State of Alaska
Department of Health & Social Services
Division of Public Assistance - Heating Assistance Program
http://www.hss.state.ak.us/dpa/heat
liheap@alaska.gov
Juneau 465-3058, Statewide 800-470-3058

Application for Heating Assistance

When can I apply?

Applications for Heating Assistance are accepted October 1, 2011 through April 30, 2012 of each year. If you are legally disabled or age 60 or older, we will accept your application as early as September. The program begins issuing grants on November 1, 2011.

Applications for the Subsidized Rental Housing Utility Deposit (SRHUD) are accepted throughout the year.

What are the income guidelines?

Household Size	Gross Income (In Prior Month)
1	$2,549
2	$3,447
3	$4,343
4	$5,238
5	$6,136
6	$7,031

For each additional household member add $896

How is the grant calculated?

Eligibility is not solely based on income. Grants are calculated using a point system based on: the area of the state where you live, fuel type, dwelling type, household size and income. Each item has a point value. If you have low heating cost points after all factors are calculated, you may not qualify.

How do I apply?

All Public Assistance offices will accept your application. You can also mail or fax the application to:

Heating Assistance Program
400 Willoughby, Suite 301
Juneau, AK 99801-1700

In Juneau Fax 465-3319
All other areas toll-free Fax 888-282-3319

Programs

Heating Assistance

Helps households pay a portion of home heating expenses.

Subsidized Rental Housing Utility Deposit (SRHUD)

Helps pay a utility deposit when households are moving into Section 8 or subsidized rental housing, provided that heat is included in rent.

How long will it take?

It may take up to 45 days to process your application. **Continue to pay your bills while waiting for a decision on your application.** If your bills are overdue or you are in danger of running out of fuel, contact your heat or utility company to set up a deferred payment agreement. Let them know you have applied for Heating Assistance.

How can I check on my application?

You can check to see if we received your application or find out your grant amount by calling our 24-hour information hotline: Anchorage 269-5777 or all other areas toll free 1-888-804-6330. You will be asked:

- ✓ The social security number of the person listed on page 1, question 2, of your application;
- ✓ Your security code is the last four digits of the phone number listed on page 1, question 2, of your application. If there is not a daytime phone listed, use message or cell number.
- ✓ If you did not list any phone numbers, your security code will be the 4 digit birth year of the person listed on page 1, question 2 of your application.
- ✓ For your records, write your security code here _____.

Read and Keep this Page

How often can I receive Heating Assistance?

You can receive one grant each season between November 1- April 30.

Are the grants sent directly to me?

In most cases, your grant is paid to your fuel vendor and/or electric company and will be credited to your account.

Do I qualify if my heat is included in my rent?

If heat is included in your rent and you do not live in subsidized housing, you may qualify for Heating Assistance.

Do I qualify if I live in Section 8 or subsidized rental housing?

Heating Assistance: If heat is included in your rent, you do not qualify for Heating Assistance.
Subsidized Rental Housing Utility Deposit (SRHUD): If you are requesting help with a utility deposit required to establish electric service for Section 8 or subsidized rental housing and heat is included in your rent, you may be eligible. If you pay for your heat you will not qualify for a SRHUD but you may qualify for Heating Assistance.

Can I apply for Heating Assistance if I do not live in the home?

No. You must live in the home to qualify.

How do I report income? (Please provide proof of all income with your application.)

List all your income received the month prior to the date you signed your application. Without proof, your application may be delayed or denied. Acceptable proof includes wage stubs showing check date, gross income and year-to-date figures, an employer work statement (Form A) or signed letter from your employer. Year-end statements or award letters are required for Social Security and retirement benefits. **Bank statements are not adequate proof.** If you are a seasonal worker or self-employed, go to Form B or C to determine your monthly income.

Do I report my Permanent Fund Dividend?

PFD income is not counted towards your eligibility for Heating Assistance. However, list it as it helps us understand how you are meeting your expenses.

What if I have a disconnect notice or am out of fuel?

