LIHEAP PORTAL STEPS

- Visit the Paiute Indian Tribe of Utah page.
 <u>Paiute Tribe of Utah | Paiute Indian Tribe of Utah (pitu.gov)</u>
- In the red menu bar located at the top of the page, click on the *Services* tab.

Home	Government ~	Services ~	Pow Wow	Connect ~
		Member Services (PRC)	5	
		Economic Development		
		Education		
		Enrollment		
		Family Services		
		FourPoints Health		
		Healthy Living		
		LIHEAP		
		Native Youth		
• Sel	ect LIHEAP.	Tribal Emergency Response Team (TERT)	y	

• Scroll to the bottom of the page and click on *LIHEAP Application*.

LIHEAP Application

• On the left side of the page click on the *Register* tab. This step will only need to be completed once.



- Complete all of the required information. You do not have to be a member of the Paiute Indian Tribe of Utah to register.
 - Email enter your email.
 - Username please create a username.
 - Password create a password, then confirm that password below.
 - Once finished, please click *register*.

Sign up for a PITU Services account

* Email	
* Username	
* Password	
* Confirm password	
	Register

If you have questions or need help, please email services@pitu.gov, or call (435) 586.1112

- Update the profile page with all the required information.
 - O First Name, Last Name
 - Email this will auto populate with the email added from the previous step.
 - Mobile phone
 - O Birthday
 - Tribe (if applicable)
 - Street 1/Street 2, City, Street, Postal Code Please enter your complete address.
 - O Social Security Number
 - Tribal ID Please upload your Tribal ID (if applicable)
 - Once finished, please press submit located at the bottom of the page

Profile

	Please provide some information about yourself. The Email Address and Phone number are requi	ired but wil	Il not be displayed on the site.	
	First Name *	Last Name *		
Profile	E-mail *		Mobile Phone *	
	media@pitu.gov		Provide a telephone number	
Security	Birthday *		Tribe *	
Change Password	MDAXXXX	=		0
Change Email	190.67.1.1.1	-		~
onargo Emai	Street 1 *		Street 2	
	City *		State *	
	City		State	
	Postal Code *			
	SSN			
	L			
	Tribal Id			
	Choose File No file selected			

• Click LIHEAP from the application options

Applications					
Tribal Scholarship	Johnson O'Malley Program				
LIHEAP	Childcare Assistance				
License Exempt Childcare Provider Application	Enrollment				
Healthy Living	Family Services				

• On the right of the page, click Start a new application

LIHEAP In Progress Applications

In Progress Applications	Submitted Applications				
					Start a new application
LIHEAP				Created On 🕹	

- The first part is the *Applicant Information Tab*.
 - If applying for yourself: Please confirm the information that populated on this page. You do not have to have a notarized POA, although we do collect this information.
 - If you are completing the application for someone else, please mark the check box. Please only use if you are completing the application

for someone other than yourself. If you are, please add your relationship to applicant, and mark whether or not you are authorized to act on behalf of applicant. Then answer the remaining questions for the person who is applying for the energy assistance.

Authorized by a notarized POA to act on behalf of applicant *	
Self	
Relationship to Applicant *	
□ I am completing the application for someone else	
Name of person completing the application	

- When all fields are completed, click the next button. Please note that the system will not allow you to advance if any information is missing. If the program will not advance to the next page, scroll up to the center of the page to see a box that tells you what information is missing.
- If at any point in the application you need to stop and finish at a later time, please click the finish later button located on the bottom right.

Finish Later

- The second part is the *Household Information Tab*.
 - Complete each line if one doesn't apply, leave a zero (0) in the box.
 You must provide information for all household members and this should match the information provided by your landlord. Click on the Add Household Member box to add members:

Household Information

Number of Adults	Living in Household	*		
Number of Elders	Living in Household	(55 & older) *		
Number of Handio	capped/Disabled Pers	sons *		
Total Children Cu	rrently in Household	*		
Household Memb	ers			
				Add household member
Last Name 🕇	First Name 🕇	Birthday	Social Security Number	Enrolled Member

• List each household member in the popup box. This does not include the information about the person applying, only the other members of the household. Click submit after each household member is added.

First Name *	Social Security Number	
Jane	234-56-7891	
Middle Initial	Birthday	
	1/1/2000	
Last Name *	Sex	
Doe	Female	~
	Enrolled Member *	
	No	~
	Enrollment Number	

0

Answer all questions regarding living arrangements. When finished with all fields click the next button. Please note that, if you receive

rental assistance from the Paiute Housing Authority, the Tribe can obtain a Landlord Statement on your behalf. Click the <u>next</u> button.

