



ProjectShare Application Form

Please complete and scan to energy@heartshare.org include proof of photo ID and monthly income for everyone in the household, and Con Edison bill.

You can mail to HeartShare 66 Boerum Place 2nd Fl., Brooklyn, NY 11201

Attn: Energy and Community Development.

Applicant Name	
Application for: *	
Application Date *	
Type of Emergency: Utility Termination Date	
Is applicant an Active Military member? *	
Is applicant a Veteran who was Honorably Discharged? *	
Has applicant previously received a grant in the last 12 months? *	
Employed?	
Does Applicant Receive Public Assistance?	

Does Applicant Receive Pension?	
Does Applicant Receive Unemployment?	
Does Applicant Receive SSI/SSD?	
Other Forms of Income	
Total Number of People in Household	
Number of people under the age of 18 living in household	
Total Monthly Household Income *	
Is Applicant on a Budget Plan? *	
NYSEG or RG&E Account Holder Full Name *	
NYSEG or RG&E Account Number *	
NYSEG or RG&E Account Street Address *	
County	
Has applicant applied for HEAP? *	
Has applicant applied for Emergency HEAP?	
Does applicant require a "Promise to Pay" letter?	
Has applicant previously received a ProjectShare grant in the last 12 months?	
Is applicant applying for fuel? If so please select one and fill out the fields below:	

Fuel Supplier Name	
Fuel Supplier Phone	
Fuel Supplier Fax	
Fuel Supplier street Address	
Fuel Supplier Account #	
Contact Name	
Account Balance	
Email address	
Applicant Signature	
How did you hear about us?	