

SECTION 8 UTILITY ALLOWANCE PAYMENT FORM

Tenant Name: _____

Address: _____

Please CIRCLE the companies below that currently provide you with service and include your account number in the space provided. Please also enter the percentage of your utility allowance you would like paid to each utility company. **A percentage must be entered for at least one utility company providing you with service, and the total percentage must add up to 100%.**

| <u>UTILITY COMPANY</u> | <u>CUSTOMER ID</u> | <u>PERCENTAGE</u> |
|------------------------|-----------------------|-------------------|
| Burlington Electric | _____ | _____ |
| | <u>LOCATION ID</u> | |
| | _____ | |
| | <u>ACCOUNT NUMBER</u> | <u>PERCENTAGE</u> |
| Green Mountain Power | _____ | _____ |
| Vermont Gas Systems | _____ | _____ |

If you are currently having oil, kerosene, or bottled gas delivered, please indicate the name of the fuel provider, your account number, and percentage you'd like paid to them.

| <u>FUEL PROVIDER</u> | <u>ACCOUNT NUMBER</u> | <u>PERCENTAGE</u> |
|----------------------|-----------------------|-------------------|
| _____ | _____ | _____ |

FUEL PROVIDER ADDRESS:

