



Water Bill Assistance Intake Form

Evansville Water & Sewer Utility / CAPE HOME Serve Collaboration

Name: _____

Address: _____

EWSU account number: _____

Phone: _____

Is the water turned entirely off? ____ Yes ____ No.

If no, disconnection date: _____

(Account must be in disconnect status or disconnected)

This program allows for one-time assistance every 12 months may be provided to income-qualified customers of Evansville Water & Sewer Utility. The water bill must be in disconnect status or already disconnected. Limited assistance with shut-off amount only up to \$250.00. Water bill must be in name of household member aged 18 years or older, landlord or Power of Attorney. Documents to support household information are required. Our office will contact EWSU to verify the information you provided is correct.

Email: _____

Customer Signature

Date

Attach the following documents to this application:

- ✓ **Proof of Income**
- ✓ **Identification**
- ✓ **Social Security Cards**
- ✓ **Proof of Residency**
- ✓ **Most Recent Water Bill**

Last Updated: 5/14/2024

All services are provided without regard to race, age, color, religion, sex, disability, national origin, ancestry, or status as a veteran.



Household Member and Income Information

DO YOU NEED LANGUAGE ASSISTANCE? ___ YES ___ NO

IF YES, WHAT IS YOUR PERFERRED LANGUAGE? _____

| Name | Age | D.O.B. | Ethnicity | Gender | Source of Income | Annual Income | Relation to Applicant |
|------|-----|--------|-----------|--------|------------------|---------------|-----------------------|
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Total Household Income: \$ _____

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Additional Household Information

1. Marital Status: Single Married Divorced Separated
2. Are you or anyone in your household pregnant? Yes No
3. Military Status: Never Served Active Military Veteran
4. Level of Education: 0-8 9-12 High School Graduate
 GED Some College College Graduate
5. Health Insurance: Medicare Medicaid Private Insurance
6. Are you or anyone in your household disabled? Yes No
7. Work Status: Part-Time Full-Time Unemployed
8. Cash Benefit: SNAP Housing Voucher WIC
 Permanent Supportive Housing
9. Do You: Rent Own Contract
10. Family Type: Single Parent Household Two Parent Household
 Single Person

Additional Information:

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