

# LIHEAP UTILITY ASSISTANCE AND WEATHERIZATION PROGRAMS

## 2011 POVERTY GUIDELINES – Valid through 12/31/11

Household Size	Monthly Income	Yearly Income
1	\$2,072.28	\$24,867.44
2	\$2,709.91	\$32,518.96
3	\$3,347.54	\$40,170.48
4	\$3,985.16	\$47,822.00
5	\$4,622.79	\$55,473.52
6	\$5,260.42	\$62,125.04
7	\$5,379.97	\$64,559.70
8	\$5,499.53	\$65,994.36
9	\$5,619.08	\$67,429.02
10	\$5,738.64	\$68,863.68
11	\$5,858.19	\$70,298.34
12	\$5,977.75	\$71,733.00
13	\$6,097.30	\$73,167.66
14	\$6,216.86	\$74,602.32
15	\$6,336.41	\$76,036.98

**NOTE:** Income amounts for family sizes greater than ten persons were determined based on the following calculation: Add \$119.55 monthly, \$1,434.66 annually for each additional family member. Example: to determine a household size of 8, take \$5,379.97 + \$119.55 = \$5,499.53 monthly, \$64,559.70 + \$1,434.66 = \$65,994.36 annually.

### INCOME VERIFICATION

1. Proof of income must be current and must cover the most current four (4) weeks from the date submitted. (Documents must cover a full month)
2. **Total gross** (before deductions) income for all members living in the household at the time application is submitted must be reported.
3. **PLEASE SEND COPIES. ORIGINALS CANNOT BE RETURNED**

GOOD: Considered Income	BAD: Not Considered Income
<ul style="list-style-type: none"> <li>• Temporary Assistance for Needy Families (TANF): Notice of Action, computer printout, benefit letter, copy of welfare check.</li> <li>• Supplemental Security Income: Notice of Planned Action or Form 2458, computer printout from Social Security Office, copy of bank statement showing SSI direct deposit, copy of SSI check.</li> <li>• Social Security: copy of current check(s), SSA Form 4926, or 2458, computer printout from Social Security Administration Office, Bank Statement showing direct deposit,.</li> <li>• Pension and Annuities: copy of a current check, verification on letterhead or annual statement from pension plan.</li> <li>• Wages: Copy of current paycheck stub(s) covering a one-month period and showing gross income.</li> <li>• Interest Income: monthly or quarterly bank statement, statement of interest income from bank or agency.</li> <li>• Disability Compensation: copy of a current check, printout or letter from agency or insurance company verifying the compensation amount.</li> <li>• Unemployment Benefits: copy of current checks(s), printout from Employment Development Department.</li> <li>• Child and/or Spousal support: copy of current check.</li> <li>• Support from an Individual: copy of check and statement signed by person providing the support.</li> <li>• General Assistance: Notice of Action from County Social Services, copy of a current check.</li> <li>• Veteran's Benefits: letter indicating receipt of Veteran's Pension, copy of Veteran's Administration check.</li> <li>• Signed Federal Tax Form 1040 (valid through April 15, 2011): WILL ONLY BE ACCEPTED FOR SELF-EMPLOYED.</li> </ul>	<ul style="list-style-type: none"> <li>• Capital Gains.</li> <li>• Adoption Assistance.</li> <li>• Foster Grandparents and Senior Companion Programs.</li> <li>• Educational assistance - Student income grants loans – Pell grants.</li> <li>• Any Assets Withdrawn from a Bank.</li> <li>• Draw down from Reverse Mortgages.</li> <li>• The Sale of Property (Car or House).</li> <li>• Tax Refunds.</li> <li>• Gifts.</li> <li>• Loans.</li> <li>• Lump-Sum Inheritances.</li> <li>• One-Time Insurance Payments.</li> <li>• Compensation for Injury.</li> <li>• Employer or Union Paid Portion of Health Benefits.</li> <li>• Fringe Employee Benefits.</li> <li>• Withdrawal from Savings.</li> <li>• Medical Stickers. Food Stamp with NO dollar amount.</li> <li>• Food or Housing Received in Lieu of Wages.</li> <li>• Federal Non-case Benefit Programs (Medicare, Medicaid, School Lunches, and Housing Assistance).</li> <li>• W2 Forms and Medi-Cal cards are not accepted as proof of income.</li> </ul>