If you have run out of fuel or have a notice that you will be disconnected in 48 hours, contact your heat or utility company immediately to see if you can make payment arrangements. If they cannot make an arrangement with you, you may get emergency processing if you send in a complete application and attach copies of your disconnect notice, home heating and electricity bills, and proof of income for all household members. Your application will be reviewed for emergency processing. If you do not qualify, your application will be processed in the date order it was received in the Heating Assistance Office, or other Division of Public Assistance office.

Can I transfer my grant?

Once you have received your grant, it cannot be transferred unless you have moved to an area that is served by a different heat/electric company. Contact our office if you move so we can help you transfer your grant.

Read and Keep this Page

How do I avoid delays?

Providing all the information requested on the application will avoid delays.

- Complete (print carefully), sign and date the application.
- Attach copies of pay stubs received in the month before you apply for anyone in the household who worked. If you cannot locate all of your pay stubs, have your employer(s) fill out Form A.
- If you have worked seasonally, attach copies of pay stubs for the last 12 months. If you cannot locate all of your pay stubs, have your employer(s) fill out Form B.
- If you have been self-employed, provide an itemized listing of all business related income and expenses received during the last 12 months using Form C, and provide a copy of your most recent income tax return.
- If you live in a trailer or mobile home 35 feet or longer, list the exterior length and width in question 12.
- Attach copies of your most recent fuel and/or electricity bill(s). You must show a cost to be eligible.
- If heat is included in your rent, attach a copy of your rental agreement and most recent rent receipt showing heat is included in your rent.
- Attach a copy of your disconnect notice if it is within 48 hours and you are requesting emergency processing.
- If you live in Section 8 or subsidized housing, attach a copy of your rental housing worksheet.
- **It is your responsibility to provide all required documentation to process your application.**

How do I know if I will receive Heating Assistance from a tribal organization?

For a list of communities served by tribal organizations go to:
http://www.hss.state.ak.us/dpa/programs/hap/tribal.html or contact your local tribal organization or the Heating Assistance office. It can delay your benefits if you apply with the wrong organization.

Tribal organizations providing Heating Assistance are:

• Aleutian/Pribilof Islands Association - 276-2700	• Orutsararmiut Native Council - 543-2608
• Assoc. of Village Council Presidents - 543-3521	• Seldovia Indian Tribe - 234-7898
• Bristol Bay Native Association - 842-2262	• Tanana Chiefs Conference - 452-8251
• Kenaitze Indian Tribe I.R.A. - 335-7200	• Tlingit-Haida Regional Housing Authority - 780-6868
• Kodiak Area Native Association - 486-9800	• Yakutat Tlingit Tribe – 784-3302
• Kuskokwim Native Association - 675-4384	• Cook Inlet Tribal Council - 793-3300

Can I receive a grant from both the state and a tribal organization?

No. You cannot receive Heating Assistance from the state if you are eligible for assistance from a tribal organization.

Can a Fee Agent help me complete my application if I live in rural Alaska?

Yes. Some areas have fee agents to help you complete your application. You do not have to use a fee agent.

Would you like to lower the cost of heating your home?

Weatherization programs may be able to help lower your heating cost by installing energy efficient improvements. For your local weatherization program go to http://www.ahfc.state.ak.us/grants/weatherization.cfm or call:

Phone	Weatherization provider	Service area
800-478-8080	Alaska Community Development Corporation	Mat-Su, Kenai-Pen, Copper River, Kodiak, Bristol Bay, Aleutians, Southeast Alaska except Juneau
800-478-5323	Interior Weatherization	Interior Alaska
800-478-7227	RurAL Cap	Anchorage, Juneau, western and northern Alaska

Your Rights and Responsibilities

What if I disagree with your decision?

Any person whose application is denied or not acted upon with reasonable promptness, or whose benefits are reduced or terminated, has a right to a fair hearing. You may request a hearing by telephone, in person, or in writing. Contact any Public Assistance office or write the Heating Assistance Program. Hearing requests must be made within 30 days after you are mailed a notice of a decision on your Heating Assistance case. At the hearing you may represent yourself. You may also be represented by legal counsel (e.g., Alaska Legal Services Corporation) or by another person of your choice.

How are my rights protected?

