

Residential Energy Assistance Application

Completed forms can be returned to our office or via one of the following:

EMAIL: accountinfo@mleainc.com

MAIL: PO Box 278 Roosevelt, UT 84066

FAX: 435-722-5466

Applicant Name:	Accour	nt #:
Account Name (If different than above):		
Cell Phone:	Secondary Phone:	
Email Address:		
Mailing Address:		
City:St	ate: Z	ip:
Have you or anyone in your household applied for assistance from HEAT, LEAP, or LIHEAP?		
Declaration		
I understand that, if I do not provide the necessary information to establish my eligibility within 10 days from this date, my application may be denied. I understand that, if Residential Energy Assistance funds are exhausted prior to processing of this application, Moon Lake Electric Association is under no obligation to make payment. I understand that receiving Residential Energy Assistance does not eliminate the possibility of my service being terminated for delinquency.		
Member Signature	 Date	
For Office Use Only		
□ Contact information updated	Billing Cycle	:
□ Eligibility confirmed	Processed Date:	
☐ Credit applied	Processed By:	