



WYANDOTTE NATION
\$300 - SENIOR ENERGY ASSISTANCE PROGRAM

October 1, 2023 to September 30, 2024

Program Guidelines: AGE 55+, Wyandotte Tribal Citizens Nationwide; \$300 per year

Wyandotte Nation Enrollment Number _____ Age _____ Date of Birth: _____

Last Name (Tribal member) First Name Maiden Name Date

Physical Address of Property Mailing Address (if different)

Is this a new address: yes ___ no ___

City State Zip Code

()

Email address Phone number

Cooling/ Heating Sources: If Specific Amount Is Not Specified, \$300 Will Be Applied

Natural Gas: Amount to be applied for this payment: \$300 or \$ _____

Propane: Amount to be applied for this payment: \$300 or \$ _____

Electric: Amount to be applied for this payment: \$300 or \$ _____

Please Note: Total amount requested does not have to equal bill amount. Payment can be credited to account.

Please provide a copy of the front and back of the most current, full utility bill you are seeking assistance for, **not just the bill stub**. Name of Energy Company, address and account number must be on bill. **Payment will be made to the service provider only.** Please do not send personal checks with applications. Personal checks should be mailed directly to the vendor. Allow at least 30 days to process. Please continue to pay your bill as usual. The amount requested will be credited to your account. (Incomplete applications will be returned)

Signature of Tribal Citizen: _____