No person in the United States, on the ground of race, color, national origin, or disability, shall be excluded from participation or be denied the benefits of federal assistance. If you feel you have been discriminated against, you may file a complaint with the Division of Public Assistance or with the United States Department of Health and Human Services.

Do I need to tell you if something changes?

Yes. Not having current information may delay your benefits. **It is very important that you report changes in your address, phone number or in household members moving into or out of the home within 10 days.** Report changes to the Heating Assistance office: in Juneau 465-3058, all other areas toll free 1-800-470-3058 or email at liheap@alaska.gov.

What happens if I do not follow the rules?

Any member of your household who deliberately breaks any rules and receives benefits to which they are not entitled must repay the benefits and may be prosecuted.

Release of Information

Your signature on this application gives the Department of Health and Social Services and the Department of Law permission to ask for information about your finances, family and personal history. This information is only used in the administration of the Heating Assistance Program and will not be released to any other person or agency outside of the Department of Health and Social Services and our weatherization partner, Alaska Housing Finance Corporation. The Release of Information will be in effect while you are an applicant or recipient of Heating Assistance and for any later investigations of your eligibility and receipt of benefits.

The people or organizations that may be contacted include, but are not limited to: fuel and electric companies, the Alaska Housing Finance Corporation, Department of Labor and Workforce Development, Department of Law, Department of Military and Veterans Affairs, Department of Corrections, Department of Revenue, U.S. Immigration Services, employers, landlords, Native corporations, private individuals, Social Security Administration, and tax assessors.

Read and Keep this Page

Mail your application to: Heating Assistance Program
400 Willoughby, Suite 301, Juneau, AK 99801-1700
Juneau Phone 465-3058, Fax 465-3319, Statewide 800-470-3058, Fax 888-282-3319
Filing Deadline: April 30, 2012

Office Use Only

Date Received

Application for Heating Assistance

1. Which program are you applying for? (Check one program)

- ❑ Heating Assistance pays a portion of home heating costs.
- ❑ Subsidized Rental Housing Utility Deposit (SRHUD) helps pay a utility deposit when households are moving into Section 8 or subsidized rental housing, provided that heat is included in the rent.
- ❑ I am out of fuel or have a disconnect notice for within 48 hours (Attach copy of disconnect notice).

2. Head of household (Please Print)

Name (First, MI, Last)	Birthdate	Male or Female ❑ ❑	Social Security Number
Mailing Address	City	State	Zip Code	US Citizen or qualified alien ❑ Yes ❑ No
Physical Address	City	State	Zip Code
Daytime Phone	Message and/or Cell Phone	Email (Optional)

Your Ethnicity/Racial Heritage (optional): You may check one or more. Are you Hispanic? ❑ Yes ❑ No
❑ Caucasian ❑ American Indian ❑ Alaska Native ❑ Asian ❑ African-American ❑ Pacific Islander ❑ Other

People in your household

3.Tell us about other people living in your home. If you need more space, attach another sheet of paper.

Household Members (First, MI, Last)	Birthdate (Required)	Relation (NR= Not Related)	Social Security Number (Required)	US Citizen or qualified alien (Yes/ No)	Receive income last month?
Example: Joe D Jones	**2/10/74**	**NR**	**###-##-####**	**Y**	**N**

4. Are there any other persons living with you at this residence who are not listed above? ❑ Yes ❑ No
If Yes, list the names of roommates or other persons living at this residence and describe how rent and utility expenses are shared._____

_____

5. Are you or anyone in your household:
Legally Disabled ❑ Yes ❑ No Age 60 or over ❑ Yes ❑ No Receiving Public Assistance ❑ Yes ❑ No

6. Have you or any of the adults in your household applied for Heating Assistance from a tribal or Native organization in your area? ❑ Yes ❑ No If "Yes," stop here. You cannot receive Heating Assistance from both the State of Alaska and a tribal or Native organization.

