# Low-Income Household Water Assistance Program (LIHWAP)

#### What is LIHWAP?

LIHWAP may be able to help you with a onetime payment for your water and/or wastewater (sewer) bill from November through September. The maximum amount you could get is \$750.00. LIHWAP can help with:

- Disconnection or reconnection fees
- Threat of disconnection
- Past-due bills

## How do I apply?

Apply online at **mydss.mo.gov/utilityassistance/lihwap** or call **855-373-4636** to ask a team member to mail you an application.

You will need to submit your completed application to your local contract agency listed on the last page of the LIHWAP application.

#### When will I get my benefit?

Once you submit your application and required documents, your application will be reviewed in about 30 business days. You will receive a letter in the mail that tells you if you qualify for help and the amount you will get.

### Am I eligible?

You may be eligible for help if you:

- Are responsible for paying the utilities for your home
- Are a Missouri resident
- Are a U.S. citizen or have been legally admitted for permanent residence
- Have \$3,000 or less in your bank, retirement, or investment accounts
- Meet the income guidelines listed below:

Household Size	Monthly Income	Yearly Income
1	\$2,370	\$28,440
2	\$3,099	\$37,188
3	\$3,829	\$45,948
4	\$4,558	\$54,696
5	\$5,287	\$63,444
6	\$6,016	\$72,192

For household sizes over 6, add \$128 to the maximum monthly income for each household member.

## **Questions?**

Contact your local contracted agency at **tinyurl.com/mo-contractedagencies** for questions or visit:

**mydss.mo.gov/utility-assistance/lihwap** for more information.



The Missouri Department of Social Services is an equal opportunity provider.

IM-4 LIHWAP flyer REV (09/2023)



#### **Discrimination & Civil Rights**

HHS provides federal financial assistance for many programs to enhance health and well-being, including TANF, Head Start, the Low Income Home Energy Assistance Program (LIHEAP), and others. If you believe that you have been discriminated against because of your race, color, national origin, disability, age, sex (including pregnancy, sexual orientation, and gender identity), or religion in programs or activities that HHS directly operates or to which HHS provides federal financial assistance, you may file a complaint with the Office for Civil Rights (OCR) for yourself or for someone else.

To file a complaint of discrimination for yourself or someone else regarding a program receiving federal financial assistance through HHS, complete the form on line through OCR's Complaint Portal at https://ocrportal.hhs.gov/ocr/. You may also contact OCR via mail at: Centralized Case Management Operations, U.S. Department of Health and Human Services, 200 Independence Avenue, S.W., Room 509F HHH Bldg., Washington, D.C. 20201; fax: (202) 619-3818; or email: OCRmail@hhs.gov. For faster processing, we encourage you to use the OCR online portal to file complaints rather than filing via mail. Persons who need assistance with filing a civil rights complaint can email OCR at OCRmail@hhs.gov or call OCR toll-free at 1-800-368-1019, TDD 1-800-537-7697. For persons who are deaf, hard of hearing, or have speech difficulties, please dial 7-1-1 to access telecommunications relay services. We also provide alternative formats (such as Braille and large print), auxiliary aids and language assistance services free of charge for filing a complaint.

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