

**YOKEFELLOW of CALDWELL COUNTY
CITY OF LENOIR WATER/SEWER BILL ASSISTANCE PROGRAM to
PREVENT, PREPARE AND RESPOND to CORONAVIRUS
FOR RESIDENTS of the CITY LIMITS of the CITY OF LENOIR, NC**

APPLICANT INFORMATION:

Name of Applicant: _____ Account # _____

Telephone # _____

Property Address _____, Lenoir, NC 28645

Family Size _____ Race: B ___ W ___ Asian ___ Hisp ___ Am Indian ___

Female Head of Household: YES ___ NO ___ Children: Yes ___ No ___

HOUSEHOLD INFORMATION:

List the names of all persons that will be living in the house including the applicants along with their sources of income or employer, annual income, age, sex, race, and handicapped status. Note: Income includes **gross wages** from employment including **overtime**, alimony, child support, pensions, interest income, social security, income from assets, and etc. **NOTE: THIS INFORMATION MUST BE COMPLETELY FILLED OUT.**

<u>Name of each Household Member</u>	<u>Source of Income or Employer</u>	<u>Annual Income</u>	<u>Age</u>	<u>Sex</u>	<u>Race</u>	<u>Handi-capped Yes or NO</u>
1 _____	_____	_____	_____	_____	_____	_____
2 _____	_____	_____	_____	_____	_____	_____
3 _____	_____	_____	_____	_____	_____	_____
4 _____	_____	_____	_____	_____	_____	_____
5 _____	_____	_____	_____	_____	_____	_____
6 _____	_____	_____	_____	_____	_____	_____
7 _____	_____	_____	_____	_____	_____	_____

Total Household Annual Gross Income ----- \$ _____

MAXIMUM TOTAL HOUSEHOLD GROSS INCOME (2020 HUD SECTION 8 DEFINITION)

<u>1 Person</u>	<u>2 Persons</u>	<u>3 Persons</u>	<u>4 Persons</u>	<u>5 Persons</u>	<u>6 Persons</u>	<u>7 Persons</u>	<u>8 Persons</u>
\$33,350	\$38,100	\$42,850	\$47,600	\$51,450	\$55,250	\$59,050	\$62,850

Funding can only be used to pay Water and Sewer Utilities bill for the City of Lenoir for residents of the City Limits of the City of Lenoir. Funds can be used to pay for three utility bills. Funds can pay for utility bills usage during the month of March 2020 or after, but not for usage for months before March 2020.

REASON FOR REQUESTING ASSISTANCE:

ACCURACY OF INFORMATION:

I am applying for assistance from Yokefellow of Caldwell County, which is funded by the United States Department of Housing and Urban Development. **I certify that I have listed all people that will be living in the house and all income that will be brought into the house. I certify that the information I have provided to determine my eligibility for assistance is true and complete to the best of my knowledge. I understand that if it is discovered that I knowingly falsified my application, that, I will have to repay the assistance I receive.**

YOKEFELLOW STAFF CERTIFICATION OF APPLICANT'S CONTACTLESS SIGNATURE(S)

DATE _____

Please attach proof of income such as recent pay stub(s), social security award statement, unemployment compensation, income verification statement from employer, etc.

Please include a copy of tax bill or proof property is located in City of Lenoir, City Limits.