Income in your household

Example of how to report income

Application signed in:	Provide proof of all income received in:
September ➔	August
October ➔	September

Application signed in:	Provide proof of all income received in:
January ➔	December
February ➔	January

7. List all your income from the month prior to the date you signed your application. Without proof, your application may be delayed or denied. Acceptable proof includes wage stubs showing check date, gross income and year-to-date figures, an employer work statement (Form A) or signed letter from your employer. Year-end statements or award letters are required for Social Security and retirement benefits. **Bank statements are not adequate proof.** If you are a seasonal worker or self-employed, go to Form B or C to determine your monthly income.

Type of Income Codes

WA	Wages	TT	Tribal TANF	FC	Foster Care Payments
SEA	Seasonal Work	WC	Worker's Compensation	BIA	BIA General Assistance
SE	Self-Employment	BP	Bingo/Pull Tab Winnings	SL	Student Loans/Grants
ATAP	Alaska Temporary Assistance	UI	Unemployment Insurance	IN	Interest
SSI	Supplemental Security Income	TI	Tips and Gratuities	CS	Child Support and Alimony
SSA	Social Security	RI	Rental Income	CO	Cash Outs of Retirement or Pension
PFD	Permanent Fund Dividend	FLS	Family Support (Please Explain)	APA	Adult Public Assistance Program
VB	Veteran's Benefits	GR	General Relief	PE	Pension (other than Veteran's benefits)
		DI	Dividends	OT	Other (Please Explain)_____

Household member	Type of Income (See codes above)	Gross Income	Form of Proof	Last day of work	Weekly? Monthly?
Example: Susan Jones	**WA**	**800.00**	**Pay stubs**	**January 31**	**Weekly**

Employer Name _____ Phone Number _____

8. Does anyone have income from seasonal/self-employment? (farming, logging, home party sales) ❑ Yes ❑ No
See Form B or C for examples, how to calculate gross income and what to send as proof of income.

9. Does anyone in your house receive rental income from property? ❑ Yes ❑ No

Owner:_____Monthly Rental Income:_____

10. If your household income doesn't cover basic living expenses, explain how you are paying these costs.

Rent:_____

Utilities:_____

Food:_____

Questions about your residence

11. What kind of housing do you live in? Check the box that applies

Apartment or Condominium: ↓	❑ House	❑ Boat	❑ Van or Car*
❑ Duplex 2 units	❑ Cabin	❑ Group Home	❑ Pick-Up Camper*
❑ Triplex 3 units	❑ Renting a Room	❑ Travel Trailer (less than 35 feet) Lean-to Attached ❑ Yes ❑ No	❑ Tent*
❑ 4 or more units	❑ Studio/Efficiency	❑ Mobile Home (35 feet or longer)	❑ Motel /Hotel/Hostel*
*If you live in temporary housing, provide a signed statement from someone who can prove you have lived there for 60 consecutive days.			❑ Boarding Home*

12. If you live in a trailer or mobile home 35 feet or longer, what is the exterior length:____ft and width:____ft

13. How many bedrooms are in your home? (A loft counts as one bedroom) _____

14. How much rent or mortgage do you pay each month? Rent: $_____ Mortgage: $_____ Space Rent: $ _____

15. Is your rent based on 30 percent of your income (subsidized or Section 8)? ❑ Yes ❑ No If yes, attach a copy of your rental housing worksheet.

16. We may need to contact your landlord or manager to get information to process your application.

Name of landlord:_____ Address:_____ Phone Number:_____

Questions about your heating and electric

17. What is your main heat source? (Check only one. If you have more than one, check the one you use the most.)

❑ Natural Gas ❑ Fuel Oil ❑ Electricity ❑ Kerosene ❑ Coal ❑ Propane ❑ Wood ❑ Other_____

18. If you heat with wood, do you harvest it yourself? ❑ Yes ❑ No

19. Who pays for your home heat? ❑ Self ❑ Landlord ❑ Other (If other, please explain) _____

20. Who pays for your electricity? ❑ Self ❑ Landlord ❑ Other (If other, please explain) _____

21. **If you pay both heat <u>and</u> electricity, should part of your grant be sent to your electric account?** ❑ Yes ❑ No

Please tell us the name of your fuel and/or electric company

22. _____

Name of Fuel Company | Account Number | Name on Account | Amount of Current Bill

23. _____

Name of Electric Company | Account Number | Name on Account | Amount of Current Bill

- **Attach copies of your most recent fuel statement, electricity bill, or wood vendor receipts.**
- If heat is included in your rent, attach a copy of your rental agreement and most recent rent receipt or a statement from your landlord showing heat is included in your rent.

