

NORTHWEST TN ECONOMIC DEVELOPMENT COUNCIL
LIHEAP OFFICE- SUITE 207
231 SOUTH WILSON ST.
DRESDEN, TN 38225

DIFFERENT ACCOUNT NAME

I, _____ (APPLICANT FOR THE LOW-INCOME HOME ENERGY ASSISTANCE PROGRAM, DO HEREBY STATE THAT I AM FULLY RESPONSIBLE FOR THE ENERGY SUPPLY IN THIS HOUSEHOLD. I FURTHER STATE THAT SUCH ACCOUNT NUMBER _____ IS IN THE NAME OF _____.

ADDRESS AND UTILITY CHANGE

APPLICANT NAME: _____

SOCIAL SECURITY #: _____

NEW ADDRESS:

VENDOR AND ACCOUNT#:

NAME ON ACCOUNT IF DIFFERENT:

➤ **PLEASE ATTACH PROOF OF NEW VENDOR INFORMATION**

I, THE UNDERSIGNED APPLICANT, CERTIFY TO THE BEST OF MY KNOWLEDGE THAT ALL OF THE INFORMATION LISTED ABOVE IS TRUE AND CORRECT. I UNDERSTAND THAT ANYONE WHO FRAUDULENTLY COVERS UP MATERIAL FACT OR WHO KNOWINGLY GIVES FALSE REQUIRED INFORMATION IS SUBJECT TO PROSECUTION UNDER THE APPLICABLE STATE AND FEDERAL CRIMINAL STATUTES.

APPLICANT SIGNATURE: _____

DATE: _____