**Consent Form**

I give permission to my local community action agency to complete an application for assistance.

I understand I am responsible to continue paying my bill(s) and to pay for any balance of a bill after my local agency has made a payment on my behalf.

*Statement of Affirmation:*

I hereby give consent for this agency to verify the information I have given and for related outside sources to provide any information necessary in the completion of this application. I understand I am responsible for all related costs of the program not paid by Alabama Department of Economic and Community Affairs or the local community action agency.

I am the customer of record or the customer’s spouse for the utility company and/or supplier that provides my household’s **home energy, heat source, drinking water, or wastewater services**.

I authorize my utility company and/or my supplier to disclose my customer data (including, but not limited to, cost, consumption, and billing data) to the Alabama Department of Economic and Community Affairs and my local community action agency for the purposes of verification, analysis, and reporting.

I agree to hold harmless and/or release such companies from and against any claims, losses, demands, damages, or liability of any kind caused by or allegedly caused by such disclosure.

Signature Date

Printed Name