Living Arrangeme

Do you rent?	
Yes	~
Do you rent from the Utah Paiute Tribal Housing A	uthority (UPTHA)?*
Yes	~
Share Residence *	
No	~
Primary Heating Source *	
Gas	~
Primary Cooling Source *	
Central Air	~
Do you pay water/sewer separately from your rent	or other utilities?
Yes	~
Previous Next	Finish Late

- Assistance Qualifiers Tab
 - If you receive any of these types of assistance, you are automatically eligible for LIHEAP/LIHWAP assistance. Make sure to complete if you receive SNAP, TANF, or SSI (*Supplemental Security Income* and Social Security are not the same type of payment). Enter the name of the household member that receives the assistance and the amount they receive. You will need to upload proof of the amount received, or you will not be able to proceed to the next page. When complete, click the next button.

TANF *	
No	~
SNAP (Food Stamps) *	
Yes	~
(SNAP) Name on Account *	
Jane Doe	
(SNAP) Amount *	
300.00	
Proof of SNAP Eligibility *	
Choose File No file selected	
SSI *	
No	~

- Income Tab
 - Complete this tab, including *all* income (earned and unearned) for the household. All Adults need to provide their income, or a statement that is personally signed explaining why they have no income.
 - Please upload proof of income for the past month; once complete, click the next button.

Income Information

- Each person over the age of 18 must either be working, receiving unearned income or provide a written statement they have personally signed explaining why they are not working.
- Earned income is defined as any monies you acquire from working. Examples include but are not limited to: wages, salaries, tips and self-employment earnings.

Earned Income

Does anyone in your household have earned income? *	
Yes	~
Earned Income Verification *	
Please provide earned income verification for the past month	
Choose File No file selected	
Earned Income Source *	
Full Time	~
Gross Monthly Earned Income Amount *	
1000.00	

Unearned Income

No

 Unearned income is defined as all other sources of monies received. Examples include but are not limited to: Unemployment Benefits, Alimony/Child Support, VA assistance, General Assistance, etc.

Does anyone in your household have unearned income *

•	Utility	Information	Tab

Add your Utility Vendors here.
 Utility Information

Please add all	required vendors				Add new utility vendor
Utility/Water	Name of the Company	Name on the Account	Percentage	Explanation	Created On

~

• In the percentage box, state what percentage of a LIHEAP award you want to be applied to that vendor. There is an additional box where

]
h the name of the person	applying for assistance,
	13
Utility Bill *	
Choose File	No file selected
ld crisis (Utilit	v Shutoff pending)
de a conv of th	e shutoff notice
ac a copy of th	le shuton nonce.
ible or danger imposed on	the household members. You must
ble, of daliger imposed of	the household members. Tou must
	,
	Utility Bill* Choose File Id crisis (Utilit de a copy of th

click on

- \circ Click the next button.
- Review and Submit Tab

- \circ $\,$ Please carefully read consent then check the required boxes.
- \circ Sign and date.

Utility Disclosure

For you to obtain assistance through the Paiute Indian Tribe of Utah (PITU) Low-Income Home Energy Assistance Program (LIHEAP), it may be necessary for PITU to obtain information from your utility company - including your name, account number, service address, usage information, and billing information. Some utility vendors cannot share this information with PITU without your consent. If you opt not to provide consent, it may impact your ability to receive aid through PITU.

This information will only be used for the purposes of determining whether you qualify for and for providing any aid you may receive. Your information will not be used for any other purpose. Please note that your consent applies only for this specific request. If in the future you seek additional funding from PITU, you will be asked to provide consent at that time.

- I hereby give my consent to my utility company(s) to provide PITU with my service address, account number, usage data, and billing data for the limited purpose in this application.
- I hereby acknowledge that the information provided is accurate and complies with the program requirements *

Date					
12/1/2023					
Type your Full Legal Name *					
Jane Doe					

- The Final step on the application is to review all the information is accurate, then click the **Submit** button.
- You can review the status of your application by logging back in to the member portal and clicking on submitted applications.

LIHEAP Submitted Applications



Please note the following:

• If you are renting, PITU will need a Landlord Statement that has been completed by your landlord. If you do not rent from the Paiute Housing Authority, please call and we will send one to your landlord, or you can get it online here (Landlord-Statement.pdf (pitu.gov)). You may also pick one up from the Tribal Offices at any time.

- If you have a Dominion Energy account, we have an additional form that you will need to sign. We will send it to you when we review your application.
- For any questions, or assistance in completing an application, please call the Family Services Department at (435) 586-1112.