



INCOME VERIFICATION

A household may qualify for incentives if it meets at least one of the following criteria listed in Table 1 below. You may provide proof of income, either by providing verifiable documentation to your utility or Community Action Agency or by signing a self-attestation that your household meets at least one income qualification criteria.

Gross income includes all wages, tips, rental income, public assistance, social security or pensions, income from self-employment, alimony, interest, or any other sources of income defined by the IRS income tax return.

Table 1: Qualifying Income Criteria

Total Number of People in the Household, Including Yourself	Household's Gross Annual Income
You may qualify for incentives if you meet at least one of the following income criteria or receive assistance from any of the programs below:	
<input type="checkbox"/>	Gross income falls within 200% of the federal poverty line (see Table 2)
<input type="checkbox"/>	Gross income meets your state's income guidelines (if different)
<input type="checkbox"/>	Gross income meets your tribe's income guidelines (if different)
<input type="checkbox"/>	LIHEAP
<input type="checkbox"/>	HUD
<input type="checkbox"/>	NAHASDA
<input type="checkbox"/>	Section 8
<input type="checkbox"/>	TANF
<input type="checkbox"/>	Supplemental Social Security

Table 2: Income Qualifications
Based on 200% of 2024 Federal Poverty Level

1 person	\$30,120
2 people	\$40,880
3 people	\$51,640
4 people	\$62,400
5 people	\$73,160
6 people	\$83,920
7 people	\$94,680
8 people	\$105,440
9 or more	Add \$10,760 each

Proof of Income Option 1: Income Verification with Documentation

Submit documentation to entity verifying income or to confirm eligibility. Check with resident's utility to determine if other income documentation is necessary.

Eligible Income Sources	Documentation Submitted to Utility (Only one document necessary)	Utility Verified Documentation (Note: Utility is not required to collect or maintain documentation after verification.)
Community Action Agency Certification	<input type="checkbox"/>	<input type="checkbox"/>
Pay stub	<input type="checkbox"/>	<input type="checkbox"/>
IRS form 1040	<input type="checkbox"/>	<input type="checkbox"/>
LIHEAP certification	<input type="checkbox"/>	<input type="checkbox"/>
HUD eligibility	<input type="checkbox"/>	<input type="checkbox"/>
NAHASDA eligibility	<input type="checkbox"/>	<input type="checkbox"/>
Section 8 eligibility	<input type="checkbox"/>	<input type="checkbox"/>
TANF eligibility	<input type="checkbox"/>	<input type="checkbox"/>
Supplemental Social Security	<input type="checkbox"/>	<input type="checkbox"/>
Proof of current assistance from state health and human services agency	<input type="checkbox"/>	<input type="checkbox"/>
Social Security Income	<input type="checkbox"/>	<input type="checkbox"/>
GA	<input type="checkbox"/>	<input type="checkbox"/>
VA	<input type="checkbox"/>	<input type="checkbox"/>
Unemployment	<input type="checkbox"/>	<input type="checkbox"/>

Option 2: Self-Attestation of Income

Complete the self-attestation to confirm income eligibility if you have not provided documentation of income from eligible sources listed in Option 1.

I, am a Homeowner or Tenant (*check one*) of the single-family home, manufactured home, or multifamily unit that will receive or have received energy efficient upgrades.

I am a customer of . I am aware that this utility and Community Action Agencies in my area can provide energy efficient upgrades at a high-level of assistance, but it requires I prove I meet certain income qualification guidelines. (*check one*)

I do hereby declare that my gross household income does not exceed the maximum income for my household size as indicated in the eligible income threshold above.

OR, I benefit from any of the Eligible Income-Qualified Programs listed below.

- Community Action Agency Certification
- Section 8 eligibility
- LIHEAP certification
- HUD Housing
- Supplemental Social Security Income
- TANF
- NAHASDA

I certify that the information presented is true and accurate. I further understand false, misleading or incomplete information may render me (the Applicant) ineligible to receive my utility's higher income-qualified incentive. If my utility finds that any information provided in connection with this application is false, then my utility reserves the right to require reimbursement of any incentives provided to which I am not entitled. My utility reserves the right to request additional documentation or proof of income to verify income qualification and to verify benefits.

Applicant Signature
My signature below certifies that I am eligible for this utility income-qualified incentive program.

Print Name		Date	
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Customer Name

Customer Account Number

Customer Address

City

State

Zip