

Jackson-Vinton Community Action, Inc.
118 S. New York Avenue
Wellston, Ohio 45692
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**DOCUMENT OF RESPONSIBILITY FOR UTILITY BILLS IF THE BILL IS NOT IN THE PRIMARY APPLICANT'S
NAME OR A HOUSEHOLD MEMBER'S NAME 18 YEARS OR OLDER**

Applicant Name: _____ **DATE:** _____

Address: _____

Phone: _____

UTILITY/PROPANE COMPANY/VENDOR: _____

ACCOUNT #: _____

Are your heating costs included in the rent? YES () NO () N/A ()

Name of Landlord and/or Account Holder

Address of Landlord and/or Account Holder

Phone Number of Landlord and/or the Account Holder

Who is responsible for paying for this service? _____

Signature of Landlord and/or Account Holder

Date

**I declare under penalty of perjury that the information submitted on this worksheet is
true and correct.**

**NOTE: A copy of your most recent fuel and/or heating bill from your current address must be
INCLUDED.**



An Equal Opportunity Employer/Provider of Services