Utility Assistance Benefits available at the Tribal Assistance Program for Yavapai-Apache Nation adult Tribal Members

The Yavapai-Apache Nation Tribal Council has recognized the critical importance of establishing a Tribal Assistance Program to provide temporary financial relief for Tribal Members and their families. The Tribal Assistance Program was developed May 14, 1998.

What does Utility Assistance Provide?

 Utility Assistance is offered to eligible adult Tribal Members by assisting with temporary payments for natural gas, propane, electricity, trash, water and sewer. In order to receive this assistance, all utility statements must be in the name of the adult Tribal Member who is head-of-household.

How do I become eligible for Utility Assistance?

- Adult Tribal Members become eligible for Utility Assistance when they meet all the following requirements:
 - Meet or fall below Federal Poverty Guidelines. (See Attached).
 - Proof of head-of-household status of physical residence has been verified.

How do I apply?

- If you are the adult Tribal Member of your residence, simply complete the attached application forms and return it to the Tribal Assistance Program with copies of all the following documents:
 - ✓ Yavapai-Apache Nation Enrollment Card
 - Most two recent paycheck stubs from all employed adults of the household.
 - Current verification of entire household's unearned income. (see #2 of application for listing of unearned income)
 - ✓ Current & complete utility bill(s)
 - Entire lease agreement, deed/title or current YANTH Rent & Household Composition Form.
 - ✓ Two Employment Referral Forms (if unemployed)
 ✓ Disability statement from physician (if temporarily disabled)
- If you are determined eligible for Utility Assistance, payment will be issued directly to the utility company for one monthly billing cycle for entire amount but no greater than \$250 per qualifying month. This assistance is 1 time per calendar year.

How long can the Tribal Assistance Program take to decide my eligibility?

 When entire application form is complete and returned with all required documents, the Tribal Assistance Program must make a decision within 1-3 operating business days from the date and order your application is received.

What if I am unemployed?

- If you or any other adult resident of your household are unemployed you/adult resident must actively seek employment and provide evidence of efforts to obtain employment by completing one Employment Referral Form each.
- Employment Referral Forms are available per request and must be completed and returned with application before eligibility will be determined.

What if I am a college student?

 If you or any other adult resident of your household is a full time college student, you/adult resident are exempt from seeking employment. However, Higher Education Award Statement of check stubs from scholarships, grants or loans must be submitted.

• Part-time Students:

If you or any other adult resident of your household is a parttime college student, you/adult resident are not exempt from seeking employment and therefore required to complete two Employment Referral Forms. Higher Education Award Statement of check stubs from scholarships, grants or loans must be submitted.

What if I am unable to work due to a disability?

 If you or any other adult resident of your household is temporarily unemployed due to an injury or illness, a current written statement from a physician is required verifying disability, inability to work and clarifying whether disability is temporary or permanent.

How many months per year can I receive Utility Assistance?

 Adult Tribal Members that are head-of-household can apply and receive Utility Assistance Benefits one month per calendar year.

IMPORTANT INFORMATION:

- Utility Assistance is not provided for security deposits or reconnection fees for any utility expense.
- * All adult residents of household must sign & date Authorization for Release of Information Form.
- When inquiring the status of your application, information will only be disclosed to the adult Tribal Member who has applied for assistance.
- If you require assistance in completing the application or have any questions regarding the assistance available, please contact the Tribal Assistance Program.



YAVAPAI-APACHE NATION Tribal Assistance Program 2400 W. Datsi Street Camp Verde AZ 86322

UTILITY ASSISTANCE APPLICATION

YAVAPAI-APACHE NATION **Tribal Assistance Program**

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Telephone: (928) 649-7147 Fax: (928) 567-6485 Email: TribalAssistanceSS@yan-tribe.org Website: www.yavapai-apache.org

4. Provide subtotal of all household's earned and unearned income received during the qualifying month. ウウウウウウウウウウウ

UTILITY ASSISTANCE APPLICATION

YAVAPAI-APACHE NATION **Tribal Assistance Program**

PRIMARY EXPENSES:	uning post (rent mortages	A that your household nave?	\$			
5. What is the current TOTAL monthly ho						
	6. What is the current TOTAL monthly utility cost (gas/propane, electric, water/sewer, trash) that your household pays?					
7. What is the current TOTAL monthly vehicle loan payment(s) that your household pays?						
8. What is the current TOTAL monthly ve	chicle insurance cost that ye	our household pays?	\$			
9. What is the current TOTAL monthly ch	nild care cost that your hous	sehold pays?	\$			
10. What is the current TOTAL monthly co	ourt order child support cos	t that your household pays? (Attach copy of court order)	\$			
	11. What is the current TOTAL monthly medical cost that your household pays? (Attach copies of medical cost receipt/invoice)					
OPTIONAL/ADDITIONAL EXPEN						
12. List any additional monthly expenses	you currently pay that are n	ot listed above.				
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FINANCIAL QUESTIONAIRE 14. Yes No Does your househ	old earned and unearned i	ncome cover your monthly household expenses?				
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	our financial difficulties are					
17. Yes No Are you experiencing financial difficulties due to loss of employment and or decrease in income?						
18. Yes No Do you currently prioritize and pay your monthly expenses?						
19. Yes No Do you tend to overspend each month?						
20. Yes No Have you ever developed a budget/spending plan?						
21. Yes No Would you like to complete a Monthly Income and Expense Worksheet? This will help determine how much money you have coming in, how much is going out and whether or not you have enough income to pay your bills and expenses each month						
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Telephone: (928) 649-7147 Fax: (928) 567-6485 Email: <u>TribalAssistanceSS@yan-tribe.org</u> Website: <u>www.yavapai-apache.org</u>

UTILITY ASSISTANCE APPLICATION

YAVAPAI-APACHE NATION Tribal Assistance Program

AUTHORIZATION FOR RELEASE OF INFORMATION

I authorize the release of information requested by the Department of Social Services Tribal Assistance Program or its representatives to verify my financial information, where I live, and residents of my household. The Department of Social Services Tribal Assistance Program will only use the information for the assistance of which I have applied. The Department of Social Services Tribal Assistance Program will not release this information to any other person or agency outside the Tribal Assistance Program or its representatives. This release of information remains in effect while I am a recipient of the Tribal Assistance Program, and for any later investigations of my eligibility and receipt of benefits.

Persons or organizations that may be contacted include, but are not limited to: local governments, public assistance programs, health care providers, landlords, employers, private individuals and other departments within the Yavapai-Apache Nation.

A COPY OF THIS RELEASE IS AS VALID AS THE ORIGINAL

PIONATURE OF OTHER ARULT HOUSEHOLD REGIDENT

APPLICANT'S SIGNATURE	SIGNATURE OF OTHER ADULT HOUSEHOLD RESIDENT
PRINTED NAME	PRINTED NAME
ADDRESS	ADDRESS
TELEPHONE NUMBER	TELEPHONE NUMBER
DATE	DATE
SIGNATURE OF OTHER ADULT HOUSEHOLD RESIDENT	SIGNATURE OF OTHER ADULT HOUSEHOLD RESIDENT
PRINTED NAME	PRINTED NAME
ADDRESS	ADDRESS
TELEPHONE NUMBER	TELEPHONE NUMBER
DATE	DATE



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