The Elders Heating Program (EHP) is previously known as the Elders Energy Assistance Program (EEAP). The EHP replaced the EEAP, through approval by the Tribal Council on November 9, 2020. The purpose of the EHP is to provide assistance to Klamath Tribal Elders residing within the Service Delivery Area with their home energy needs. The EHP is made possible by funds received from the Klamath Tribes Revenue Allocation Plan (KTRAP).

Program Eligibility:

1) At least one member of the Household must be a Klamath Tribal Elder
   (A Klamath Tribal Elder is defined as an enrolled member of The Klamath Tribes at least 60 years of age)

2) Residence must be located within Klamath County, Oregon

3) The elder must have a residence, the elder cannot be homeless

4) An elder or household may receive assistance once per Program Year (PY)

5) There is no income limit for the household

6) Priority and selection process-attached as addendum

Required Documents:

1) Complete/signed Application

2) Copy of a utility bill (if applicable) – We use this to ensure we have correct account number when sending payments to utility companies or local vendors, and making pledges.

Application Process:

Applications will be mailed to Klamath Tribal Elder households within Klamath County, by the first week of September of every year. Applications received within four weeks after the application release date, will be prioritized according to Section V, Item 2, of the EHP Policy. Funds are limited, and if there are remaining slots, we will assist more households after the specified period. If the EEAP is not awarded KTRAP funds, the Program will not operate and applications will not be released or accepted.

For PY2021 – 81 slots are available, those approved will receive $350.

If you have any questions, please contact Wanita Brown (541) 783-2219 ext. 186.
The Klamath Tribes, 501 S. Chiloquin Blvd., PO Box 436, Chiloquin, OR 97624 · Fax (541) 783-0994
**HOUSEHOLD INFORMATION**

<table>
<thead>
<tr>
<th>Names of Household Members</th>
<th>Relationship to You</th>
<th>DOB</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. _________________________</td>
<td>______</td>
<td>______</td>
</tr>
<tr>
<td>2. _________________________</td>
<td>______</td>
<td>______</td>
</tr>
<tr>
<td>3. _________________________</td>
<td>______</td>
<td>______</td>
</tr>
<tr>
<td>4. _________________________</td>
<td>______</td>
<td>______</td>
</tr>
<tr>
<td>5. _________________________</td>
<td>______</td>
<td>______</td>
</tr>
</tbody>
</table>

Klamath Tribal Elders’ Roll Number: ________________

Physical Address: __________________________ City: __________ Zip: __________

Mailing Address: __________________________ City: __________ Zip: __________

Home Phone: ________________ Cell Phone: ________________ Message #: ________________

**PRIORITY INFORMATION**

1. What is the age of the oldest Klamath Tribal Elder in the Household? ________________

2. Did you receive LIHEAP from 10/01/2019-09/31/2020? ________________

3. Is there at least one Elder in the Household, who is disabled or has health concerns? If yes, condition: __________________________

☐ YES  ☐ NO

**HOME ENERGY SELECTION**

Please mark 1 or 2, home energy types you would like assistance with, up to $350:

<table>
<thead>
<tr>
<th>Selection</th>
<th>Quantity/Amount</th>
<th>Vendor / Acct. #</th>
</tr>
</thead>
<tbody>
<tr>
<td>☐ Firewood ($175/cord)</td>
<td>☐ 1 cord ☐ 2 cords</td>
<td>______ N/A</td>
</tr>
</tbody>
</table>
**DIRECT PAY FOR FIREWOOD**

If you select firewood, the Department will process a check for the number of cords you selected on page 2. Proof of purchase (a receipt) is due within 60 days of the check acceptance. An Elder may choose to designate a trusted friend or family member to buy the firewood for them. If funds are lost, stolen, or misused they will not be replaced.

1. Who will be responsible to buy firewood?  □ Elder  □ Trusted friend/family member

2. What is the legal spelling of the individual who will buy the firewood?
   First Name: ______________________    MI: ________    Last Name: ______________________

**SIGNATURE / DISCLAIMER**

As a Klamath Tribal Elder, or the Elder’s representative, I hereby certify I have completed all sections of the application truthfully, honestly, and to the best of my knowledge.

