



United Way of Lamoille County

20 Morrisville Plaza, Ste. B  
Morrisville, VT 05661  
(802) 888-3252  
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Approval:  YES  NO  
Date: \_\_\_\_\_

## Firewood Application: 2021-22

**Applicants must live in Lamoille County. Due October 1, 2021.**

Date: \_\_\_/\_\_\_/\_\_\_ Date of Birth: \_\_\_/\_\_\_/\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ E-mail: \_\_\_\_\_

Total # of adults in household: \_\_\_\_\_

Total # of children in household age 5 and under: \_\_\_\_\_

Total # of children in household between the ages of 6-18: \_\_\_\_\_

Is anyone in your household 60+: YES NO

Is anyone in your household disabled? YES NO

Is anyone in your household a veteran: YES NO

Gross Income: \$ \_\_\_\_\_ Per Month (You may be asked for income verification if your application is chosen).

- Have you applied for any other type of fuel assistance this year? (You must apply to qualify) YES NO  
Were you approved? YES NO If no, please explain why your application was denied.

\_\_\_\_\_  
\_\_\_\_\_

- United Way of Lamoille County has my permission to discuss this application with Department of Children and Families Fuel Assistance Program to help determine my eligibility. YES NO
- Do you receive 3Squares VT Benefit (formerly known as Food Stamps)? YES NO

I hereby declare that the information furnished above is true, complete, and correct to the best of my knowledge and belief. I understand that in the event of my information being found false or incorrect at any stage I could be found ineligible for this or future assistance.

Signature of Applicant \_\_\_\_\_ Date \_\_\_/\_\_\_/\_\_\_

We encourage you to volunteer with the Firewood project if you are physically able to do so. Would you be able to volunteer? Yes No We will be in touch to schedule volunteer times.

**If you are able to pick up your wood, it allows us to deliver to those who need it most.**

**If you are unable to have your wood picked up, please provide clear directions to your house and describe where you would like the wood dropped (Please use back of paper).**

I understand that the wood received from this program is **NOT** for resale. If I sell the wood that I am given, I will be ineligible to participate in this program in the future.

FIREWOOD PROJECT MONTHLY INCOME GUIDELINES	
# in Household	200% of Federal Poverty Level
1	\$2,146
2	\$2,904
3	\$3,660
4	\$4,416
5	\$5,174
6	\$5,930
7	\$6,686
8	\$7,444
9	\$8,200
10	\$8,956