

# 2012 Gas Affordability Program Application Form

## YOU MUST COMPLETE AND SIGN THIS FORM TO APPLY

*(Please Print)*

Name(s) on account: \_\_\_\_\_

Service Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Phone: ( \_\_\_\_\_ ) \_\_\_\_\_

► **INCOME INFORMATION**

Please include income from **ALL** sources (except food stamps) and for **ALL** household members:

- What is your total yearly household income: \$ \_\_\_\_\_ Per Year
- What was your total household income for the past three months: \$ \_\_\_\_\_
- How many people live in your household: \_\_\_\_\_ Do you own or rent:  Own  Rent

**By signing this document, I am applying for the Gas Affordability Program (GAP). I understand that by doing so I am agreeing to the following:**

- I agree that I have received a Low Income Home Energy Assistance Program (LIHEAP) grant for the current heating season.
- I agree to allow Great Plains Natural Gas Co. (Great Plains) to use payment information in the evaluation of the program.
- I agree to allow West Central MN Communities Action, Inc. to obtain account information, including LIHEAP status, from Great Plains Natural Gas Co. necessary to process this application for the 2012 Gas Affordability Program year.
- If you fail to pay two consecutive monthly payments in full under the GAP, you will be terminated from the GAP and will be subject to Great Plains' regular collection practices including the possibility of disconnection.
- I understand that enrollment for the program is based on a first-come basis.
- Income information is handled confidentially through the third party vendor, West Central MN Communities Action, Inc.
- I agree to notify Great Plains if there are changes in my income, household size, or if I move.
- I understand that enrollment in this program will automatically cancel me from the Balanced Billing Plan enrollment or any other previously agreed upon payment plan.

► **GREAT PLAINS ACCOUNT NUMBER & CYCLE NUMBER** (Must be Included): \_\_\_\_\_

The account number can be found on the upper right side of your bill and the cycle number on the left side of your bill. If you do not know your account number or cycle number, contact Great Plains at 1-877-267-4764. There will be a delay if you do not include your account number.

► **QUESTIONS? Call Great Plains Natural Gas Co. at 1-877-267-4764 to answer your questions about the GAP program, or call West Central MN Communities Action, Inc. at 1-800-492-4805 for additional assistance or with questions regarding this application.**

All adults living in your household listed on the LIHEAP application must sign below.

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

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

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

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

**MAIL TO:** West Central MN Communities Action, Inc.  
 411 Industrial Park Boulevard  
 Elbow Lake, MN 56531