Signature: ____________________________    Date: ____________________________

Printed Name: ____________________________

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**Did you know?**

If your household income does not exceed the income limits (listed below) you may receive additional Energy Assistance? Ask Wanita Brown.

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>$27,806</td>
<td>$2,317.15</td>
<td>7</td>
<td>$72,188</td>
<td>$6,015.67</td>
</tr>
<tr>
<td>2</td>
<td>$36,361</td>
<td>$3,030.10</td>
<td>8</td>
<td>$73,792</td>
<td>$6,149.30</td>
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<tr>
<td>3</td>
<td>$44,917</td>
<td>$3,743.05</td>
<td>9</td>
<td>$75,396</td>
<td>$6,283.00</td>
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<tr>
<td>4</td>
<td>$53,472</td>
<td>$4,456.00</td>
<td>10</td>
<td>$77,000</td>
<td>$6,416.65</td>
</tr>
<tr>
<td>5</td>
<td>$62,028</td>
<td>$5,169.00</td>
<td>11</td>
<td>$78,604</td>
<td>$6,550.35</td>
</tr>
<tr>
<td>6</td>
<td>$70,584</td>
<td>$5,882.00</td>
<td>12</td>
<td>$80,208</td>
<td>$6,684.00</td>
</tr>
<tr>
<td></td>
<td>$1,604</td>
<td>$133.65</td>
<td>Each Additional Member</td>
<td>$1,604</td>
<td>$133.65</td>
</tr>
</tbody>
</table>

---

**OFFICE USE ONLY**

☐ APPROVED  ☐ DENIED  ☐ WAITLIST

#: ________  #: ________  #: ________

Reason for Denial: ____________________________________________________

Date Client Notified of Action: ________________________________________

EAC Signature/Date: _________________________________________________

Director Signature/Date: ____________________________________________

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EHP Application  PY2021  Page 3 of 4
V. Priority & Selection Process

The Klamath Tribes acknowledges there are two programs which may offer heating/energy assistance to Klamath Tribal Elder households residing within the Service Delivery Area. The two programs are the Low Income Home Energy Assistance Program (LIHEAP) and the EHP. The Klamath Tribes also acknowledges the limited program funding to support the EHP.

The Klamath Tribes recognizes LIHEAP includes an income limit while EHP does not. Under the previous “Elders Energy Assistance Program (EEAP) Policy and Procedures” a loophole existed where Elders who exceeded the income limit of LIHEAP and did not meet the criteria of the EEAP Prioritization Timeframe, would receive no assistance through either Program – leaving some Elder households without any assistance at all.

To effectively close the loophole between Programs and create a safety net for Klamath Tribal Elder households, the following are necessary actions of EHP:

1. For the Prioritization Timeframe (Oct. 1 to Oct. 31) EHP will provide assistance first to Elder households who are ineligible for LIHEAP assistance.
   
   A. The EHP in-take staff will verify Elder households which received LIHEAP in the previous fiscal year.
   
   B. EHP in-take staff will assume the Elder household will be eligible for LIHEAP again in the following fiscal year – assuming there are no changes which would impact their eligibility for LIHEAP.
   
   C. EHP in-take staff will direct Elder households to complete application for LIHEAP assistance. EHP in-take staff will notify these Elder households they are placed on the EHP Wait List.
   
   D. Elder households eligible for LIHEAP assistance may receive EHP assistance after the Prioritization Timeframe has lapsed and if there are funds remaining.

2. Effective November 1st EHP will provide assistance to Elder household who are eligible for LIHEAP assistance if there are program funds remaining.
   
   A. To be fair and impartial as possible, EHP will not provide assistance on a “first come, first serve” basis.
   
   B. Assistance will be prioritized to serve the oldest Elder(s) first.
   
   C. Elder households may receive both LIHEAP and EHP after November 1st.