



EMERGENCY ASSISTANCE ACTION PLAN
 NORTH DAKOTA DEPARTMENT OF HUMAN SERVICES
 LIHEAP/ENERGY SHARE OF NORTH DAKOTA
 SFN 11 (7-2022)

The purpose of the LIHEAP/Energy Share Emergency Assistance Program is

- 1) To help you with your current emergency, and
- 2) To help you avoid similar problems in the future

To help you with the present emergency, your application for assistance with the following has been approved:

PROBLEM STATEMENT. The problems we discussed during our interview that may have caused this emergency are

ACTION PLAN

Recommended actions you can take to help avoid future emergencies

- 1. Negotiate a reasonable payment plan with your energy supplier.
- 2. Obtain and use weatherization and/or conservation information from your energy supplier or Community Action Agency.
- 3. Participate in counseling with:
 - A professional financial counselor A social worker A self-reliance case manager
 - Others (list): _____
- 4. Apply for:
 - Employment Services Low Income Housing Food Stamps
 - Medical Assistance TANF Others

Comments

Energy Share/Human Service Zone office will help you start your Action Plan by making referrals to the above services. However, it is your responsibility to keep your appointments with them and to do whatever is necessary to make your Action Plan work for you. If you apply for Emergency Assistance again, the approval of additional payments may depend upon your efforts to succeed with your Action Plan.

I give my permission to Energy Share/Human Service Zone office to make referrals to the above agencies, to share information about my circumstances, and to request and receive a progress report from the above agencies. This Release of Information will be valid for 12 months.

I understand that by checking this box and typing my name below, I am signing the Emergency Assistance Action Plan. I agree that my electronic signature is the legal equivalent of my handwritten signature.

Applicant		Date
Agency Representative	County	Date

You may choose to print this Emergency Assistance Action Plan and submit your signed form by fax, mail or in person to:
 Local Human Service Zone Office
 See the Application for Assistance Guidebook at applyforhelp.nd.gov for a list of Zone Offices.