ELECTRIC UTILITY ASSISTANCE PROGRAM

Carolina Power Partners and the Town of Winterville have partnered together with Greene Lamp Community Action to be able to provide a one-time energy assistance credit to qualifying customers.*

Applications may be picked up at Customer Service

*Utility account must be held in applicant’s name and income verification is required.
To: Winterville Electric Customer

From: Greene Lamp Community Action,
Town of Winterville,
Carolina Power Partners

Date: November 28, 2022

Re: Winterville Electric Utility Assistance

You may be eligible to receive assistance with your Electric Bill from The Town of Winterville, Greene Lamp Community Action and Carolina Power Partners. If you have endured financial hardship, you may be eligible for a one-time credit of $85.00 This credit will be provided to qualified customers once every 12 months while the program is being offered. It is also limited to the first 25 applicants per month.

Please contact the Town of Winterville at 252-756-2221 Ext, 8009 to learn about the application process.

This funding is made available through the Town of Winterville’s partnership with Carolina Power Partners.

Thank You,

Greene Lamp Community Action
309 Summit Ave
Kinston, NC 28501
252-523-7770
Town of Winterville Electric Customer Assistance Program Qualifications

1. Applicants must be a Town of Winterville Electric Utility Customer.
2. Applicant must be a current Town of Winterville Account holder whose name is on the account.
3. Applicants will be reviewed by Greene Lamp Care Coordinator in coordination with the TOW Customer Service staff.
4. Income requirement applies to all applicants. Their income must be within 2 times the poverty level.

<table>
<thead>
<tr>
<th>Family of 1</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>5</th>
<th>6</th>
<th>7</th>
<th>8</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>$32,550</td>
<td>$37,200</td>
<td>$41,850</td>
<td>$46,500</td>
<td>$50,250</td>
<td>$53,950</td>
<td>$57,700</td>
</tr>
</tbody>
</table>

5. Greene Lamp will process all income verifications and notify the Town of Winterville.

Greene Lamp Contact Information
Please submit applications to:

CARES Case Manager: Kristopher Coffield
E-mail: kcoffield@greenelamp.org
Fax: (252)329-1063
Greene Lamp - Pitt County Office
c/o Kristopher Coffield
2245 Stantonsburg Rd. Suite J.
Greenville, NC 27834
Winterville Assistance Application

Name:____________________________________County__________

Address:________________________________________County__________

Phone Number:____________________________________Cell□ House □

How many in household: _____ Adults: _____ Children: ______
Age’s: _______ _______ _______ _______ _______ _______ _______ _______ _______ _______

Assistance Requested: Light Bill

We are required to verify the income of applicants that receive assistance.
If Not Employed, please check here □

Are/Were you affected by financial hardship? If yes, please explain how it affected your household?

___________________________________________________________________________
___________________________________________________________________________
___________________________________________________________________________
___________________________________________________________________________
___________________________________________________________________________

Required items: Identification card, past due utility bill(s), Income self-certification*

Signature: _____________________________ Date: ____________
### Winterville Self Certification of Income Form

<table>
<thead>
<tr>
<th>Applicant Full Name</th>
<th>Applicant Phone</th>
<th>Applicant Email</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Rental Street Address</th>
<th>Rental City</th>
<th>Rental County</th>
<th>Rental Zip</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Mailing Street (if different)</th>
<th>Mailing City</th>
<th>Mailing County</th>
<th>Mailing Zip</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Household Information

How many people live in the home (including the applicant?)

### Monthly Income Information

Please list all income for the last full month for each household member.

<table>
<thead>
<tr>
<th>Household Member 1 (Applicant)</th>
<th>Household Member 2 (Co-Applicant)</th>
<th>Household Member 3</th>
</tr>
</thead>
<tbody>
<tr>
<td>Full Name</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Wages, salaries, tips, commissions, etc.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Unemployment Income</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Self-employment income</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Retirement/fixed income</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Other income</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total income/month</td>
<td></td>
<td></td>
</tr>
<tr>
<td>$</td>
<td>$</td>
<td>$</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Household Member 4</th>
<th>Household Member 5</th>
<th>Household Member 6</th>
</tr>
</thead>
<tbody>
<tr>
<td>Full Name</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Wages, salaries, tips, commissions, etc.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Unemployment Income</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Self-employment income</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Retirement/fixed income</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Other income</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total income/month</td>
<td>$</td>
<td>$</td>
</tr>
</tbody>
</table>
Annual Income

Annual Projected Household Income: ________________________________

Certifications

I certify that to the best of my knowledge the projection of annual household income above is correct as of the date this form is signed and completed.

I certify that the information contained in this form is complete and accurate.

