Virginia Low Income Household Water Assistance Program (LIHWAP) Authorized Representative Form

Upload completed form to online application or send to: Virginia LIHWAP - Promise, PO Box 2218, Richmond, VA 23218
For help, call Promise (LIHWAP Administrator) at 1-888-373-9908

Authorized representative overview

If you would like someone to help you apply for benefits, you or a member of your household may ask a trusted friend, relative, or neighbor to help you apply and be your authorized representative. This person must be 18 year of age or older and should be familiar enough with your situation to answer questions about you and your circumstances.

You are allowed to have more than one authorized representative for the Low-Income Household Water Assistance Program (LIHWAP). A statement must be completed for each person elected.

An authorized representative may complete and submit an application for you. Be sure the person you pick as your representative knows your household's circumstances. Your eligibility will depend on the information this person gives. You are responsible for the information.

If you are eligible for LIHWAP, the authorized representative may apply for benefits, review your information/case, and receive notices on your behalf.

Your Authorized Representative will be allowed to do the following on your behalf:
- Apply for benefits from the Low-Income Household Water Assistance Program (LIHWAP);
- Receive letters regarding actions taken on my LIHWAP application/case;
- Receive requests for information needed to determine eligibility for LIHWAP.

For additional information about LIHWAP or to apply, go to virginialihwap.com

Account holder information

Account holder name _____

Address _____ Phone number _____

Signature or mark _____ Date_____

Translator (if translated) or Witness (if applicant cannot sign):   .
Name (print) _____

Authorized representative information

Representative name _____

Address _____ Phone number _____

Organization (if applicable): _____

Is the authorized representative 18 years or older? ☐ Yes ☐ No

Authorized representative signature _____