24. If your account for fuel or electric is in someone else's name, please explain_____

Signature

Statement of Truth

To receive assistance, you must agree to all of the statements below and sign this form.

- I understand that I must notify heating assistance within 10 days if I move or change household members.
- I understand that a Department representative may call at my home, and may contact other people in order to verify my eligibility for assistance. I also understand that information I give may be verified by computer cross-matching with other agencies.
- I authorize the Alaska Department of Labor to release to the Division of Public Assistance information about my eligibility for unemployment insurance and work history.
- I authorize the Division of Public Assistance to communicate with my vendor(s) and other agencies on my behalf as it relates to the Heating Assistance Program.
- I understand that I must be currently living in the home for which I am applying.
- I have read the Rights and Responsibilities and the Release of Information sections of the application packet and I understand them, including fraud and penalties, as described in this application.

I certify under penalty of perjury, or of unsworn falsification in violation of AS11.56.210, that the statements made regarding the persons in my home and the income and all other items that pertain to my possible eligibility for benefits are true and correct to the best of my knowledge.

25. X_____

Signature of Adult listed on Page 1, Question 2 | Date | Signature of Witness, if signed with an "X" (Legal guardians provide documentation)

26. X _____

Signature of Other Adult Applicant | Date | Signature of Witness, if signed with an "X"

Did you remember?

- ❑ Answer all 26 questions
- ❑ Include proof of income or have your employer complete Form A or Form B
- ❑ Include a copy of your latest rent receipt and rental agreement if you are renting
- ❑ Include a copy of your latest home heating and electric bill, or wood vendor receipt
- ❑ Read the Statement of Truth above
- ❑ Sign and date the application with today's date
- ❑ Provide social security numbers and dates of birth for all household members

Fee Agent and Office Use Only

- ❑ I have completed the Fee Agent Interview Report form.
- ❑ I certify that I have checked the information on the application carefully and that it is a true and complete statement of facts according to the best of my knowledge.
- ❑ I understand that it is against the law to make false statements and that I am subject to prosecution if I do.
- ❑ I understand that if this application is not complete, I may not be paid.

Date_____ Print Name _____ Daytime Phone _____

Address: _____

Employment Statement - Form A

State of Alaska
Heating Assistance Program
400 Willoughby, Suite 301
Juneau, Alaska 99801-1700

In Juneau Phone 465-3058
All other areas toll-free Phone 1-800- 470-3058
In Juneau Fax 465-3319
All other areas toll-free Fax 1-888-282-3319
Email: liheap@alaska.gov

Employee Name: _____ SSN: _____

Employee Signature: _____ Occupation: _____

Business Name (Please Print): _____ Please complete, sign, and fax or mail this form to the address above. Your assistance is appreciated.

For Employer Use Only

Date employment began: _____ Date first paycheck issued: _____

Date employment ended (if employee is no longer working for you): _____

Date last paycheck was issued: _____ Gross amount issued: _____

Provide the information below for the last eight (8) paychecks issued or attach a copy of a computer print out.

Gross Pay	Issue Date	Tips Received

Employer Address: _____

Employer Signature (Required): _____ Date: _____

Payroll Contact Number: _____

******Note: The Employer Must Sign this Statement******

Seasonal Work Statement - Form B

State of Alaska
Heating Assistance Program
400 Willoughby, Suite 301
Juneau, Alaska 99801-1700

In Juneau Phone 465-3058, all other areas toll-free Phone 1-800- 470-3058
In Juneau Fax 465-3319, all other areas toll-free Fax 1-888-282-3319
Email: liheap@alaska.gov

Examples of seasonal employment may include: construction, fishing, fish processing, logging, mining, trapping, tourism related, firefighting, oil field and school district occupations. Be sure to submit verification of income from all sources. Your total income for the previous 12 months will be divided by 12 to arrive at a monthly average.

