



Caldwell County Veteran Services
2025 Application for Utility or Emergency Assistance

Date: _____

Applying for: **Please attach or provide your original bill with this application.*

- *Electric – Water – Sewer
- *Cell Phone
- *Natural Gas and/or Propane
- *Rental Payment – *must have copy of rental agreement*
- *Mortgage Payment
- *Minor Vehicle Repair – *must have licensed mechanic invoice*
- Gasoline/Diesel
- Miscellaneous _____

General Information:

Name of Veteran Head of Household or Veteran Spouse: _____

DOB: _____ SSN: _____

Physical Address: _____

Mailing Address: *(if different than above)* _____

Primary Phone Number: _____ Other Phone Number: _____

Email Address: _____

Current Monthly Checking/Savings statement \$ _____

****Your current bank statement must accompany your application****

Gender: _____ Race: _____ Ethnicity: _____

Household Members 18 and over: Verification of checking and savings is required for all persons over 18 years of age.

Household Member #1 _____

Circle One: Employed Unemployed Retired Checking: \$ _____

Circle One: Part Time Full Time Unable Savings: \$ _____

Utility Provider Information:

Electric Service Provider: _____ Acc #: _____

Water Service Provider: _____ Acc #: _____

Sewer/Trash Provider: _____ Acc #: _____

Cell Phone Provider: _____ Acc #: _____

Natural Gas Provider: _____ Acc #: _____

Propane Gas Provider: _____ Acc #: _____

Rental Property Owner/Landlord _____

Phone Number: _____ Acc #: _____

Mortgage Holder: _____

Phone Number: _____ Acc #: _____

Vehicle Repair Request: Nature of the issue _____

Applicant Authorizations – By signing below you are acknowledging knowledge of the following statements.

1. The information provided is true and correct to the best of my knowledge.
2. I understand that I MUST provide a copy of my DD-214, DD-215 or NGB-22
3. I understand that I MUST provide a copy of my most current bank statement.
 - a. If your application is before the 15th of the month, you can provide the prior month bank statement in correlation to the application month.
 - b. If your application is after the 15th of the month, you must provide the statement for the current application month.
4. I understand that the Discharge Characterization of Service: Honorable, General Under Honorable Conditions, Other than Honorable Conditions and Uncharacterized shall be used as one of the criteria if this grant funding is awarded.
5. I understand that financial assistance is contingent on a completed application, submission of required documentation, resource eligibility and available funds.
6. I understand that submitting an application does not guarantee financial assistance can be provided.
7. I understand that completed applications will be worked in the order that they are received.
8. I understand that it is the Veteran's or Veteran's Spouse responsibility to provide a completed application. Upon receipt of all required documentation the application will be treated as being received that day.
9. I understand that in order to receive assistance my monthly liquid resources cannot exceed \$12,500 and my utility statement must be a past due amount or final notice.
10. I further understand I am subject to prosecution for providing false or fraudulent information on this application.

Release of information:

_____ (initial) I release information to the Caldwell County Veteran Services Office (CVSO) and its contracted agencies to solicit/verify information including utility billing history needed to provide assistance with my utilities and/or fuel bills both past and present.

_____ (initial) I am an applicant for Caldwell County Veteran Services Utility Assistance Program. I hereby give permission to release and verify all information requested and understand that it will be kept in strict confidence to be used for program purposes only. I also understand that a photocopy of this release form is valid as the original and may be used to obtain more information and verify other data as needed.

Veteran/Veteran Spouse _____ Signature: _____

Date: _____

This program is supported by a grant from the Texas Veterans Commission Fund for Veterans' Assistance. The Fund for Veterans' Assistance provides grants to organizations serving veterans and their families. For more information, visit www.tvc.texas.gov.