

Date: _____

Utility Assistance Narrative

Please complete this form to the best of your ability. Your case will be reviewed and if you fit the criteria for utility assistance, we will contact you for additional information. If you do not fit the criteria we will send you a letter notifying you. All applicants will not qualify for assistance.

Client: _____ Phone: _____

Please describe the circumstances that led you to fall behind on your utility bill:

What steps have been taken, or will be taken, to ensure that you will be able to afford your utilities going forward:

Please indicate the amount of money received from your income tax return this year:

\$ _____

Please indicate how those funds were spent:

Total household monthly income: \$ _____

Monthly Utility Bill: \$ _____ Amt. behind \$ _____