Employee Name:_____ SSN:_____

Employee Signature:_____Occupation:_____

EMPLOYER: This form is to be used to verify seasonal employment income for the past 12- month period. Please complete, sign, and mail or fax this form to the address above. Your assistance is appreciated.

For Employer use only

Date Employment Began:_____ Date first paycheck issued: _____

Date Employment Ended (if employee is no longer working): _____

Date last paycheck was issued: _____ Gross amount issued: _____

Circle the past 12 months of seasonal employment:

20___ JAN FEB MAR APR MAY JUN JUL AUG SEP OCT NOV DEC
20___ JAN FEB MAR APR MAY JUN JUL AUG SEP OCT NOV DEC

Provide the information below for the past 12-month period.

Gross Pay/ Issue Date	Gross Pay/ Issue Date	Gross Pay/ Issue Date

Business name (Please Print): _____

Employer Address: _____

Employer Signature (Required):_____ Date: _____

Payroll Contact Number:_____

****** Note: The Employer Must Sign This Statement ******

Self-Employment Income and Expenses - Form C

Examples of self-employment include: commercial or charter fishing, carving, trapping, baby-sitting or day care, crafts, home party sales, cosmetic sales, taxi driving, owning your own business and rental income.

Please provide a copy of your most recent IRS 1040 and Schedules C, K, or S and any other tax forms supporting self employment or partnerships. We can either deduct 50% of your gross earnings toward the cost of doing business or you can provide an itemized listing of all business related income and expenses received during the prior 12 months. If we do not receive this listing, we will use the 50% deduction for self-employment business expenses.

- Allowable business expenses are those expenses that are necessary, non-personal costs of doing business.
- Non-allowable business expenses are depreciation, amortization and the principal portion of payments on business debt, personal or home expenses which the household would incur regardless of the business.

Your total 12-month self-employment income, less allowable business related expenses, and any other earned and unearned income, will be divided by 12 to arrive at a monthly average. Attach additional pages as necessary.

If you are self-employed through fishing, please send a copy of your entire fishing settlement for the past 12 months. If you have computerized records, you may provide a copy of your ledger documenting your business related income and expenses for the previous 12-month period. Please sign and date the ledger.

Name of Self-Employed Person:_____Name of Business:_____

Type of Business:_____Business Address:_____

Circle the past 12 months of self-employment:

20___ JAN FEB MAR APR MAY JUN JUL AUG SEP OCT NOV DEC
20___ JAN FEB MAR APR MAY JUN JUL AUG SEP OCT NOV DEC

You may be asked to provide additional documentation such as: copies of ledger books, trip tickets or letters from people who have paid you.

Itemized Business Income			Itemized Business Expenses		
Date	Source	Amount	Date	Source	Amount
	12-Month Income Total			12-Month Expenses Total	

Attach additional pages as necessary.

I certify under penalty of perjury, or of unsworn falsification in violation of AS11.56.210, that this income and expenditure information is true and correct to the best of my knowledge.

Signature: _____ Printed Name: _____ Date: _____

Would You Like to Register to Vote?

You may register to vote in Alaska if:

1. You are a United States citizen.
2. You are a resident of Alaska.
3. You are are at least 18 years of age or will be 18 within 90 days of completing the registration application.
4. You are not a convicted felon, unless you have been unconditionally discharged.
5. You are not registered in another state, unless you cancel that registration. (There is an area on the Alaska registration application for you to cancel if needed.)

Important Notices

1. Applying to register or declining to register to vote will not affect the services or the amount of benefits that you will be provided by this agency.
2. If you would like help filling out the voter registration form, we will help you. The decision whether to seek or accept help is yours. You may fill out the registration form in private.
3. If you decline to register to vote, your decision will be confidential. If you choose to register to vote, the office at which your voter registration application is submitted will remain confidential and will be used only for your voter registration purposes.
4. If you believe that someone has interfered with your right to register or to decline to register to vote, your right to privacy in deciding whether to register or in applying to register to vote, or your right to choose your own political party or other political preference, you may file a complaint with the Director of the Division of Elections by calling 907-465-4611, or toll-free at 866-952-8683 or you may write to: Director, Division of Elections, PO Box 110017, Juneau, AK 99811-0017.

