



TRI-COUNTY COMMUNITY ACTION

Serving Coös, Carroll & Grafton Counties since 1965



Energy Assistance Services

List the names, sex (M or F), Social Security numbers (SSN) and date of birth (DOB) of ALL the people who live in your home. For each member of the household write Yes or No if they have Health Insurance (private, Medicare or Medicaid) and if the household members are working. In the school space write current grade or last grade completed.

8. _____ / _____ # _____ DOB _____ Insurance___ Work___ School___
 Please print Disabled___ Food Stamps___

7. _____ / _____ # _____ DOB _____ Insurance___ Work___ School___
 Disabled___ Food Stamps___

9. _____ / _____ # _____ DOB _____ Insurance___ Work___ School___
 Disabled___ Food Stamps___

10. _____ / _____ # _____ DOB _____ Insurance___ Work___ School___
 Disabled___ Food Stamps___

11. _____ / _____ # _____ DOB _____ Insurance___ Work___ School___
 Disabled___ Food Stamps___

12. _____ / _____ # _____ DOB _____ Insurance___ Work___ School___
 Disabled___ Food Stamps___

13. _____ / _____ # _____ DOB _____ Insurance___ Work___ School___
 Disabled___ Food Stamps___

Please send all forms, applications and correspondence to **Your Local County's Outreach Office:**

Carroll County Outreach Office
448 White Mountain Highway
Tamworth, NH 03886
Phone: (603) 323-7400 Email:
carrollcc@tccap.org

Coos County Outreach Office
53 Main Street Suite 2
Berlin, NH 03570
Phone: (603) 752-3248
Email:berlincc@tccap.org

Grafton County Outreach Office
41 School St
Ashland, NH 03217
Phone:(603) 968-3560
Email:ashlandcc@tccap.org