



Pueblo of Nambe - LIHEAP Application

p: 505-455-4434 f: 505-455-2038 15A NP 102 West, Santa Fe, New Mexico 87506

PLEASE RETURN TO ENROLLMENT OFFICE

Primary Applicant Name: _____

1. Address

Physical Address	Mailing Address
City	City
State	State
Zip Code	Zip Code
Telephone (Home)	(Cell) (Work)

2. Household Information

A. List names and information for yourself and all the people who live with you. Include all adults, children, and unrelated individuals.

Name	Social Security #	Sex	Date of Birth	Age	Race	Citizen (y/n)	Disabled (y/n)
1.							
2.							
3.							
4.							
5.							
6.							
7.							

8.							
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3. Income

A. Check all sources of income including benefits for all household members and attach proof of the income for the last 30 days.

<input type="checkbox"/> Wages	<input type="checkbox"/> General Assistance	<input type="checkbox"/> Interest, Dividends, or Royalties
<input type="checkbox"/> Self - Employment	<input type="checkbox"/> Temporary Assistance (TANF)	<input type="checkbox"/> Commissions
<input type="checkbox"/> Unemployment Insurance	<input type="checkbox"/> Rental Income	<input type="checkbox"/> Legal settlements
<input type="checkbox"/> Social Security (SSA)	<input type="checkbox"/> Alimony	<input type="checkbox"/> Insurance Payments
<input type="checkbox"/> Supplemental Security (SSI)	<input type="checkbox"/> Child Support	<input type="checkbox"/> Veterans Administration (VA)
<input type="checkbox"/> Retirement/Pension		

B. List all the income information for each household member.

Name	Income Source	Amount \$	How Often (Wk/Bi-Wk/Mo)
1.			
2.			
3.			
4.			

4. Home Heating or Crisis

A. What type of energy assistance do you need help with?

<input type="checkbox"/> Electric

5. Your Signature

I affirm under penalty of perjury that the statements made about persons in my home, income, and all other information I have given to the Pueblo of Nambe are true and correct.

Sign Here: _____	Today's Date: _____
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