

Requirements for 2025

Are you eligible to renew your services?

- Applied since 2019 and you are currently at the same address.
- If your address has not changed since 2024.

If you are renewing your services for 2025.

- INCOME (2025 AWARD LETTER EX: SS, SSDI, SSI).
- Customers should receive their award letter from the Social Security Administration Office in the month of November or December (please keep this copy).
- SNAP Award Letter (If applicable)
- HOUSING LETTER (If applicable)
- Any other income the household receives such as (check stubs for the past 30 days from the date you sign the application, child support, housing reimbursement).

Need to complete a 2025 Regular Application:

If you have never received assistance or have moved to another address since 2024, you must complete the renewal.

- Birth certificates (needed for all the individuals in the home).
- SS cards or legal document (needed for all the individuals in the home).
- DL or ID (needed for everyone in the home over the age of 18). Make sure the DL or ID is not expired/valid.
- Any income received by the household such as (SSI, SS, SSDI, CHECKSTUB from the past 30 days from the date the customer put on application, child support, housing reimbursement).
- Snap letter (If applicable).
- Housing Letter (If applicable).

Disclaimer: there may be more documents required at the time you apply.

Note: If you have a credit or a zero balance on your account, you cannot reapply until your credit is exhausted and you have a bill to pay.

Application statuses are updated weekly not daily.

- ❖ Text for Status Update: 936.553.0318
- ❖ Text to request an application by email: 936.221.8707
- ❖ Text to request an application by mail: 936.221.8695
- ❖ Customer can email applications to: programinfo@get-cap.org
- ❖ To set up an F2F appointment: 936.720.7474
- ❖ Website: www.get-cap.org

WEATHERIZATION

Weatherization DOES NOT include windows, doors, flooring, roofing, wiring, or plumbing.

- ❖ *Assessments are scheduled by our staff by phone and/or home visits. After 2 (two) attempts to reach out with no response, your application will be denied.*
- ❖ *Any missed appointments for an assessment with no prior notice will cause your application to be denied. You are allowed to reschedule 1 (one) time. Any Subsequent attempts to reschedule an assessment will cause the application to be denied.*
- ❖ *Any home that is considered a health and safety risk for our staff or contractors will be subject to further review at GETCAP'S discretion.*
- ❖ *Landlord permission form-RENTERS ONLY (see our website to request a copy.*

You must include a map or brief description of your home on page 3 of your application

**PLEASE INCLUDE PROPER POSTAGE-MAIL WITH INSUFFICIENT FUNDS
WILL BE RETURNED**

**Greater East Texas Community Action Program
PO Box 631938
Nacogdoches, TX 75963**

Does your family receive any of the following benefits? (Check all that applies below)

- Social Security Retirement Pension TANF Child Support
 SSDI EITC Snap Alimony/Spousal Support
 Unemployment Insurance Private Disability Insurance Worker's Compensation
 Disability Pension VA Service-Connected Disability Pension Other
 VA Non-Service Connected

Does your family receive any of the following benefits? (Check all that applies below)

- WIC Childcare Voucher Public Housing HUD-VASH
 Permanent Supportive Housing Housing Choice Voucher Affordable Care Act

Has this residence ever received services from the Weatherization Program? Yes No When? _____

What year was your home built? _____ Do you OWN or RENT your residence? _____

If OWNED, type of housing? Private Home Mobile Home (Single or Double Wide) Monthly Mortgage: \$ _____

If RENTED, type of housing? Private Home Mobile Home (Single or Double Wide) Apartment

Subsidized Housing Are utilities included in rent? Yes, No Monthly Rent: \$ _____

Landlord Name: _____ Address: _____ City: _____ State: _____ Phone#: _____

Type of Air Conditioner Used: Window Unit Central Unit Evaporative Cooler None

Type of Heater Used: Gas Space Heater ---- How many? _____ Central Unit (Gas or Electric)
 Electric Heater --- How many? _____ Stove --- Gas Wall Furnace
 Wood

If any, what appliances use gas or propane: _____.

