



Care & Share Application Form

Please complete and scan to heartshareenergy1@heartshare.org and include proof of photo ID and monthly income for everyone in the household, proof of vulnerable household, and National Grid bill. You can mail to HeartShare 330 Jay Street 29th Fl., Brooklyn, NY 11201 Attn: Energy and Community Development.

Applicant Name	
Application Date	
Age	
Employed?	
Does Applicant Receive Public Assistance?	
Does Applicant Receive Pension?	
Does Applicant Receive Unemployment?	
Does Applicant Receive SSI/SSD?	
Other Forms of Income	
Total Number of People in Household	
Number of people under the age of 18 living in household	
Total Monthly Household Income *	

National Grid Account Holder Full Name *	
National Grid Account Number *	
National Grid Account Street Address *	
Has applicant applied for HEAP? *	
Has applicant applied for Emergency HEAP?	
Has applicant previously received a Care & Share grant in the last 12 months?	
Is applicant applying for fuel?	
Is applicant applying for Oil, Wood, Kerosene,	
If other name fuel source:	
Fuel Supplier Name	
Fuel Supplier Phone	
Fuel Supplier Fax	
Fuel Supplier street Address	
Fuel Supplier Account #	
Contact Name	
Account Balance	
Does applicant require a "Promise to Pay" letter?	

Email address	
Applicant Signature	
How did you hear about us?	