

Washington County Rural Tel Coop - Lifeline Household Worksheet

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|--------------------------------|--|--------------------------|--|
| Full Legal Name: | | Telephone Number: | |
| Service (Home) Address: | | | |
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Lifeline is a government program that provides a monthly discount on Voice or Broadband services. Only ONE Lifeline discount is allowed per household. Members of a household are not permitted to receive Lifeline service from multiple telephone/broadband companies.

Your **household** is everyone who lives together at your address as one economic unit (including children and people who are not related to you).

The **adults** you live with are part of your **economic unit** if they contribute to and share in the income and expenses of the household. An **adult** is any person 18 years of age or older, or an emancipated minor (a person under age 18 who is legally considered to be an adult). Household **expenses** include food, health care expenses (such as medical bills) and the cost of renting or paying a mortgage on your place of residence (a house or apartment, for example) and utilities (including water, heat and electricity). **Income** includes salary, public assistance benefits, social security payments, pensions, unemployment compensation, veteran's benefits, inheritances, alimony, child support payments, worker's compensation benefits, gifts, and lottery winnings.

Spouses and domestic partners are considered to be part of the same household. Children under the age of 18 living with their parents or guardians are considered to be part of the same household as their parents or guardians. If an adult has no income, or minimal income, and lives with someone who provides financial support to that adult, both people are considered part of the same household.

Answer the questions below to determine whether there is more than one household residing at your address.

1. Do you live with another adult?

Adults are people who are 18 years or older, or who are emancipated minors. This can include a spouse, domestic partner, parent, adult son or daughter, adult in your family, adult roommate, etc.

____ **YES** If you checked **YES**, please answer **question #2**.

____ **NO** If you checked **NO**, you can apply for Lifeline because you live in a household that does not receive Lifeline yet. Please initial **line B**, sign and date the worksheet.

2. Do they receive Lifeline benefits?

____ **YES** If you checked **YES**, please answer **question #3**.

____ **NO** If you checked **NO**, you can apply for Lifeline because you live in a household that does not receive Lifeline yet. Please initial **line B**, sign and date the worksheet.

3. Do you share money (income and expenses) with them?

This can be cost of bills, food, and/or income. If you are married you should check **YES** for this question.

____ **YES** If you checked **YES**, **then you do not qualify for Lifeline** because someone in your household already receives Lifeline benefits. You are only allowed to receive one Lifeline discount per household (Not per person).

____ **NO** If you checked **NO**, you can apply for Lifeline because you live at an address with more than one household and your household does not receive a Lifeline discount yet. Please initial **line A and B**, sign and date the worksheet.

Please initial the statements below that apply:

____ **OPTION A.** I live at an address with more than one household.

____ **OPTION B.** I understand the one-per-household limit is a Federal Communications Commission (FCC) rule, and that being dishonest about my household is against the law and can result in losing my Lifeline benefit.

By signing and dating this worksheet below, I certify that the information provided by me above is true.

Applicant's Signature: _____ **Date:** _____

Please submit this worksheet with your Lifeline certification form and return it to: Lifeline Administrator, 30 Lanidex Plaza West, PO Box 685, Parsippany, NJ 07054-0685.