

HARVARD ENERGY ASSISTANCE TEAM

LOW-INCOME ENERGY ASSISTANCE GUIDELINES

A. ELIGIBILITY

The fund has been established to provide energy assistance for low-income Harvard residents.

Applicants must provide documentation of income earnings in order to be eligible to participate in this program. Income shall include all income such as pensions, interest from savings accounts, IRA's, stocks or bonds, etc. Submit copy of utility bill to be considered as well.

2023- 2024 Fuel Assistance Income Eligibility Chart Based on Gross Annual Income

Family Size (# of people in household)	Income Limit
1	\$40,095
2	\$54,230
3	\$68,365
4	\$82,500
5	\$96,635
6	\$110,770
7	\$124,905
8	\$139,040

Extraordinary circumstances (e.g. an unusual expense burden) will be considered.

B. APPLICATION PROCESS

A copy of documentation demonstrating participation in the Commonwealth of Massachusetts' Low Income Home Energy Assistance Program (if eligible) or other earnings records must accompany the application. Applications will be accepted **November 1, 2023 through March 31, 2024.**

All information received will be held in the strictest confidence.

C. DISTRIBUTION OF FUNDS

Funds will be disbursed on a rolling basis. Since funds are derived from volunteer contributions, no set dollar amount can be established.

The funds that are granted to applicants will be paid directly to the energy source provider: natural gas, heating oil, or electric company.

For further information, contact either:

CoA Director Debbie Thompson: 978.456.4120 or dthompson@harvard-ma.gov

Executive Assistant Julie Doucet: 978.456.4100x312 or jdoucet@harvard-ma.gov

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APPLICATION FOR ENERGY ASSISTANCE

Name(s) of Property Owner: _____

Address: _____

Mailing address if different from above: _____

Home Phone: _____ Cell Phone: _____

Names and ages of Household Residents: _____

Please attach copies of all sources of Gross Household Annual Income (Social Security, Unemployment, Pensions, Rental income, Child Support, etc.)

Attach documentation of participation in Massachusetts Low Income Home Energy Assistance Program (LIHEAP).

Heating Source (Please Circle): Natural Gas Heating Oil Electric Other
Attach a copy of most recent heating bill.

Please provide any additional information that you feel may be relevant: _____

Signature: _____

Date: _____

Submit to: HEAT, Town of Harvard, 13 Ayer Road, Harvard, MA 01451