I agree to provide, upon request, documentation on all income sources to Greene Lamp Community Action.

Initial

Applicant Signature

Printed Name

Date

Co-Applicant Signature

Printed Name

Date
## AREA RESOURCE LIST

### WHERE CAN I GET ASSISTANCE WITH:

<table>
<thead>
<tr>
<th>HELP GETTING A JOB</th>
<th>HELP WITH BILLS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Employment Security Commission</td>
<td>Anointed Ones Church of Deliverance</td>
</tr>
<tr>
<td>General Number: 252-355-9067</td>
<td>252-746-2722</td>
</tr>
<tr>
<td>LIFE STRIVE - 252-752-9774</td>
<td>4271 North Edge Rd, Ayden</td>
</tr>
<tr>
<td>Literacy Volunteers of America</td>
<td>Cornerstone Baptist Church</td>
</tr>
<tr>
<td>252-353-6578</td>
<td>252-752-4156</td>
</tr>
<tr>
<td>Martin County Community Action</td>
<td>(rent, food and prescriptions only)</td>
</tr>
<tr>
<td>252-792-1111</td>
<td>Emergency Assistance Ministry</td>
</tr>
<tr>
<td>Pitt Community College</td>
<td>252-551-9112</td>
</tr>
<tr>
<td>JobLink Career Center: 252-355-9067</td>
<td>1600 Chestnut St, Suite D, Greenville</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>HELP WITH TRANSPORTATION</th>
<th>HELP WITH UCARD BENEFITS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Aladdin Taxi - 252-830-5466</td>
<td>For UnitedHealthcare UCard holders:</td>
</tr>
<tr>
<td>GREAT BUS Service - 252-329-4532</td>
<td>United Healthcare</td>
</tr>
<tr>
<td>PATS – Pitt Area Transit - 252-902-2010</td>
<td>1-866-480-1086</td>
</tr>
<tr>
<td><a href="mailto:kcoffield@greenelamp.org">kcoffield@greenelamp.org</a></td>
<td>member.uhc.com</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>MISCELLANEOUS NEEDS, FOOD &amp; MEDICAL</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>First Born Community Development Center</td>
<td></td>
</tr>
<tr>
<td>252-758-6147</td>
<td></td>
</tr>
<tr>
<td>Greenville Community Shelter Clinic</td>
<td></td>
</tr>
<tr>
<td>252-758-9244</td>
<td></td>
</tr>
<tr>
<td>Hope of Glory Ministries - 252-321-6857</td>
<td></td>
</tr>
<tr>
<td>James D. Bernstein Community Health</td>
<td></td>
</tr>
<tr>
<td>252-695-6352</td>
<td></td>
</tr>
<tr>
<td>Jarvis Memorial United Methodist Church</td>
<td></td>
</tr>
<tr>
<td>252-752-3101</td>
<td></td>
</tr>
<tr>
<td>Multiple Sclerosis Foundation</td>
<td></td>
</tr>
<tr>
<td>1-888-673-6287</td>
<td></td>
</tr>
<tr>
<td>Oakmont Baptist Church - 252-756-1245</td>
<td></td>
</tr>
<tr>
<td>Pitt County Public Health Dept.</td>
<td></td>
</tr>
<tr>
<td>252-902-2305</td>
<td></td>
</tr>
<tr>
<td>Sunday Foundation Clinic Grimesland</td>
<td></td>
</tr>
<tr>
<td>252-744-2938</td>
<td></td>
</tr>
</tbody>
</table>

Most agencies listed may provide one-time assistance with rent, utilities, medication, etc. Payments are usually made directly to the service provider (landlord, utility company, etc.)

*Be sure to have your most recent bill with you when you contact the agency.

02102023
FOR IMMEDIATE RELEASE:
November 28, 2022

Low Income Energy Assistance Program (LIEAP) Launches December 1
Pitt County Department of Social Services announces 2022-23 program guidelines

PITT COUNTY, N.C. – The Low-Income Energy Assistance Program (LIEAP), administered by the Department of Social Services (DSS), will launch for the 2022-23 season on Thursday, December 1, 2022. LIEAP provides a one-time vendor payment for eligible families who need assistance with home heating expenses. Complete program details, along with a list of locations to apply can be found below or on the Pitt County website at www.PittCountyNC.gov/LIEAP.

2022-23 Program Guidelines
Applications will be taken from December 1, 2022 - March 31, 2023.
Online applications may be submitted starting December 1, 2022 through the ePASS Portal (http://epass.nc.gov). Applications will be taken at various locations during the days and times posted on page 2. When all funds are spent, the program will end (applications will no longer be accepted). Pitt County DSS will submit LIEAP payments directly to the vendors. Benefit amounts are based on household size and income.

