

**Low Income Home Energy Assistance Program (LIHEAP)  
FY 2009 Fact Sheet  
Administered by the Department for Community Based Services  
Services Provided by Community Action Agencies**

**PURPOSE:** To assist low-income households with home heating cost through two (2) components:  
 1. Subsidy - provides assistance to all eligible households.  
 2. Crisis - provides assistance to eligible households experiencing a home heating crisis.

**OPERATION:** Community Action Kentucky, Inc. will contract with twenty-three community action agencies to operate both components in all 120 counties.

**ELIGIBILITY:** 1) Household income must be at or below the following, relative to household size:

| <u>Household Size</u> | <u>Gross Monthly Income</u> | <u>Household Size</u> | <u>Gross Monthly Income</u> |
|-----------------------|-----------------------------|-----------------------|-----------------------------|
| 1                     | \$ 1,174                    | 5                     | \$ 2,794                    |
| 2                     | \$ 1,579                    | 6                     | \$ 3,200                    |
| 3                     | \$ 1,984                    | 7                     | \$ 3,605                    |
| 4                     | \$ 2,389                    | 8                     | \$ 4,010                    |

Add \$406 for each additional family member

- 2) Must be responsible for home heating costs or pay heating costs as an undesignated portion of rent.  
 3) Must not have in excess of \$2,000 in liquid resources, or \$3,000 if at least one person in the household is age 60 or older: &/or disabled except for households where a member has a catastrophic illness, the amount may be \$4,000 when the resources are being accessed for medical and living expenses. In addition to the above eligibility requirements, crisis applicant must be within 4 days of running out of fuel if wood, coal, propane, fuel oil or kerosene is the heat source or a disconnect/past due notice has been received from the vender (example: past due notice, termination notice, final notice).

**APPLICATION PERIOD:** **Subsidy:** Applications must be made during the period November 2 through December 11, 2009. Applications will be taken in alphabetical order based on the first letter of the head of household's last name using the following schedule:

|             |           |             |           |             |         |
|-------------|-----------|-------------|-----------|-------------|---------|
| November 2  | A         | November 16 | F, G      | November 30 | M       |
| November 3  | Staff Day | November 17 | H         | December 1  | N, O, P |
| November 4  | B         | November 18 | H         | December 2  | Q, R    |
| November 5  | B         | November 19 | I, J      | December 3  | S       |
| November 6  | Closed    | November 20 | Closed    | December 4  | Closed  |
| November 9  | C         | November 23 | K, L      | December 7  | S       |
| November 10 | Staff Day | November 24 | M         | December 8  | T       |
| November 11 | C         | November 25 | Staff Day | December 9  | U, V, W |
| November 12 | D, E      | November 26 | Closed    | December 10 | X, Y, Z |
| November 13 | Closed    | November 27 | Closed    | December 11 | OPEN    |

**Crisis:** Applications can be made from January 4, 2010 through March 31, 2010 or until available funds have been expended.

Applicants who are unable to apply for themselves must contact the local community action to make other arrangements. If the designated representative is not the head of household or spouse, the representative must have a signed statement giving authorization to apply for the household. Individuals without a designated representative should contact the local community action agency which may be able to assist them in finding one. Only one person from each household should apply.

**APPLICATION PROCESS:** Applications for both components will be taken at local community action agency offices or designated sites in each county, listed on the back of this fact sheet. **Applicants must bring the following:**

1. Most recent heating bill or verification that heating expenses are included in the rent;
2. Social Security Numbers or Permanent Residence Card Number for each member of the household; and
3. Proof of all household income from the preceding month.

**In addition, in the Crisis component,** applicants requesting assistance for natural gas or electric must bring a disconnect/past due notice (example: past due notice, termination notice, final notice). Households at or above 75% of poverty level must pay a portion or co-payment of the minimum necessary to alleviate the crisis. Applicants whose rent includes heat must bring an eviction notice from the landlord.

**BENEFITS PROVIDED:** **Subsidy:** The benefit amount that a household receives will be based on its level of poverty and the type of fuel used for heating. Those households with the lowest incomes that use the fuel with the highest heating season costs will receive the highest benefit. All eligible households will receive a benefit. Benefits will be in the form of vouchers made payable to the household's primary or secondary heating fuel vendor.

**Crisis:** Benefits are limited to the amount necessary to relieve the crisis with the maximum amount not to exceed the community action agency's local cost for a deliverable supply of the household's primary heating fuel or \$400 for gas or electric. Benefits may take the form of fuel deliveries, service reconnection, blankets or sleeping bags, loan of space heaters and emergency shelter. Crisis relief will be provided within 48 hours or 18 hours if an emergency.

**CLIENT REFERRAL:** Clients requesting additional information regarding both components of the FY 2009-2010 LIHEAP program should be referred to their local community action agency, Community Action Kentucky (CAK), toll-free number 1-800-456-3452 (TTY available for the hearing impaired), or the Ombudsman's office toll-free 1-800-372-2973 (TTY available for the hearing impaired).

**APPLICANT RIGHTS:** Each applicant will be informed of their rights should they be denied assistance. Any applicant who wishes to appeal the case should be informed by local community action agency staff of the procedures for filing a complaint. Should the applicant not be satisfied with the local decision, they may further appeal to the Cabinet for Health and Family Services.