's household, rent a room, or live in a hotel/motel.

3. I pay for heat directly to a vendor.

Is the bill in your name? YES NO

If no, enter the name on the bill _____

What is your **main type** of heat? Natural Gas Electric Propane Oil
 Kerosene Coal Wood or Wood Pellets
 Other, list fuel type _____

For your main type of heat checked above, list your vendor's name and address, and your account number:

Heating Company Name _____

Heating Company Address _____

Account Number _____

If you heat with oil or kerosene, do you have a written service contract? YES NO