FISCAL 2021-2022 WESTON WARM-UP FUND APPLICATION FOR FUEL ASSISTANCE

COMPLETED APPLICATION MUST BE SUBMITTED BY MAY 1, 2022

When completed, send this application and all necessary documentation to:

Weston Warm-Up Fund P.O. Box 1254 Weston, CT 06883

		Date:			
First Name M	iddle Initial	Last Nam	e		
Address:		Phone:			
Date of Birth:	Curr	ent Age:			
Number of People in Ho	usehold:				
Number of Children und	er 18:	Age and Gender of those under 18:			
Number of Adults:		Age & Gende	r of Adults:		
Number of Disabled Pers	ons:	Age & Gender	of Disabled Persons:		
Major Source of Heat:	Oil	Gas	Electric	Other	
Fuel Provider Name:					
Address:					
Phone:		Account Number:			
Have you applied for any	other type of hea	ating/fuel assista	nce between June 202	1 and April 2022?	
Yes No	If ye	s, list (i.e. CEAP, Ope	ration Fuel):		

Section B: Please attach to this application the following documents:

- 1. A copy of your 2021 Federal Tax Return, if required to file one.
- 2. Copy of your Social Security Statement(s)
- 3. Summary of your heating bills from June 2021 to April 2022. (This information can be obtained from your heating provider.)
- 4. Copy of 2021 Federal Income Tax Returns for any other adults, 21 years or older, living at this residence. College students are exempt.

SECTION C: Combined Household Income for 202	¹ 1	
Gross Salary/Earnings:	Veteran's Benefits:	
Bonuses and/or Commissions:	Unemployment and/or Workers' Compensation:	
Social Security: Self:	Spouse/Partner:	
Child Support/Alimony:	Rental Income:	
Supplemental Social Security:	Support from Others:	
Public Assistance:	Dividends/Interest:	
Pension and /or Retirement:	Capital Gains:	
Other (Please specify):		
TOTAL GROSS INCOME:		
SECTION D: Assets as of December 31, 2021		
Total Cash on Hand and in the Bank:		
Total Value of Certificates of Deposit:		
Total Value of Stocks and Bonds:		
Total Value of Individual Retirement Plans (IRA's) and/or Deferred Income Plans:		
Please list any other assets, such as second automobile,	second home, rental properties:	
Description	Value	
		

Note: The Warm-Up Fund will obtain the assessed value of your residence and other real estate holdings from the Weston Tax Collector's Office.

The Warm-Up Fund reserves the right to ask for additional information such as multiple bank statements and additional tax returns for children over 21 years of age living at home to verify income.

SECTION E: Debts as of December 31, 2021

Amount Owed					
Do you own or rent your home:					
If own, what is your current outstanding mortgage:					
Total Medical Bills Currently Owed:					
Total Credit Card(s) Currently Owed:					
In the event that you have incurred extraordinary and non-reimbursable medical or other expenses in the past twelve months, please list them below:					
SECTION F:					
The submission of this signed application requesting financial assistance autor my permission for my heating company to release any pertinent account infor Weston Warm-Up Fund, Inc.					
I certify that all information contained in this application is accurate to the be	st of my knowledge.				
The Weston Warm-Up Fund, Inc. considers all information contained in this a highly confidential. Please be advised that in addition to the Weston Warm-U Directors, this information could possibly be shared with the Weston Social Secondary	p Fund Board of				
Signature of Applicant: Date:					
For WUF Use Only: WUF Rep Initials Date Rcvd					

22-1