Applicants may apply online, by telephone, by submitting a paper application via the U.S. Postal Service or by fax to the Pitt County Human Services Center (address and fax number on page 2). Applications may also be dropped off at the Pitt County Human Services Center. Interested individuals may call Pitt County Human Services Center at 252-902-1352 for more information.

Priority Group
- Households with a person age 60 or older, or an individual receiving disability benefits and services through the N.C. Division of Aging and Adult Services can begin applying as early as December 1, 2022.
- Applicants who fall outside of this priority group can apply beginning January 3, 2023.
- ALL applicants can apply until the end of program period, which runs through March 31, 2023 or until all funds are spent.

Income Verification
Income verification is required for all applicants. Those applying will need verification of all income received the month prior to the date of application. This includes:
- Gross wages received in the month prior to the month of your application
- Gross amount of Social Security benefits
- Gross amount of SSI
- Gross amount of VA income
- Gross amount of any retirement received
- Child support and contributions received from anyone outside your home
- Any other income received
- Names, dates of birth, and Social Security numbers of all household members
- Proof of how the home is heated (name / address of provider with account number)
- Everyone who lives in the household must be included
Where to Apply

Online: http://epass.nc.gov

Pitt County Human Services Center
203 Government Circle
Greenville, NC 27834
Phone: 252-902-1352
Fax: 252-902-1868
Monday-Friday, 8:00 a.m. - 5:00 p.m.
Can apply by telephone*

Northern Pitt Improvement Association
2197 Old River Road
Greenville, NC 27834
Phone: 252-215-3064
Tuesday-Friday, 10:00 a.m. - 3:00 p.m.

Bethel Advocacy Center
130 West Washington Street
Bethel, NC 27812
Phone: 252-341-7586
Monday-Friday, 10:00 a.m. - 4:00 p.m.

St. John Missionary Baptist Church
2921 Briery Swamp Road
Stokes, NC 27884
Phone: 252-795-3603
2nd & 4th Thursdays, 10:00 a.m. – NOON

St. Rest United Holy Church
154 Hammond Street
Winterville, NC 28590
Phone: 252-756-9718
Saturdays, 9:00 am-NOON

Triumph Community Outreach Ministries
7874 US 264 East
Washington, NC 27889
Phone: 252-975-6944
2nd & 4th Thursdays, 10:30 a.m. – NOON

The Mission of Pitt County Government is to enhance the health, safety, and well-being of our community by advocating for and providing quality services in a friendly and cost-effective manner. Learn more: www.PittCountyNC.gov

###

Media Contact:

Dawn C. Jones
Director, Public Information & Media Relations
dawn.jones@pittcountync.gov | (252) 902-2955

Past Releases:
www.PittCountyNC.gov/PIO
Do you need assistance paying your water bill?

Low-Income Household Water Assistance Program (LIHWAP) can help!

LIHWAP is a temporary emergency program that will help eligible households and families afford water and wastewater services, providing a one-time payment for eligible low-income households paid directly to the utility company. LIHWAP runs through September 2023 or until the funds are exhausted.

How Do I Know if I Qualify for LIHWAP?
If your water or wastewater services have been cut off or if you have received notice that your services are in danger of being cut off because your bill is past due, or you simply need help paying your water bill, you may be eligible!

Who is eligible to receive LIHWAP?
To be eligible for the LIHWAP program, a household must have at least one U.S. citizen or eligible legal permanent resident and:

• Have income equal to or less than 150% of the federal poverty level,
• Have water or wastewater services that are disconnected, in jeopardy of being disconnected or have a current outstanding bill, and
• Is responsible for paying the water bill.

Households that currently receive Food and Nutrition Services (FNS), Temporary Assistance for Needy Families (TANF) or Work First services, or those that received Low-Income Energy Assistance Program (LIEAP) services between Oct. 1, 2020, and Sept. 30, 2021, are automatically eligible to receive this benefit. Please contact your local county Department of Social Services for more information.

How do I apply?
If you need assistance paying your water bill you can apply online at https://epass.nc.gov/. You can also apply over the phone by calling your local county Department of Social Services, printing out a paper application at https://epass.nc.gov/ and drop it off or fax it to your local county Department of Social Services, or by apply in person at your local county Department of Social Services office.

LIHWAP runs through September 30, 2023 or until funds are exhausted. Applicants can receive assistance more than once.

For more information on this program and eligibility, visit the LIHWAP website www.ncdhhs.gov/divisions/social-services/energy-assistance/low-income-household-water-assistance-program-lihwap.