



is an MLGW payment program designed to help residential customers with limited incomes manage debt and pay off their past due bills over a period of time along with their regular monthly bill. The program focuses on education, financial management and social services.

On Track participants are eligible to receive:

- One-on-one assistance from an MLGW service advisor
- Information on budgeting and saving energy at home
- Deferred Billing Plans (DEFB) for up to 3 years
- Deposit credited back to the account after successful completion of program

On Track participation is free, but to qualify for the program customers must have:

- A utility bill over \$600
- Only one active account
- Steady income not exceeding 200% of the federal poverty guidelines
- No history of bankruptcy in the past 6 years, and
- No history of enrollment in MLGW's Life Support program

If you have previously been enrolled in On Track, you are not eligible to reapply until three years after your removal/completion date.



MLGW

SERVING YOU IS
WHAT WE DO



On Track
Payment Program Application



MLGW

Only residential customers may apply.

Instructions:

First, completely fill out this application and attach the following for each member of your family:

1. Copy of birth certificate or other identification for each person age 17 and under.
Copy of Social Security card for everyone over age 18.
Two IDs for customer of record.
2. Copy of your mortgage statement, rental agreement, and Section 8 papers, if applicable.
3. Income information for anyone in your household with income. This may include your two most recent pay stubs, unemployment award letter, Social Security award letter, child support documents, food stamp award letter, etc.

Participants must provide proof of income, rent/mortgage statements and identification for each household member.

Incomplete applications will not be processed.

Second, return the application and copies of household and income information to any MLGW Community Office location or mail to:

**MLGW
Community Relations Dept.
P. O. Box 430
Memphis, TN 38101 - 0430**

Questions? Call 528-4820.



OnTrack Application

Please allow 5-10 business days for processing.

Today's Date: _____ Referred by: _____

MLGW Account Number: _____

Name on MLGW account: _____

Street Address: _____ Apt. #: _____

City: _____ State: _____ Zip code: _____

Home Phone: _____ Cell Phone: _____

Email: _____

Name of each member of your household including the person whose name is on the MLGW account:

Name	Relationship	Date of Birth
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____
4. _____	_____	_____
5. _____	_____	_____
6. _____	_____	_____
7. _____	_____	_____

Household Income:

Check yes or no for every question. Report any income for all household members. (Attach income documentation for each person listed below, including food stamps.)

Type of Income	Check Yes or No	If Yes, Give Amount	Name of Person Receiving Income
Wages (after deductions)	<input type="checkbox"/> Yes <input type="checkbox"/> No	Monthly: \$ _____	_____
Social Security	<input type="checkbox"/> Yes <input type="checkbox"/> No	Monthly: \$ _____	_____
Food Stamps/EBT	<input type="checkbox"/> Yes <input type="checkbox"/> No	Monthly: \$ _____	_____
Child Support (received)	<input type="checkbox"/> Yes <input type="checkbox"/> No	Monthly: \$ _____	_____
Unemployment Benefits	<input type="checkbox"/> Yes <input type="checkbox"/> No	Monthly: \$ _____	_____
Families First	<input type="checkbox"/> Yes <input type="checkbox"/> No	Monthly: \$ _____	_____
Is there any other income from any other source? <input type="checkbox"/> Yes <input type="checkbox"/> No			Monthly \$ _____
If yes, please explain. _____			

Do you rent or own your home? ☐ Rent ☐ Own

Do you receive Section 8? ☐ Yes ☐ No

How much do you pay each month for your mortgage or rent? \$ _____

(Attach a copy of your mortgage statement, rental agreement or if applicable your Section 8 papers.)

I understand that if accepted, I will be required to attend a three-hour orientation class before beginning the program and to make a monthly payment to MLGW that will be agreed upon with my assigned service advisor in addition to paying my normal monthly bill. I understand that failure to pay and/or declaring bankruptcy can result in termination from the program.

Signature of person applying for OnTrack: _____ Date: _____