If you are not registered where you live now, would you like to apply to register to vote here today?

(Check one)

❑ Yes. I would like to register to vote. (Please fill out the attached registration application.)
❑ No. I do not want to register to vote.

Note: If you do not check either box, you will be considered to have decided NOT to register to vote at this time.

_____ _____

Name of Applicant Date

This form will be retained with this agency.

Completed voter registration applications will be mailed to the Division of Elections.

STATE OF ALASKA VOTER REGISTRATION APPLICATION

Refer to instructions on the reverse side for specific information and identification requirements.

Please print clearly in blue or black ink.

1. You MUST complete this section for registration.

❑ Yes ❑ No I am a citizen of the United States.

❑ Yes ❑ No I am at least 18 years old or will be within 90 days of completing this application.

If you checked NO to either question, do not complete this form as you are not eligible to register to vote.

2. Last Name **First Name** **Middle Initial** **Suffix** **(Sr., Jr., etc.)**

3. Former Name: (If your name has changed)

4. You **MUST** provide the **Alaska** residence address where you claim residency. Do not use PO, PSC, HC or RR.

House # **Street Name** **Apt #** **City** **State** **ALASKA**

*❑ Keep my residence address confidential. **(Your mailing address in section 5 must be DIFFERENT from your residence address in section 4 to remain confidential.)**

5. Mailing Address:

_____

_____

_____

_____

6. You **MUST** provide at least **ONE**

*Social Security No. _____/_____/_____

*Last 4 Digits of Social Security No._____

*Alaska Driver's License No._____

*Alaska State ID Card No. _____

❑ I have not been issued a Social Security, Alaska Driver's License or State ID number.

7. You **MUST** provide

*Date of Birth _____/_____/_____
Month Day Year

8. *AK Voter Number_____
(If known)

9. Sex ❑ Male ❑ Female

10. ❑ I am a voter with a disability and would like information on alternative voting methods.

11. ❑ I am interested in serving as an election official. (Provide your phone number and/or email address in section 12.)

12. *Daytime Phone No._____

*Evening Phone No._____

*Email Address _____

13. Political Affiliation For information on political types see reverse No. 5.

Select only ONE Below

Political Parties:

❑ Alaska Democratic Party
❑ Alaska Libertarian Party
❑ Alaska Republican Party
❑ Alaskan Independence Party

or **Political Groups:**

❑ Green Party of Alaska
❑ Alaska Constitution Party
❑ Veterans Party of Alaska

or **Other:**

❑ Nonpartisan (no party affiliation)
❑ Undeclared (no party declared)
❑ _____

14. If you are registered to vote in another state, you **MUST** cancel that registration by providing the following:

City:_____ **State:**_____ **County:**_____ **Zip Code:**_____

Voter Certificate. Read and Sign: I certify, under penalty of perjury, that the above information I provided on this document is true and correct. I am not registered to vote in another state, or I have provided information to cancel that registration. I further certify that I am a resident of Alaska and I have not been convicted of a felony, or having been so convicted, have been unconditionally discharged from incarceration, probation and/or parole.

WARNING: If you provide false information on this application you can be convicted of a misdemeanor AS 15.56.050.

***SIGNATURE:**_____ **DATE:** _____

Registrar/Agency/Official – Check ID and complete this section

Registrar Name

OR

Agency Name

NVRA Agency

For Office Use Only

VN

D/P

*Items are kept confidential by the Division of Elections and are not available for public inspection except that confidential addresses may be released to government agencies or during election processes as set out in state law.

State of Alaska
Division of Elections

Voter Registration Application

To register to vote in Alaska you must be a U.S. Citizen, a resident of Alaska, and at least 18 years old or will be 18 years old within 90 days of completing this application.

Initial registration or registration changes must be made at least 30 days prior to an election. Once your application is processed, a notice will be mailed to you within 3 to 4 weeks.

