

## EMERGENCY HOME HEATING ASSISTANCE PROGRAM

The Westminster Board of Selectmen has instituted an Emergency Home Heating Assistance Program (EHHAP) for eligible Westminster residents. Funding for the program is provided from monies available in the Giles Fund, as approved at the May 2, 2015 Annual Town Meeting. To be eligible, residents must have lived in Town for the past six months or longer, and must meet income eligibility guidelines established by the most current HUD low-income limits for the Westminster area. Assistance will be granted in the form of direct payment from the Town to suppliers of home heating fuel (including, oil, gas, coal, wood, etc.).

The EHHAP will be administered through the Emergency Home Heating Assistance Committee, appointed by the Board of Selectmen. Applicants must complete the attached application form and submit it to the Town Administrator, Town Hall, 11 South Street, Westminster MA 01473. Information provided will be kept confidential.

Funding for the Emergency Home Heating Assistance Program will begin on December 1, 2015.

**TOWN OF WESTMINSTER**  
**Emergency Home Heating Assistance Program**

**APPLICATION**

Applicant (person in household responsible for paying home heating costs):

\_\_\_\_\_

Address \_\_\_\_\_ Telephone # \_\_\_\_\_

List other members of household residing at above address more than 50% of the time and relationship to applicant:

Household Member	Relationship
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

1. Application must be completed and signed by the party responsible for paying home heating costs.
2. Applicant must have resided in Westminster for no less than six months as of the date of the application.
3. Awards are granted by the Home Heating Assistance Committee, and are based on income guidelines and criteria established by the Board of Selectmen. The HHAC reserves the right to prioritize at their discretion the applicant's award due to financial hardship.
4. Applicants may be required to submit documentation verifying financial resources and liabilities.
5. Approval is contingent upon applicant exhausting all other sources of fuel assistance prior to approval.

## Eligibility Requirements

Please answer the following questions:

I am responsible for paying the heating costs for the household listed above. Yes    No

I have resided in Westminster for the past six months, or longer. Yes    No

I meet the financial guidelines listed below. Yes    No

Number in family	1 Person	2 People	3 People	4 People	5 People	6 People
Income	\$46,100	\$52,650	\$59,250	\$65,800	\$71,100	\$76,350

Have you applied for fuel assistance? \_\_\_\_\_ If so, what is the current status? \_\_\_\_\_

My gross receipts from all sources of income in the preceding calendar year (including social security, pensions, other retirement allowances, wages, salaries, other compensation, net profit from business or profession, interest and dividends, rental income, capital gains, etc.)

\$ \_\_\_\_\_

List any/all assets, property, vehicles or collections:

\_\_\_\_\_

Who is your current heating vendor? \_\_\_\_\_

I certify under the pains and penalty of perjury that, to the best of my knowledge, the information provided in this application is true and accurate and that there is no understatement or misstatement of income or any other information on this application.

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

\* \* \* \* \*

For Office Use Only:

Action Taken:

\_\_\_\_\_  
\_\_\_\_\_

Home Heating Assistance Committee Signatures:

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_
5. \_\_\_\_\_