

Application

John Cornell Fund

Return address:

Town of Andover

ATTN: Michael Morse, Treasurer

36 Bartlet Street

Andover MA 01810

978-623-8941

APPLICATION TO THE JOHN CORNELL FUND

Notice to Applicants: Please be advised that information contained in this application may be subject to disclosure in accordance with the Massachusetts Open Meeting Law or Public Records Law, with the exception of information that is exempt from disclosure under M.G.L. Chapter 4 Section 7, Clause twenty-six (c), which exempts from disclosure "materials or data relating to a specifically named individual, the disclosure of which would constitute an unwarranted invasion of personal privacy." It is important that all questions and information be answered completely. Failure to do so may delay or deny applicant from receiving fuel assistance.

Name (Please print) _____

Address _____

Telephone _____

Date of application _____

Personal:

1. My date of birth is _____. The above is also my voting address and I have lived at this address for ____ years.
2. Do others live at this address? YES-NO. List on page 2 of this form all other persons and their relationship to you who live at this address. If they furnish support to living expenses, explain briefly.
3. Do you, or anyone living with you, receive public assistance or assistance from any source not specified in one of your answers? YES-NO. If Yes, explain on page 2 of this form.
4. Do you, at this time, have any other applications pending for assistance? YES-NO. If Yes, please explain on page 2 of this form.
5. Are you, or is anyone living at this address, a veteran? YES-NO.
6. The fuel used for my home heating is _____ (type of fuel). My supplier of that product is _____ (company name/address)

Financial:

1. Present assessed value of your residence \$_____ (Andover Tax Office)
2. If owned, current balance on mortgage \$_____ and monthly payment amount \$_____.
3. If renter, Monthly Rent \$_____. What does rent **NOT** include? List on page 2 of this form.
4. Is there a second mortgage (or equity line) on your residence? YES - NO. If Yes, what is the outstanding balance \$_____, and monthly payment \$_____.
5. List significant monthly expense items not included in mortgage/rental payments. This should include:

Property Tax (Annual)	\$ _____
Homeowners Insurance	\$ _____
Electricity	\$ _____
Heating fuel: oil, gas	\$ _____
Other heating: coal, firewood, pellets, etc.	\$ _____
Phone - include cell cost	\$ _____
Cable TV/Internet	\$ _____
Auto Cost - Payment/Insurance/Fuel	\$ _____
Credit Card Payments	\$ _____

Any other major expenses not on list should appear on page 2 of this form.