1. **When Completing This Application You MUST Provide:**
   - **Alaska Residence Address Where You Claim Residency –** A complete physical residence address must be included on your application. The residence address you provide will be used to assign your voter record to a voting district and precinct. Your application will not be processed if you leave the residence address blank or if you provide a PO Box, HC No. and Box, PSC Box, Rural Route No., Commercial Address or Mail Stop Address on Line 4 of the application.

     If your residence has been assigned a street number, provide that number. If not, indicate exactly where you live such as, highway name and milepost number, boat harbor, pier and slip number, subdivision name with lot and block or trailer park name and space number. If you live in a rural village in Alaska, you may provide the community name as your residence address.

     If you have a different mailing address than your residence address, you may choose to keep your residence address confidential. Confidential addresses are not released to the general public, but may be released to government agencies or during election processes as set out in state law.

     Are you temporarily out of State? If so, and you have intent to return (active military and military spouses are exempt from intent requirements), you may maintain your Alaska residence as it appears on your current record. If you provide a new residence address, it must be within Alaska.
   - **Proof of Identity –** Your identity must be verified. If you have been issued a Social Security number, Alaska Driver's License, or Alaska State ID card, you MUST provide at least one number on Line 6 of the application. If you have never been issued one of the identification numbers, please indicate so by checking the box on Line 6.
   - **Date of Birth** – You MUST provide your date of birth.
2. **Are you submitting this application by mail, by fax, or email?** If so, and if you are not already registered to vote in Alaska, your identity must be verified either at the time you register or the first time you vote. If you would like to ensure that your identity is verified at the time you register, submit a copy of one of the below:
   - Current and valid photo identification
   - Passport
   - Birth certificate
   - Driver's license
   - State identification card
   - Hunting and Fishing license
3. **Are you registering from outside the State of Alaska?** If so, you must provide proof of Alaska residency, such as a copy of your Alaska driver's license, Alaska hunting or fishing license, student loan or college tuition documents showing Alaska as state of residence, proof of employment in Alaska, military leave and earnings statement that identifies Alaska as the state of legal residence or other documentation that supports your claim as an Alaska resident. If you do not provide proof of Alaska residency, your application will not be processed.
4. **Have you been convicted of a felony?** If so, you may register to vote only if you have been unconditionally discharged. Provide a copy of your discharge papers with this application if available.
5. **Political Affiliation.** Those parties that have gained recognized political party status under Alaska Statutes 15.60.010(25) are listed under **Political Parties**. Those groups that have applied for party status but have not met the qualifications to be a recognized political party under Alaska Statutes 15.60.010(25) are listed under **Political Groups**. Under **Other**, nonpartisan means you are not affiliated with any recognized political party or group and undeclared means you do not wish to declare a political affiliation. If you do not check a political affiliation, you will be registered as undeclared unless you are already registered under an affiliation.

Mail, fax or email (as a pdf, tiff or jpg attachment) your completed application to one of the offices below:

Visit our website at: www.elections.alaska.gov

Region I Elections Office
PO Box 110018
Juneau, AK 99811-0018
(907) 465-3021 – Telephone
(907) 465-2289 – Fax
Toll Free 1-866-948-8683

Region II Elections Office
Anchorage Office
2525 Gambell Street Suite 100
Anchorage, AK 99503-2838
(907) 522-8683 – Telephone
(907) 522-2341 – Fax
Toll Free 1-866-958-8683
Matanuska-Susitna Office
North Fork Professional Building
1700 E. Bogard Road, Suite B102
Wasilla, AK 99654-6565
(907) 373-8952 – Telephone
(907) 373-8953 – Fax

Region III Elections Office
675 7th Avenue Suite H3
Fairbanks, AK 99701-4594
(907) 451-2835 – Telephone
(907) 451-2832 – Fax
Toll Free 1-866-959-8683

Region IV Elections Office
PO Box 577
Nome, AK 99762-0577
(907) 443-5285 – Telephone
(907) 443-2973 – Fax
Toll Free 1-866-953-8683

Yup'ik Language Assistance
Toll Free 1-866-954-8683

State of Alaska
Dept. of Health & Social Services
Heating Assistance Program - DPA
400 Willoughby, Suite 301
Juneau, Alaska 99801-1700