LOW INCOME HOME ENERGY ASSISTANCE PROGRAM (LIHEAP)
Child Support/Alimony Documentation Form

Applicant Name: _______________________________ Application #: _____________________

If your household receives child support or alimony (spousal support), please complete this form and return it with the required supporting documentation to (CCDHS).

I, __________________________, (Applicant) understand that I will be held liable if I have misstated or understand in any way the child support/alimony my household receives.

Please provide the following information grouped by the person providing the household child support/alimony.

Noncustodial Parent/Ex-Spouse #1

Name of noncustodial parent or ex-spouse providing the support: ____________________________

Name of child(ren): __________, __________, __________, __________, __________

☐ The household has NOT received any child support/alimony since __________.
   OR
☐ The household has NEVER received child support/alimony.
   OR
☐ The Household DOES receive child support/alimony. The amount received: $_________ (circle one)
   weekly/bi-weekly/monthly.

Is the applicant the adult household member that receives this support? ☐ Yes ☐ No

If no, name of the other household adult receiving support: ____________________________

Noncustodial Parent/Ex-Spouse #2

Name of noncustodial parent or ex-spouse providing the support: ____________________________

Name of child(ren): __________, __________, __________, __________, __________

☐ The household has NOT received any child support/alimony since __________.
   OR
☐ The household has NEVER received child support/alimony.
   OR
☐ The Household DOES receive child support/alimony. The amount received: $_________ (circle one)
   weekly/bi-weekly/monthly.

Is the applicant the adult household member that receives this support? ☐ Yes ☐ No

If no, name of the other household adult receiving support: ____________________________

For each source of child support/alimony, one of the following documents is required:

a) Copies of canceled child support/alimony checks or money orders from source;
b) Copy of the court order or divorce decree that indicated the amount paid and how often it’s paid;
c) Copy of an attorney of record or legal agency letter representing the Applicant that indicates the amount paid and how often it’s paid;
d) A letter from support source;
e) Mortgage, rent paid in lieu of, or in addition to child support/alimony is countable income. A copy of the court order, decree or other legal document specifying the amount and frequency of such payment if required; or,
f) Department of Revenue Child Support Enforcement Division (1-800-332-2733) payment history.

Signature _______________________________ Date ________________