

UGI Utilities, Inc. Customer Assistance Program Application Checklist



- Complete the enclosed Pennsylvania Utility Assistance Application Form.
- Attach a valid government-issued ID for the name of the UGI account holder or the person applying for CAP if not the primary UGI account holder.
- Attach proof of income for all household occupants that are over the age of 18. Please see below for acceptable proof of income document types. If you are not listing any household income, please complete the Zero Income Form on the reverse of this page and submit it with the application.
- Return all of the above to the Community Based Organization noted in the attached letter.

Proof of Income Document Types	Acceptable Period
Paystub	Prior 30 days or Most Recent Pay Period Available
W-2 Form	Most Recent Available
Benefit Letter	Prior year if current award letter is not yet available
Bank Statement	Last 30 days
Social Security	Prior year if current award letter is not yet available
Pension	Prior year if current award letter is not yet available
Disability	Prior year if current award letter is not yet available
Supplemental Security Income	Prior year if current award letter is not yet available
Alimony Support	Most Recent Available
Unemployment Determination Letter	Current approval letter
Notarized Letter Stating Income*	Most Recent Available (within 30 days)
Zero Income Form	Must be completed at the CBO
Rental Income	Last 30 days
*This is if none of the other document types listed are available. This would apply to seasonal or gig work.	

Pennsylvania Utility Assistance Program Zero-Income Form



Household Zero Income Claim

I, _____, state that no adult member of my household is currently receiving income from any source.

Household Expenses

Identify how you and your household meet monthly living expenses, such as those expenses for housing (mortgage or rent), food, and utilities (electric, gas, water, and/or phone bill). Check all that apply:

- I am using money from savings.
- I receive financial support from friends/family/community.
- Other. Please explain below

Affidavit

I certify that the information presented in this application is true and accurate to the best of my knowledge. I understand that providing false information in this application is grounds for denial and dismissal of my application. I acknowledge that I am responsible for notifying UGI if my household or income information changes.

Signature: _____

Date: _____