



CAMPESINOS UNIDOS, INC.

LIHWAP APPLICATION INSTRUCTIONS

Enclosed for your completion is your HEAP application for the current Program Year. All required documents must be returned along with your completed application. **An incomplete application package will not be processed.** This is a non-emergency program. We do not notify the utility company directly ourselves.

Important Qualifications to receive LIHWAP assistance:

1. **Return original application by mail WITH supporting documents.** Do not send a copy. Do not send by email. Do not send by fax. Drop offs are permitted via drop box ONLY and must be in a sealed envelope.
2. Total household gross income must meet the program income guidelines.
3. Fill out your application with black or blue ink ONLY; **NO WHITE OUT** can be used on any part of the application.
4. Your account must be past due
5. Water utility accounts must not be final/closed. Deposits on accounts may require payment before receiving assistance.
6. Applicant must live in the home.

**\*\* YOU MUST ALSO INCLUDE THE FOLLOWING SUPPORTING DOCUMENTS\*\***

1. Copy of CA identification for applicant only.
2. Copy of Social Security card for applicant only.
3. Complete copy of most current water bill with at least 30 billing days. Please include ALL pages of your bill.
4. For all persons 18 and older living in the home, proof of income for the last 4 weeks prior to signature date on the intake form. (If an adult has zero income, a signed statement or affidavit (provided by CUI) is required. Income received for minors must be included as well (if minor is recipient of SSI or Survivor's benefits).
5. For all persons 18 and older living in the home, provide copies of any supporting documents for any other assistance received (such as food stamps).
6. For renters, rental agreement with details for water account charges.

*A more detailed list of acceptable documents is included in this packet. If you are unsure, please contact our office for help. Please be reminded that ALL documents verifying income must include the recipient's name, the name of the business/person issuing payment and must be current (dated within 30 days of the application).*

Applications are processed in the order that they are received. If approved, it will take approximately **8-10 weeks** to receive payment to your utility company. Please make payment arrangements with water company and/or continue paying your monthly charges during the waiting period of 8-10 weeks after it has been processed. If your application is not eligible for assistance, we will contact you by phone and mail. No funds are guaranteed until your application has been received, reviewed, and approved for payment. **If you have any questions or concerns, please contact us at (619) 391-9790. Ext 2337 and 2338.** After completing and signing the application, please return it along with the supporting documents to the address listed below:

**Campesinos Unidos, Inc.  
885 Gateway Center Way, Ste. 103  
San Diego, CA 92102**

*In recent years, due to significant funding cuts, the federal government enacted a law which mandates that benefits target those low-income households with the highest energy costs or needs, and the lowest incomes, while taking into consideration households with elderly, disabled persons and/or children five years and under. This means there could be households that received assistance in the past may no longer receive assistance because they fall into a low priority group and are not considered among the neediest of the needy. Households who have received assistance for three (3) consecutive years, may also fall into a lower priority group, and may not be eligible for services during the current Program Year.*



**TO APPLY FOR UTILITY ASSISTANCE, YOU ARE REQUIRED TO PROVIDE COPIES OF THE FOLLOWING:**

- **Valid California ID (Applicant Only)**
- **Social Security Card (Applicant Only)**
  - Social Security cards that are “Valid for Work Only” are not eligible for assistance
- **Current utility bill(s)**
  - Water Utility Bill with current charges and Past Due notice if one in effect.
  - Bills must have a minimum of 30 billing days
  - Final or closed accounts may not be eligible for assistance
  - Accounts that have been sent to collections are not eligible for assistance
  - If you are planning to move or are facing eviction, please notify the intake clerk
- **Proof of Income and Benefits for the last 30 days – ALL INCOME MUST HAVE RECIPIENT’S NAME VISIBLE**
  - Must be provided for ALL persons living in the home, regardless of responsibility for the utility costs.
  - Persons aged 18 and older without any type of income are required to provide a signed statement or an affidavit (this form can be provided by CUI upon request).
- **Renters:** A copy of rental agreement for all renters.

**Acceptable Income Documentation**

- ☐ **WAGES (including IHSS):** Copies of current consecutive pay stub(s) covering 1 month of income, must include gross payments and any deductions – OR - letter from employer with company letterhead, address, phone number, the gross amount and current pay period.
- ☐ **SSI/SSA/SSDI:** Payee’s (income recipient) letter of verification showing income amount, copy of complete bank statement (not transaction history) showing direct deposit, copy of check.
- ☐ **PENSIONS/RETIREMENT/ANNUITIES:** Copy of check stub, pension verification (i.e., letter or printout. Time frame of benefit must be current), annual statement from pension plan – **NO BANK STATEMENTS**
- ☐ **UNEMPLOYMENT/DISABILITY (EDD/UI):** Copy of Transaction Details, current consecutive check stubs.
- ☐ **WORKER’S COMP:** Copy of current check(s), current check stub(s), current printout, current award letter
- ☐ **VETERAN’S BENEFITS (VA):** Copy of current check, current check stub, current printout, current award letter, bank statement with direct deposit.
- ☐ **SELF EMPLOYMENT:** Current copy of ledger or journal - (Handwritten information is acceptable), signed self-employment statement showing gross receipts. For rideshare drivers, please include a printout of your last 30 days of rides. *Additional verification may be requested after your application is received.*
- ☐ **SURVIVOR’S BENEFITS:** Copy of current check, current check stub, current printout, current award letter, bank statement with direct deposit.
- ☐ **CHILD/SPOUSAL SUPPORT:** Depending if support is mandated or privately agreed upon, a statement may be provided from the county or from the payee. Court orders acceptable if issued within 30 days.
- ☐ **CALWORKS:** Benefit verification are provided by Health & Human Services, or you can register online and printout your benefits received. Proof must include name of recipient and amount received in last 30 days.
- ☐ **CALFRESH/SNAP:** Current notice of action letter, benefit verification, or copy of EBT card with written statement indicating amount of benefits received.
- ☐ **GIFTS/LOANS:** Provide a letter from each person that has given you a gift, loan or helped you with bills/expenses in last 30 days. The letter *must specify* the dollar amount, if it was a gift or loan, and if it was one-time or recurring. Letter must include a phone number, date and signature from person providing help.
- ☐ **FINANCIAL AID:** Provide copy of financial aid award letter showing amount granted.

**\*\*if you do not see your type of income listed, or if you have questions and require clarification – please contact our office before submitting your application at (619) 391-9790 (option 4 to “request appointment”, or ext. 2337 or 2338 this will connect you to an**

**intake clerk)**