



We believe that giving a little bit of happiness and joy can help ease the stress of those who are battling cancer. No one should have to choose between putting food on the table and heat for their home during the winter.

2025 2026 - HOME UTILITIY BILL ASSISTANCE APPLICATION FORM - QUALIFICATIONS

This form is a patient application for home heat and electric assistance during cancer treatments. Patient must live/reside in the city of Oneida, greater Madison County, Sherrill, Vernon & Verona, New York, or surrounding communities. If you live outside these areas but are currently being treated by The Oneida/Roswell Cancer Center, or the Upstate Cancer Center in Verona, New York, you may be eligible. The form can be filled out by the patient in treatment, or by a friend or family member. *The Home Utility Assistance Program does NOT cover cable TV or internet services.*

IMPORTANT: This application must be accompanied by a copy of your current utility bill. Utilities must be in applicants' or spouses' name.

Date of Application: _____

Referral to Application (*how did you hear about Jessica's Heroes Foundation*):

Friend, family member, treatment center or medical provider: (*please write name below*)

Patient Name (*First, middle, last*) _____

Patient Date of Birth: _____

Residential address of patient:

City: _____ **State:** _____ **Zip Code:** _____

Patient Phone #: _____ **Patient Email:** _____

Contact name for family member that is assisting in the application: (*if applicable*)

_____ Family member Phone #: _____

Family member Email: _____

Are you currently being treated? _____ **When were you diagnosed?** _____

Name of medical provider (Physician treating) and the hospital?

Name of Heat/Electric Utility company, Oil or Propane supplier:

Phone number of Oil or Propane Supplier: _____

Account number : _____

I, _____ (applicant's name) understand that the

Jessica's Heroes Foundation, Inc., will keep any information provided in extreme confidence, at all times. This statement covers medical status, personal or family life, and opinions expressed by myself and/or my family members. This form is strictly for the purpose of determining my eligibility for assistance with my home fuel/utility bills for which am seeking.

All information compiled within this application is honest and completed to the best of my ability, based on true and accurate information.

Applicant Signature:

_____ Date: _____

Applicant Printed Name: _____

In the event the applicant is unable to fill out form, please indicate family member's information:

Name of Family Member Applying for Applicant:

Relationship of Family Member:

Reason Applicant is unable to apply: _____

Please return this completed form along with a copy of your most current utility bill to:

Jessica's Heroes Foundation, Inc., 126 Washington Ave., Oneida, NY 13421

Or, Email completed form and utility bill copy to: info@jessicasheroesfoundation.com

IMPORTANT NOTE: Completion of this application does not indicate approval. The Jessica's Heroes Foundation will notify you regarding the outcome. All documents must be completed and approved to be reviewed for assistance. Currently the Jessica's Heroes Foundation can provide up to a maximum of \$500 to each approved applicant. Payments will be made directly from Jessica's Heroes Foundation, Inc. to the utility/fuel company. Jessica's Heroes Foundation is not responsible for any past or future payments.

Applicants may re-apply annually for fuel assistance. The Fuel Assistance Fund is in addition to our other assistance application, and does not affect your application for other annual assistance from Jessica's Heroes Foundation, Inc. Fuel funding from our donors is limited. Our goal is to continue helping all, however at times the funding may not be available.

*Please see the Jessica's Heroes Foundation, Inc. website **Resources Page** where you will find important information on other organizations that offer Cancer Patient assistance and important information.*

The Jessica's Heroes Foundation, Inc., would not be possible without generous donations from our Sponsors, donors and the many individuals taking part in our fundraising events throughout the year. This specific **Home Utility Fund** is made possible with a grant from The Jim and Juli Boenheim Foundation and other generous donors.

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Jessica's Heroes Foundation, Inc., is a registered IRS 501(C) 3 non-profit, charitable organization.