

UTILITY INTAKE QUESTIONS

Date: _____ Appointment Time: _____

- 1.) Name: _____
- 2.) Date of Birth: _____
- 3.) Phone Number: _____
- 4.) Muskegon County Address: _____

****If not a Muskegon County resident, then not eligible for utility assistance****

- 5.) # of adults in home: _____ # of children under 18: _____
- 6.) Do you receive food assistance? _____ If yes, how much monthly? _____
- 7.) Do you have a shut-off notice? _____
- 8.) Whose name is the bill in? _____

***Does this person live with you? _____**

9.) All Household Income (of everyone living in home) _____

Hourly \$ _____ Average hours worked per week: _____

Other household members' gross monthly income(s): \$ _____ \$ _____ \$ _____

Monthly Unemployment income: \$ _____ Monthly SSI/SSDI income: \$ _____

Monthly Social Security income: \$ _____ Monthly Child Support income: \$ _____

Monthly Cash Assistance income: \$ _____ other income: \$ _____ (*specify*)

10.) Have you made a total personal payment of at least \$50 on this bill within the past 3 months? _____

11.) Other services needed. Check all that apply:

___ Rental Assistance ___ Food ___ Budgeting Class ___ Home Buyer Education ___ Taxes

___ Employment Assistance ___ Mortgage ___ Education Assistance ___ Other: _____

-----*OFFICE USE ONLY*-----

Account# _____

Date last assisted: _____

Aggregate household income: \$ _____

C-Gross monthly income x 12= \$ _____ *Is this below 125% for household's size, per CSPM 500? _____

M-Gross monthly income x 12=\$ _____ *Is this below 125% for household's size, per CSPM 500? _____

Prescreened by: _____

Note: Funding is not guaranteed. Awards are contingent on client completion of program requirements. If a client fails to complete program requirements after awards are rendered; client may be responsible to repay obligation to original servicer.