

Approval: YES NO
Date:

Firewood Application – 2020

Applicants must live in Lamoille County.

Date: Date of Birth:		I understand that the wood received from this		
Name:		program is <u>NOT</u> for resale. If I sell the wood that I am given, I will be ineligible to participate in this		
		program in the fu	uture.	
Address:				
City/State/Zip:		FIREWOOD PROJECT MONTHLY INCOME GUIDELINES		
		Eamily Siza	Monthly	
Phone: E-mail:		<u>Family Size</u> 1	<u>Income Limit</u> \$1967	
		2	\$2658	
Total # of Adults in Household:		3	\$3349	
		4	\$4039	
Tatal H of Children in household and to the constant		5	\$4730	
Total # of Children in household under the age of 18:		6	\$5421	
		7	\$6111	
Are you disabled? YES NO		8	\$6802	
			Ţ 333 <u>-</u>	
Were you approved? Y	er type of fuel assistance this y ES NO If no please expl ty has my permission to discus	ear? YES ain	NO (You must apply to qualify) with Department of Children and	
		Signature of A	nnlicant	
 Do you receive 3Squares (formerly known as Food Stamps)? 		-	NO	
We encourage you to volunteer with times you would be available and we	the Firewood project if you a	e physically able to		
Wednesday, September 16 th Saturday, September 19 th		1	Saturday, September 19 th	
	8:00 am – 12:00 pm	12:00 – 3:00 pm		
8:00 am – 12:00 pm	8:00 am – 12:00 pm	12:0	υ – 3.00 μπ	

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). If this application is provided after September 4th you will need to make your own arrangement for pickup.