



Whitefield Emergency Assistance Request

Name: _____

Address: _____

Telephone: _____

Applicant is: (circle one) Single Married Separated Divorced Widowed

of Adults in Household _____ # of Children _____

Currently Employed: (Circle one) Yes or No

Monthly Income \$ _____

Contacted LIHEAP (Circle one) Yes or No Date Applied: _____

Received a response: _____ Amount Received: _____

Contacted CHIP Inc. (Circle one) Yes or No Date Received: _____

Explanation of the need: _____

Assistance Requested:

- ☐ Heating Oil (Circle one) Inside tank (#2) or Outside Tank (K-1)
(Regular provider) _____ Phone # _____
- ☐ Propane (Regular provider) _____ Phone # _____
- ☐ Wood Length of Firewood _____ (in inches)
- ☐ Electricity
- ☐ Rent or Mortgage (Circle one)
- ☐ Other _____