

Jackson-Vinton Community Action, Inc. Emergency Program Required Documentation

Phone: 740-384-6421 ext.10 or 40 Fax: 740-384-5815

YOU MUST HAVE ALL REQUIRED DOCUMENTATION WITH YOU IN ORDER TO BE SEEN.

- Proof of Total Household Income for the last 30 days and/or last 12 months
- Most recent electric and/or gas bill – (*If new service must have account information before appointment*)
- Photo ID for **PRIMARY APPLICANT** (*must be current*).
- Social Security Cards Or Birth Certificates for all household members.
- Proof of **Chronic Medical Condition** - good for three years. (Medical Eligibility Form OR Prescription, Physician Form or Physician Letter verifying Chronic Medical Condition of household member.
- Verification Co-payment paid (if applicable).
- City of Jackson must pay water, sewer and garbage and bring in proof of payment.
- Most recent statement of primary heating source (Columbia Gas, propane, fuel oil, wood, coal, Kerosene).
- Notarized statement or Power of Attorney giving permission for another to represent you in applying for the Summer Crisis Program. (**Statement MUST be notarized, signed and dated**).
- Over age 60 does not need a note from the doctor for assistance.(Summer Crisis)**
- Landlord release form signed for A/C unit (if renter). **A/C Serial Number:** _____
- Letter of Support*** (If someone else is supporting you).
- Letter of Responsibility (if utility is not in household member's name).
- Copy of Lease – if renter AND Landlord name, address and phone number.
- INCOME DOCUMENTATION NEEDED: (see countable income sources below**).**
- Any household income in the last 30 days/ 12 months.
- EMPLOYMENT - All pay stubs for 30 days/12 months from the date of application that include gross and Year-to-date amounts received OR Employment Verification Form completed by employer.
- SEASONAL EMPLOYMENT- All pay stubs indicating amount received within the previous 12 months from the date of application. OR Seasonal Employment Verification Form completed by employer.
- SELF-EMPLOYED – Self Employment Income Form completed for previous 12 months **AND** complete IRS 1040
- UNEMPLOYMENT – Copy of checks, Eligibility letter with amounts and dates **AND** IRS Form 1099-G.
- Social Security/ SSI –Award letter, copy of check OR most recent bank statements showing deposit and depositor.
- Proof of any child support for last 30 days (**must be verified, but is not counted towards income**).
- Proof of any Governmental assistance and/or Food stamp amount.
- NO INCOME – Self-Declaration of Income Worksheet completed by applicant AND a **Letter of Support***
- NO INCOME AND NO ONE IS HELPING YOU – You must provide a tax transcript form from IRS.
 - a) If you filed a tax return call 1-800-908-9946
 - b) If you did not file tax return call 1-800-829-1040
 - c) Or you can go online at <http://www.irs.gov/individuals/Get-Transcript>

Appointment: _____ at _____ am/pm.

**** Countable Income Sources:** Active Military Pay, Alimony, Annuity, Black Lung, Capital Gains, Cash withdrawals from IRA, Company Disability, Current Bank Statement, Disability Assistance (DA), Estate and Trust Settlements, Farm Income, Garnished Wages – including Bankruptcy/Chapter 13, Immigrant Relocation Allowance, Income received from Gas and Oil Leases, Interest earned from Savings accounts, Lump Sum Distribution, Odd Jobs, Ohio Electronic Child Care (Ohio ECC) Provider income, Pensions –Government/Veterans/Private Industry, Rental Income from rental property, Self-Employment, Social Security, SSI, Social Security Disability, Strike Benefits, TANF, GA, Unearned income paid to or on behalf of minors, Unemployment Benefits, Utility Allowances (as discretionary income), Wages, Tips, Widows/Widower's Benefits, Worker's Compensation.

