



MISSOURI DEPARTMENT OF SOCIAL SERVICES  
FAMILY SUPPORT DIVISION  
**INFORMATION REQUEST**

DATE

APPLICANT NAME

SOCIAL SECURITY NUMBER

**To process your application for Energy Assistance, you need to provide copies of the information checked below. If you don't provide all of the requested information for each person named below, your application will be turned down. You must return the information to the agency no later than the required return date.**

**REQUIRED RETURN DATE**

MONTH DAY YEAR

**1. PROOF OF SOCIAL SECURITY NUMBER(S):**

(Such as Social Security Card or Application for One)

MEMBER NAME MEMBER NAME MEMBER NAME

**2. PROOF OF AGE FOR:**

(Such as Birth Certificate, Driver's License, Medicare Card)

MEMBER NAME MEMBER NAME MEMBER NAME

**3. PROOF OF PERMANENT RESIDENCE FOR:**

(Proof from Immigration and Naturalization Service)

MEMBER NAME MEMBER NAME MEMBER NAME

**4. RESOURCE DOCUMENTATION:**

(Include proof for all boxes checked for everyone in the household)

- ☐ Certificates of Deposit (CD)  
☐ Current Savings Account  
☐ Current Checking Account  
☐ Government and other Bonds  
☐ Stocks/Annuities and Mutual Funds  
☐ IRA/Keogh and Deferred Compensation Plans

**5. PROOF OF HEATING/COOLING ACCOUNT:**

- ☐ Current Energy Bill/Fuel Delivery ticket in your name  
☐ Current written statement from fuel supplier  
☐ Termination (Shut-off) Notice/Final Bill  
☐ Customer Account Name Change  
☐ Name/Address and Phone Number of Landlord  
☐ Current Energy Bill in your name with account number for new address

**6. PROOF OF ALL INCOME:**

All pay stubs for the member(s) and month/year listed below:

MEMBER NAME MONTH YEAR

A.

B.

C.

**OR**

A statement from the employer (Home employment such as babysitting, ironing, housecleaning or other odd jobs.) Include name of employer, how often paid, gross paid and dates.

- ☐ If you farm or are self-employed, your latest tax form (1040)  
☐ Current Social Security/SSI benefits  
☐ Child Support/Alimony  
☐ Statement documenting contributions from persons outside of your household. (Include signature, address, and phone number)  
☐ Veterans Benefits  
☐ Railroad Retirement  
☐ Armed Forces Allotment  
☐ Current Award Letter/Check Stub from any Private Pension  
☐ Workers Compensation  
☐ Rent received from Rental Property  
☐ Other Income: \_\_\_\_\_

**7. OTHER (EXPLAIN):**

**If you have any questions or need help getting the information needed, contact our agency.**

WORKER NAME

PHONE NUMBER

FAX NUMBER

RETURN ADDRESS INFORMATION



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**7. OTHER (EXPLAIN) - CONTINUED-**