

MISSOURI DEPARTMENT OF SOCIAL SERVICES FAMILY SUPPORT DIVISION

LIHWAP LANDLORD DOCUMENTATION REQUEST

SEC	FION I - APPLICA	NT AND LANDLO	RD INFORMATION	I (COMPLETED	BY APP	LICANT ANI	D/OR LANDLORD)		
APPLICA	APPLICANT NAME					APPLICANT SOCIAL SECURITY NUMBER (ALL 9 DIGITS)			
APPLICANT ADDRESS									
LANDLOF	RD'S (PROPERTY OWN	IER'S) NAME				LANDLORD'S PHONE NUMBER			
LANDLORD'S BILLING ADDRESS LANDLORD E-MAIL									
LANDLORD'S WATER SUPPLIER NAME ACCOUNT NUMBER FOR APPLICANT ADDRESS:									
LANDLORD'S WASTEWATER SUPPLIER NAME ACCOUNT NUMBER FOR APPLICANT ADDRESS:									
0507								YES	NO
	FION II – COMPLE							TES	NU
1. IS THE TENANT (APPLICANT) IN SECTION 8 (SUBSIDIZED HOUSING) AND REQUIRED TO PAY A SEPARATE WATER AND/OR WASTEWATER BILL? IF NO, THE TENANT DOES NOT QUALIFY FOR LIHWAP. IF YES, CONTINUE.									
2. DO YOU AND THE TENANT (APPLICANT) SHARE A WATER METER? IF YES, YOU ARE CONSIDERED A PART OF THE HOUSEHOLD AND ALL INFORMATION MUST BE INCLUDED WITHIN THE APPLICATION FOR WATER AND/OR WASTEWATER – YOU DO NOT NEED TO COMPLETE THIS DOCUMENT. IF NO, CONTINUE TO QUESTION 3.									
3. DOES THE TENANT (APPLICANT) PAY YOU LANDLORD FOR A SPECIFIED AMOUNT OF WATER/WASTEWATER IN A RENTAL AGREEMENT?									
IF Y	ES, PROVIDE A COP	PY OF THE AGREEN	IENT(S) AND COMP	LETE THE SECT	ION BELO	W.			
	,								
	O, CONTINUE TO QI	UESTION 4 ON PAG	E 2.						
тот	AL RENT PER MON	TH·\$							
		•					ND ANY PAST DU		TO
					_				13.
	AMOUNT REQUESTED FOR CURRENT MONTH	AMOUNT REQUESTED FOR PAST DUE MONTH	AMOUNT REQUESTED FOR PAST DUE MONTH	AMOUNT REQUESTED FC PAST DUE MON	R REQU	AMOUNT JESTED FOR DUE MONTH	AMOUNT REQUESTED FOR PAST DUE MONTH	то	ΓAL
WATER	\$	\$	\$	\$	 \$ 		\$		
Ň	CURRENT MONTH: (MONTH/YEAR) /	DATE (MONTH/YEAR) /	DATE (MONTH/YEAR) /	DATE (MONTH/YEAR /) (MC	DATE DNTH/YEAR) /	DATE (MONTH/YEAR) /	The requested amount must match the lease/ agreement and must be equal to or less than the rental amount.	
	AMOUNT REQUESTED FOR CURRENT MONTH	AMOUNT REQUESTED FOR PAST DUE MONTH	AMOUNT REQUESTED FOR PAST DUE MONTH	AMOUNT REQUESTED FC PAST DUE MON	R REQU	AMOUNT JESTED FOR DUE MONTH	AMOUNT REQUESTED FOR PAST DUE MONTH	TOTAL	
WASTEWATER	\$	\$	\$	\$	\$		\$		
WAS	CURRENT MONTH: (MONTH/YEAR) /	DATE (MONTH/YEAR) /	DATE (MONTH/YEAR) /	DATE (MONTH/YEAR /) (MC	DATE DNTH/YEAR) /	DATE (MONTH/YEAR) /	The requested amount must match the lease/ agreement and must be equal to or less than the rental amount.	



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SECTION II – COMPLETED BY THE LANDLORD (CONTINUED)	YES	NO				
4. DOES THE TENANT PAY YOU SEPARATELY FOR UTILITY COSTS, BECAUSE THE WATER AND/OR WASTEWATER IS NOT INCLUDED IN THEIR RENT? IF YES, PLEASE INDICATE THE AMOUNT THEY HAVE NOT PAID AND ATTACH THE BILLS WHICH CLEARLY SHOW THE AMOUNT FOR THEIR ADDRESS. IF THE APPLICANT IS DETERMINED ELIGIBLE, WATER WILL BE PAID FIRST.						
CURRENT WATER & ANY WATER ARREARAGES (UNPAID BILLS): \$						
CURRENT WASTEWATER & ANY WASTEWATER ARREARAGES (UNPAID BILLS): \$						
TOTAL REQUESTED (NOT TO EXCEED \$750): \$						
SECTION III - ATTESTATION/AGREEMENT						

I UNDERSTAND THE INFORMATION I HAVE PROVIDED CONCERNING THE ABOVE NAMED APPLICANT WILL BE UTILIZED BY THE CONTRACTED AGENCY TO ESTABLISH HIS/HER ELIGIBILITY FOR BENEFITS UNDER MISSOURI'S LOW INCOME HOUSEHOLD WATER ASSISTANCE PROGRAM. I UNDERSTAND THAT ANY PAYMENT MADE TO THE SUPPLIER, ON BEHALF OF THE NAMED APPLICANT, MUST BE APPLIED TO THE TENANT'S RENT OR WATER/WASTERWATER CHARGES, ACCORDINGLY.

I FURTHER ATTEST TO THE FACT THAT THE INFORMATION I HAVE PROVIDED CONCERNING THE ABOVE NAMED APPLICANT IS TRUE, ACCURATE AND COMPLETE AND THAT I MAY BE FINED, IMPRISONED OR BOTH UNDER THE FEDERAL OR STATE LAWS, FOR FALSE STATEMENTS I HAVE MADE TO ENABLE THE ABOVE NAMED APPLICANT TO RECEIVE BENEFITS TO WHICH HE/SHE IS NOT LEGALLY ENTITLED.

	MONTH	DAY	YEAR
SIGNATURE OF LANDLORD			