



## Mayor's Emergency Fuel Assistance Program

The Department of Community Development is offering a one-time (annually) infusion of 100 gallons of home heating oil for emergency situations only. Oil tank must be below ¼ of a tank and meet HUD Income eligibility requirements.

### Necessary Documentation

Income verification must consist of following, if applicable:

- Last four (4) paystubs for everyone over 18 years of age in household.
- Social Security Award Letter or bank statement if payment is direct deposit
- Pension Letter
- Rental Income (if applicable)
- Alimony/Child Support
- Latest Bank Statement (all pages)

Other Documents required to process the application:

- Birth Certificates and Social Security cards for all household members
- Copy of photo ID
- Rent Receipt or Mortgage Statement (whichever applies)
- Lease Agreement if applicable
- Copy of Heating Bill, must be in the name of the applicant

For additional information please contact the Department of Community Development at 401-780-6240.

### Income Eligibility According Household Size (Effective April 1, 2021)

1 Person	2 Person	3 Person	4 Person	5 Person	6 Person	7 Person	8 Person
\$54,150	\$61,900	\$69,650	\$77,350	\$83,550	\$89,750	\$95,950	\$102,150



## Mayor's Emergency Fuel Assistance Application

Name: \_\_\_\_\_ D/O/B: \_\_\_\_\_

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

Cell Phone: \_\_\_\_\_ Home Phone: \_\_\_\_\_

Mortgage Holder: \_\_\_\_\_

### Household Members:

Name	Social Security #

Home Type:           Single           Multi-Family

Location of Oil Tank: \_\_\_\_\_

Oil Company Used: \_\_\_\_\_

Income Type	Amount \$	Frequency (monthly/annually)

<b>Total Annual</b>	
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<b>Price:</b> _____	<b>Delivery Date:</b> _____
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\*\*\*FOR OFFICE USE ONLY\*\*\*

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



# Mayor's Emergency Fuel Fund

## Oil Tank Self-Certification Form

I, \_\_\_\_\_ of  
**Print Name**

\_\_\_\_\_  
**Address**

**Declare that my oil tank is below  $\frac{1}{4}$  of a tank, I am in an emergency and in need of assistance from this fund.**

**Applicant Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Witness Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_