



State of Utah
Department of Workforce Services
**HEAT PROGRAM TRIBAL AGREEMENT
FOR NATIVE AMERICANS**

HEAT Agency: _____

Case #: _____

I have applied for utility assistance through the State of Utah Home Energy Assistance Target (HEAT) Program. I certify that neither I nor any of my household members have received utility assistance through a tribal LIHEAP program this program year (October 1-September 30). I further agree that I and my household will not apply nor be included on another person's application for utility assistance through a tribal LIHEAP program this program year. I understand that receiving utility benefits from both a tribe and the state in the same program year is a violation of federal regulation, is considered a serious abuse of public funds, and will require repayment to one or both entities.

Name: _____ Tribe: _____

Physical Address: _____

City: _____ State: _____ Zip: _____

Phone #: _____

Please list below all household members who are affiliated with a Tribe:

First Name	Last Name	Tribe

Signature: _____ Date: _____

Equal Opportunity Employer Program

Auxiliary aids and services are available upon request to individuals with disabilities by calling (801) 526-9240. Individuals with speech and/or hearing impairments may call Relay Utah by dialing 711. Spanish Relay Utah: 1-888-346-3162.