BUTLER COUNTY SENIOR UTILITY, HOME REPAIR & EMERGENCY HOUSING ASSISTANCE PROGRAM





What is the Senior Utility, Home Repair and Emergency Housing Assistance Program?

This program provides three types of assistance to eligible Butler County older adults:

- 1. Assistance paying utility bills (gas or electric)
- 2. Assistance in making home repairs or modifications that promote safe, independent living
- 3. Emergency housing assistance (renters only) in the form of rent payment assistance to avoid eviction

Who is eligible?

This program serves Butler County residents age 60 and older who meet certain income requirements and who are not eligible for assistance through other available programs.

Individuals may apply for all three types of assistance offered through this program - but may receive assistance only one time in each category.

- Butler County residents age 60 and over
- Ineligible for other assistance programs
- Utility Assistance: Older adult or other family member in the household currently paying the utility bill (gas/electric only)
- Repairs/Modifications: Applicant must be the homeowner and reside in the home where the work will occur
- Emergency Housing Assistance: Applicant must reside in the home/apartment where assistance is needed. Applicant must be able to demonstrate ability to make rental payments in the future (renters only)
- Household income of 300% of poverty level or below, following the guidelines below:
 - 1 person in household annual income up to \$43,740
 - 2 people in household annual income up to \$59,160
 - 3 people in household annual income up to \$74,580
 - 4 people in household annual income up to \$90,000

Questions?

If you have questions, please call Council on Aging at (513) 743-9000.

Use the application on the following pages to apply for this program.

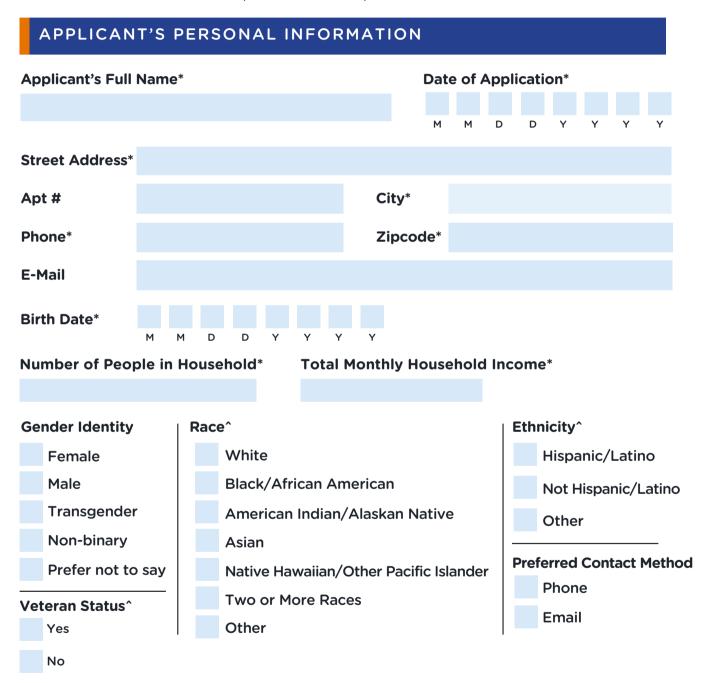
APPLICATION FORM







This application contains five (5) pages. Please be sure to complete relevant sections on all pages and follow the instructions on page 5 to submit your completed application. Items marked with an * are required to be completed.



[^]This information is gathered for grant reporting purposes only. Butler County and Council on Aging do not discriminate based on age, gender, race, color, religion (creed), sexual orientation, gender expression or identity, national or ethnic origin (ancestry), marital status, or disability. Leave blank if you prefer not to report.

TYPE OF ASSISTANCE NEEDED

Individuals may apply for utility assistance and/or home repair assistance, as well as emergency housing assistance. If an individual applies for and receives assistance, they are no longer eligible to receive the same type of assistance through this program. However, they may apply for another form of assistance offered through this program.

