DWS-HCD 880 Rev. 11/2024

State of Utah Department of Workforce Services HOUSEHOLD INCOME DEFICIT STATEMENT

Heat Ag	ency:	
Case #:	<u>-</u>	 _

To be filled out by each adult household member or couple when income is not enough to meet basic living expenses. Answer all questions thoroughly or your HEAT application may be denied.

Na	me(s):	Eligibility Month (Last Month):
1.		dn't you have enough income/any income to meet your expenses last month? your situation:
2.	Housin Utilities	
3.	If Yes: From w How m	hom? uch (dollar amount)? rpe of help?
		s cash assistance or were payment(s) made directly to a utility vendor, mortgage ny, landlord, etc? Please explain.
require t	that I rep	providing false information to the HEAT program is grounds for denial of my application or may ay in full any payment made on behalf of my household from the HEAT program. By signing below, dge and understand the information provided in this statement is true to the best of my knowledge.
denied. past thre	Example ee month	nentation may be required and must be provided within 10 days of request or your application will be so of additional documentation may include but are not limited to copies of bank statements for the s, tax transcripts, documents from past or present employers, loan documents, statements from organizations providing assistance, and any other documentation deemed necessary.
Sigr	nature:	/s/ Date:

Please mail, email, or fax completed form to your county HEAT agency listed here: https://jobs.utah.gov/housing/scso/seal/documents/localoffice.pdf