



is an MLGW payment program designed to help residential customers with limited incomes and/or who have experienced financial difficulties during the COVID-19 pandemic 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
- Referral to social service programs

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

- A utility bill more than \$600
- Only one active account
- Steady income not exceeding 200% of the federal poverty guidelines or steady income and impacted by COVID-19 pandemic
- Cannot have an MLGW Life Support payment plan

Customers who have previously enrolled in **On Track**, are also eligible to reapply during this period. The COVID-19 guidelines are temporary and are in effect until December 31, 2020.



MLGW

SERVING YOU IS
WHAT WE DO



MLGW

On Track
COVID-19 Payment Program

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.
4. If you are not eligible for **On Track** based on the income guidelines and are applying because of the impact of the COVID-19 pandemic you will need to complete a COVID-19 impact form and provide documents that support your COVID-19 impact. Your name must be visible on documentation.

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, email to MLGWontrack@mlgw.org or mail to:

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

Questions? Call 528-4820.

COVID-19 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 one hour virtual 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 **On Track**: _____ Date: _____