

PUBLIC UTILITY COMMISSION OF TEXAS
APPLICATION FORM FOR LITE-UP TEXAS PROGRAM

STATE OF TEXAS § **AFFIDAVIT**
COUNTY OF _____ §

BEFORE ME, the undersigned authority, on this day personally appeared the undersigned, who, after being duly sworn, stated on their oath that the statements contained below and in the foregoing are true and correct.

“I either do not receive any income from any source, which includes, but is not limited to, employers or I receive only a very nominal amount.”

I understand that should my financial situation change, I will notify the Lite-up Texas program in order for my eligibility to be re-evaluated.

Applicant's Signature

Applicant's Printed Name

Applicant's Home Address

Applicant's Apartment (if applicable)

Applicant's City, State, Zip Code

Applicant's Telephone Number

Sworn and subscribed before me this _____ day of _____, 2016.

Notary Public in and for the State of Texas

NOTARY SEAL BELOW