Is your roof leaking? Yes No If YES, how long has it been leaking? _____ In how many rooms is it leaking? _____

Are there holes in your floors? Yes No Does your home have good foundation? Yes No

I acknowledge I have received Energy Saving Tips	<input type="checkbox"/> Y	<input type="checkbox"/> N
Do you have small children who are not in school? If so, would you like information about our Head Start Program? (Locations: Nacogdoches, San Jacinto, Smith, Houston, and Walker County)	<input type="checkbox"/> Y	<input type="checkbox"/> N
Do you have specific goals that you would like to achieve in employment or education?	<input type="checkbox"/> Y	<input type="checkbox"/> N
Do you need assistance locating your local child support office	<input type="checkbox"/> Y	<input type="checkbox"/> N
Would you like a representative to contact you about Weatherization?	<input type="checkbox"/> Y	<input type="checkbox"/> N
Do you need assistance with food or locating your local food pantry?	<input type="checkbox"/> Y	<input type="checkbox"/> N
Do you need assistance locating your local Workforce Solution office?	<input type="checkbox"/> Y	<input type="checkbox"/> N
Would you like for a representative to contact you about RISE (Reaching Independence through Supportive Elevation)	<input type="checkbox"/> Y	<input type="checkbox"/> N

Please explain what has happened in the past 30 days that has caused you to seek our assistance and/or a reduction in income:



Systematic Alien Verification for Entitlements (SAVE) System and US Citizenship/US National
 Applicant Certification Form for CEAP, DOE-WAP, LIHEAP-WAP Subrecipients, and SHTF, ESG, HHSP, EH (political subdivision only)

The program for which you are applying requires verification that you are a U.S. citizen, a non-citizen national, or a legal resident of the United States. Documentation of your status is required. This agency uses the Systematic Alien Verification for Entitlements (SAVE) System to verify the status of non-citizens.

Household Member Name	U.S. Citizen (Born or Naturalized) or U.S. National (Yes/No)	Qualified Alien (Yes/No)	Documentation Provided for:	
			Citizenship/Qualified Alien	Identification

To add additional household members, use another copy of this form.

***DECLARATION OF INCOME STATEMENT
(DECLARACION DE INGRESOS)**

State the gross income for household members, 18 years and older, who have no documentation of the income received in the **30 day period** prior to the date of application for assistance: *(Declarar el ingreso recibido por los miembros de su hogar, que tienen 18 años de edad ó mas, y que no tienen documentación de ingresos por los 30 dias antes del aplicar para asistencia)*

Name (Nombre)	GrossIncome Received (Ingreso Bruto Recibido) \$	Last Day of Employment:
Name (Nombre)	GrossIncome Received (Ingreso Bruto Recibido) \$	Last Day of Employment:
Name (Nombre)	Gross Income Received (Ingreso Bruto Recibido) \$	Last Day of Employment:
Name (Nombre)	GrossIncome Received (Ingreso Bruto Recibido) \$	Last Day of Employment:
Name (Nombre)	GrossIncome Received (Ingreso Bruto Recibido) \$	Last Day of Employment:
Name (Nombre)	GrossIncome Received (Ingreso Bruto Recibido) \$	Last Day of Employment:

**My household has no documented proof of income due to the following situation.
(Mi hogar no tiene prueba para documentar los ingresos por medio de tal razones):**

Signature Page

Utility Providers	Account #	Account Holder's Name:
Electric Company:		
Gas Company:		
Propane Company:		

I authorize the Texas Department of Housing and Community Affairs and its contracted agency to solicit/verify information on my energy billing and consumptions histories, both past and future, to the extent that the information is used only to determine program eligibility and to provide data.

Warning: Section 1001 of the U. S. Code makes it a criminal offense to make willful false statements of misrepresentation to any Department or Agency of the U. S. as to any within its jurisdiction.

I understand that a photocopy of this release is as valid as the original.

Release to be renewed only if information changes

Certification

- The information provided is true and correct to the best of my knowledge and belief.
- My household income has been annualized at the time of application according to pre-established procedures.
- I understand I may appeal a denial of eligibility, and amount of assistance received, or a delay in service delivery.
- I authorize the Texas Department of Housing and Community Affairs (TDHCA) and its contracted agencies to solicit or verify information on my utility and/or fuel bills, both past and future to the extent the information is used only to provide data relevant to my application for assistance.
- I am aware that I am subject to prosecution for providing false, misleading, or fraudulent information.

Standard Information Release

I hereby give my permission to Greater East Texas Community Action Program for the following, and do affirm the stated understandings:

- GETCAP may obtain information to complete my application for assistance or services.
- GETCAP may share necessary information with other individuals or organizations to provide case management services and/or secure resources on my behalf. I understand information will only be shared when necessary to meet the requirements of my established service plan.
- GETCAP may use my success story, likeness, recording, both audio and video in public relations efforts, and may share same with other entities with or without personal identifying information when doing so shall be for the good of improving community development.
- I understand GETCAP may use my likeness and/or success story in releasing annual report information to State and Federal entities, and in doing so, will provide every assurance that personal identifying information will be redacted.
- I understand I am not entitled to any compensation for any use of my story or likeness.
- I will continue to provide income information for Case Management reasons for as long as necessary for GETCAP to release me from the Self-Sufficiency Program.

