



Delaware Tribe of Indians
Utility Supplement Program Application
Heating Assistance Fall 2024

Tribal Member Name _____

Delaware Tribal Member Number _____

Phone Number (_____) _____

Address _____

City: _____ State: _____ Zip Code: _____

(Select one of the service options below using an X)

*Propane/Natural Gas _____ Firewood Full Rick _____

Household propane tank provided _____

Name of propane/gas company Phone # Acct #

Signature of Tribal Member

Date

****Copy of your membership card required for each applicant. Please see enrollment if you do not have your card.***

****Copy of state issued Id***

****One application per household.***

****Firewood pick up at Tribal complex only.***

****One time propane assistance up to \$250.00 until funds are expended.***

****Copy of propane/gas bill in Tribal members name required.***

You can drop off or mail in your application and supporting documents to 5100 Tuxedo Blvd Bartlesville, OK 74006 Attn: Enrollment Dept. Bartlesville, OK 74006.