

# **Low Income Home Energy Assistance Program (LIHEAP)**

# NO MORTGAGE / NO HOMEOWNER'S INSURANCE STATEMENT

Application #: Date:	
Applicant Name:	
I certify that I own my home and no longer have payment. My housing costs are as follows:	a mortgage (principal and interests
☐ MORTGAGE (principal and interests)	<b>\$</b>
☐ HOMEOWNER'S INSURANCE POLICY	<b>\$</b>
REAL ESTATE (municipal taxes)	\$
CONDO FEES (if applicable)	\$
MOBILE HOME PARK FEES (if applicable)	<b>\$</b>
OTHER	<b>\$</b>
TOTAL HOUSING COSTS:	<b>\$</b>
I certify that all statements contained on this form and in my case of understatement or misstatement of "no mortgage/n the full value of any assistance received.	
	Date:
print name	
Applicant Signature:	Date:

#### **Main Office**

180 Main Street Gloucester, MA 01930 978-282-1000 370 Main Street Gloucester, MA 01930 978-282-1000

## **Energy Services - North**

47 Washington Street Gloucester, MA 01930 **Energy**: 978-283-2131 **Fuel Asst**: 978-282-1003

## **Energy Services - South**

3 Centennial Drive STE 230 Peabody, MA 01960 978-283-2131