Disability Certification Form

Name of Person with Disability:

Name of Person with Disability:

I hereby certify that I am disabled as defined in one of the following:

- 7(9) of the Rehabilitation Act of 1973
- 1614 (a) (3) (A) or 223 (D) (1) of the Social Security Act
- 102 (7) of the Developmental Disabilities Services and Facilities Construction Act (38 USC Chapter 11 or 15)

- I receive benefits because of my disability
- I do not receive benefits because of my disability
- I do not receive benefits because of my disability, but I have applied for benefits

Under penalty of perjury, I have provided truthful information in this certification. In Texas, under Sec. 37.101 of the PENAL CODE, it is a felony of the third degree to falsify this document.

Applicant Signature	Date: / /2025
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For Office Use ONLY

Eligible? Yes <input type="checkbox"/> No <input type="checkbox"/>	If not, has the applicant requested an appeal? Yes <input type="checkbox"/> No <input type="checkbox"/>
Income denial? Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, what is the annualized income?	
Is there a priority member in the household? Elderly <input type="checkbox"/> Elderly/Disabled <input type="checkbox"/> Documented crisis <input type="checkbox"/> Disabled <input type="checkbox"/>	
Child Under 6 <input type="checkbox"/> Cutoff notice <input type="checkbox"/>	
Recommended Utility Assistance Component: <input type="checkbox"/> HCC <input type="checkbox"/> UA <input type="checkbox"/> LIWAP <input type="checkbox"/> EA <input type="checkbox"/> Donated Funds <input type="checkbox"/> Other	

Customer Service Representative:	Date:
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Filling out the form electronically

Download the application from your browser to adobe reader

- a. To download Adobe Acrobat Reader, please go to <https://get.adobe.com/reader/> it's a free PDF viewer

Open the application on adobe reader to fill it out

After completing your application, press save then email the application with your documents, to programinfo@get-cap.org from your email address.

Energy Saving Tips

You can do something to keep your summer electric bills at their lowest by following these simple steps.

1. **Thermostat setting:** You can reduce your air-conditioning cooling cost by as much as 14% simply by increasing the thermostat setting by 1 degree. For energy conservation, we recommend a 78-degree setting.
2. **Insulation:** Insulation is designed to keep heat out during the summer and to keep heat in during the winter. Adequate insulation can more than pay for itself in just a few years, with money saved on air-conditioning and heating operation.
3. **Let it breathe:** Dirty filters cause unnecessary strain and can lead to equipment breakdowns. Air-conditioning servicemen say about half of their trouble calls are traced to dirty filters. We suggest changing or cleaning your filters at least once a month, preferably every two weeks for the best results.
4. **Maintenance:** Have your unit checked and cleaned each year to ensure maximum efficiency and long life. Have the coils checked and cleaned to see if they are dirty and check the refrigerant for charge and belts for wear and adjustments.
5. **Efficiency:** If your unit is 10 years old or older a new, properly sized, high efficiency system should be installed.
6. **Don't forget your ducts:** You can save 5% or more on your air-conditioning costs by having your duct system checked for air leaks and for adequate insulation.
7. **Attic ventilation:** Attic temperatures sometimes rise to 140 degrees during the summer months. Good attic ventilation will lower the temperature and reduce cooling requirements inside the home.
8. **Air leaks:** You can save up to 10% on air-conditioning costs with a well-sealed house. Seal leaks around doors, windows, outlets, switch plates, and plumbing outlets. Weather stripping will make your home more comfortable too.
9. **In the shade:** If your house has a lot of windows, particularly on the east and west sides, you save money by shading the window with awnings, solar screens, or shutters. Trees and shrubs that shade your home also help to reduce the air-conditioning workload. Venetian blinds or drapes are helpful as well.
10. **Turn it on:** By using kitchen and bathroom exhaust fans to remove excess heat and moisture, you can save each month on your overall cooling bill.
11. **Lower is better:** You can save money on your water heating bill by setting the temperature control at a moderate 140 degrees, or as low as needed, and still have plenty of hot water.
12. **Up the chimney:** If you close your fireplace damper during the summer and winter, (when not in use), you save on both your cooling and heating bills. Installation of a glass fireplace screen will also help prevent air from going up the chimney.

Attention: This is your copy, keep for your records.