

**Appendix B**

**Rhode Island Low-Income Home Energy Assistance Program (LIHEAP)**

**Landlord Information Form**

(To be completed by Landlord)

Client Name:	Client Phone #:
Client Address:	

**Heating and Housing Information**

How many rental units are in the building?	
What floor does the applicant live on?	How many occupants in the unit?
Does the applicant's rental unit have its own heating system?	
How many heating systems are in the building?	

How is the building heated?

- Oil                       Kerosene                       Electricity     Gas                       Wood  
 Propane                       Pellets                       Other: \_\_\_\_\_

Monthly rent amount: \$
Is heat included in rent?                      Yes or No
Is the rent subsidized?                      Yes or No
Is the tenant behind in rent payments?                      Yes or No
If yes, what is the dollar amount and # of payments behind?

**Landlord Information**

Landlord's Name:
Landlord's Address:
Landlord's Telephone:

\_\_\_\_\_  
Landlord Signature

\_\_\_\_\_  
Today's Date

**\*\*\*\*\* Notarization requirement waived through April 30, 2023\*\*\*\*\***

\_\_\_\_\_  
Notary Name (printed):

\_\_\_\_\_  
Notary Signature

\_\_\_\_\_  
Date