I need assistance with (choose one or more and then complete the appropriate sections on the following pages):*			
Utility Assi	Utility Assistance (continue with Utility Assistance Information below)		
Home Repa	Home Repair (jump to Home Repair information on page 3)		
Emergency Housing Assistance (jump to Emergency Housing Assistance information on page 4)			
UTILITY AS	SSISTANCE INFORMATION	N (HOMEOWNERS & RE	NTERS)
Eligible individu	uals may apply for a one-time	credit for their gas/electric	bill.
Name of Utility	Provider*		
Name on Utility	Bill*		
Utility Account	#*		
Have you receiv	ved a disconnection notice fror	n your utility provider?	
Yes N	0		
of this application			
Yes (please	provide the utility billing addr	ess in the fields below)	No
Street Address			
Apt #		City	
State		Zipcode	

Home Repair application begins on page 3.

Emergency Housing Assistance application begins on page 4.

HOME REPAIR INFORMATION (HOMEOWNERS ONLY)

Individuals may apply to receive assistance with home repairs or safety upgrades that will help them continue to live independently at home. Applicants should prioritize the most critical repairs or safety modifications that will keep them safe and independent in their own homes. The applicant must own and reside in the home where the work will occur.

Do you own the home where the work will occur?

Yes

No (you are not eligible for this program)

Program CAN Provide	Program CANNOT Provide
 Safety upgrades including grab bars, railings and ramps HVAC Repair (heating and cooling) Hot Water Heater Repair Stairlifts 	 Roof repair and/or replacement Cosmetic repairs and/or replacements Driveway or walkway repairs and/or replacements Concrete work or repair Yard work Exterior or interior painting Major plumbing repair (water main repair, septic tanks, etc.) Appliance repair and/or replacement

What type of repair or modification is needed? Please choose from the following categories:*

Safety upgrades including grab bars, railings and ramps

HVAC Repair (heating and cooling)

Hot Water Heater Repair

Stairlifts

Other:

Please provide more information about the type of repair/modification that is needed.*

EMERGENCY HOUSING ASSISTANCE (RENTERS ONLY)

Applicants must provide the following information to apply for this program:

- Proof of income for the past 30 days for all household members 18 and older (examples: paystubs, Soc Sec award letter, unemployment, pension, etc.)
- Eviction or past due rent notice including total amount due

 Copy of your current lease or rental agreement, even if you rent month-to-make 	•	Copy of your	current lease	or rental ag	greement, e	ven if you	rent mont	.h-to-mo	nt	r
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copy or your current react or	roman agroom	Torre, avair in your one monein to monein
Do you own or rent your home?	Rent	Own (you are not eligible for this program)
Please provide detailed information	regarding your	financial hardship.*
Please provide information regarding	g your plans for	paying your rent in the future.*

CERTIFICATION

By signing this form, I hereby certify that, to the best of my knowledge, the provided information is true and accurate and Council on Aging may contact me to further assess my eligibility for this program.

HOW TO SUBMIT YOUR APPLICATION

Mail, Email or Fax:

Completed applications should be mailed to:

Council on Aging

Attn: ADRC - Utilities 4601 Malsbary Road Blue Ash, OH 45242

Completed paper applications may also be emailed to HCUtility@help4seniors.org or faxed to (513) 538-0411. Please remember to include required documentation (for emergency housing assistance) with your application.

To have an application mailed to you, please call (513) 743-9000 or send an email to HCUtility@help4seniors.org.

Questions?

If you have questions about this program or application, please call Council on Aging at (513) 743-9000.

THANK YOU!

Once we receive your application, we will contact you to further assess your eligibility for the program.





About Council on Aging

Council on Aging is designated by the state of Ohio to serve older adults and people with disabilities within a multi-county region. We are experts at helping people with complex medical and long-term care needs, offering a variety of services via publicly-funded programs. Our mission: Enhance lives by assisting people to remain independent through a range of quality services.

(513) 721-1025 or (800) 252-0155 | www.help4seniors.org