

Low Income Household Water Assist

		Recipient In
Recipient Name:		FY:
Contact Name:		Contact F
Contact Email:		

[Click HERE](#) to read the LIHWAP Annual Report Instructions.

Certification

Certification: By signing this report, I certify that it is true, complete, and accurate. Any false, fictitious, or fraudulent information may subject me to criminal penalties under Section 1001)

a. Name of Authorized Official:	
b. Title of Authorized Official:	

X

Expiration Date: XX/XX/2021

Performance Program Annual Report Form

Information

Phone:

and accurate to the best of my knowledge. I am aware that criminal, civil, or administrative penalties. (U.S. Code, Title 18,

Module 1: Use of Funds R

Reporting Requirements: All LIHWAP grantees are required to complete the LIHWAP Use of Funds the given fiscal year (FY) for each type of LIHWAP assistance provided.

SECTION I. GRANT

Enter the following amounts as submitted on the grantee's plan:

1. Actual Grant Award:

2. Estimated Household Benefit:

3. Estimated Outreach/Eligibility:

4. Estimated Administration - Recipient:

5. Estimated Administration - Subrecipient (if applicable):

6. Actual Admin Cost Cap (15%):
Auto-Calculated

SECTION II. USES OF LIHWAP

A. Type of LIHWAP Assistance Funds by Priority (Items 1-3)

1. Restoration of services funds

a. Specify Consolidated Appropriation Act, 2021 funds

b. Specify American Rescue Act, 2021 funds

c. Other --Non-supplemental funds RESERVED FOR POSSIBLE FUTURE FUNDING

(1) Specify--non-supplemental funds

(2) Specify--non-supplemental funds

(3) Specify--non-supplemental funds

2. Prevention of Disconnection funds

- a. Specify Consolidated Appropriation Act, 2021 funds
- b. Specify American Rescue Act, 2021 funds
- c. Other --Non-supplemental funds RESERVED FOR POSSIBLE FUTURE FUNDING
 - (1) Specify--non-supplemental funds
 - (2) Specify--non-supplemental funds
 - (3) Specify--non-supplemental funds

3. Reduction of Rates Charged funds

- a. Specify Consolidated Appropriation Act, 2021 funds
- b. Specify American Rescue Act, 2021 funds
- c. Other --Non-supplemental funds RESERVED FOR POSSIBLE FUTURE FUNDING
 - (1) Specify--non-supplemental funds
 - (2) Specify--non-supplemental funds
 - (3) Specify--non-supplemental funds

B. Type of LIHWAP Water and Wastewater Assistance Funds (Items 1-3)

1. Water and/or Wastewater

- a. Specify Consolidated Appropriation Act, 2021 funds
- b. Specify American Rescue Act, 2021 funds
- c. Other --Non-supplemental funds RESERVED FOR POSSIBLE FUTURE FUNDING
 - (1) Specify--non-supplemental funds
 - (2) Specify--non-supplemental funds
 - (3) Specify--non-supplemental funds

2. Multiple Services that include water and other non-water services

- a. Specify Consolidated Appropriation Act, 2021 funds
- b. Specify American Rescue Act, 2021 funds
- c. Other --Non-supplemental funds RESERVED FOR POSSIBLE FUTURE FUNDING
 - (1) Specify--non-supplemental funds
 - (2) Specify--non-supplemental funds
 - (3) Specify--non-supplemental funds

3. Other Water Services*

- a. Specify Consolidated Appropriation Act, 2021 funds
- b. Specify American Rescue Act, 2021 funds
- c. Other --Non-supplemental funds RESERVED FOR POSSIBLE FUTURE FUNDING
 - (1) Specify--non-supplemental funds
 - (2) Specify--non-supplemental funds

(3) Specify--non-supplemental funds

*Below please specify Other Water Services funded by LIHWAP

Response:

SECTION III. USES OF LIHWAP OUTREACH/ELIGIBILI

1. Outreach/Eligibility

a. Specify Consolidated Appropriation Act, 2021 funds

b. Specify American Rescue Act, 2021 funds

c. Other --Non-supplemental funds RESERVED FOR POSSIBLE FUTURE FUNDING

(1) Specify--non-supplemental funds

(2) Specify--non-supplemental funds

(3) Specify--non-supplemental funds

2. Administration - Recipient

a. Specify Consolidated Appropriation Act, 2021 funds

b. Specify American Rescue Act, 2021 funds

c. Other --Non-supplemental funds RESERVED FOR POSSIBLE FUTURE FUNDING

(1) Specify--non-supplemental funds

(2) Specify--non-supplemental funds

(3) Specify--non-supplemental funds

3. Administration - Subrecipients (if applicable)

a. Specify Consolidated Appropriation Act, 2021 funds

b. Specify American Rescue Act, 2021 funds

c. Other --Non-supplemental funds RESERVED FOR POSSIBLE FUTURE FUNDING

(1) Specify--non-supplemental funds

(2) Specify--non-supplemental funds

(3) Specify--non-supplemental funds

Remarks:



Report for Fiscal Year (FY)

in providing estimates of sources and uses of funds, including obligated and expended funding of

AWARD AMOUNTS

A. Consolidated Appropriation Act, 2021 Funding	B. American Rescue Act, 2021 Funding	C. Reserve for Possible Future Funding
\$0	\$0	\$0

HOUSEHOLD BENEFIT FUNDS

FY (10/1 to 9/30)		
Amount Rounded to the Nearest Dollar		
Actual Funds Obligated	Actual Funds Expended	
\$0	\$0	
\$0	\$0	
\$0	\$0	
\$0	\$0	
\$0	\$0	
\$0	\$0	

\$0	\$0
\$0	\$0
\$0	\$0
\$0	\$0
\$0	\$0
\$0	\$0

\$0	\$0
\$0	\$0
\$0	\$0
\$0	\$0
\$0	\$0
\$0	\$0

FY (10/1 to 9/30)	
Amount Rounded to the Nearest Dollar	
Actual Funds Obligated	Actual Funds Expended

\$0	\$0
\$0	\$0
\$0	\$0
\$0	\$0
\$0	\$0
\$0	\$0

\$0	\$0
\$0	\$0
\$0	\$0
\$0	\$0
\$0	\$0
\$0	\$0

\$0	\$0
\$0	\$0
\$0	\$0
\$0	\$0
\$0	\$0



Module 2: Household Report for Fis

I. Number of Households	A. Total Number of Households	
1. Total Unduplicated Household Applicants		
2. Total Unduplicated Households Assisted		
3. Total Waitlisted Households for Non-availability of Funds		

II. Number of Assisted Households by Assistance Type

Type of LIHWAP assistance	A. Total Number of Households	
1. Restoration of services		
2. Prevention of disconnections of services		
3. Reduction of current rates charged		

III. Number of Assisted Households by Poverty Interval

Type of LIHWAP assistance	A. Under 75% poverty	B. 75%-100% poverty
1. Restoration of services		
2. Prevention of disconnections of services		
3. Reduction of current rates charged		

IV. Number of Assisted Households by Vulnerable Population

Type of LIHWAP assistance	A. 60 years or older (elderly)
1. Restoration of services	
2. Prevention of disconnections of services	
3. Reduction of current rates charged	
4. Any type of LIHWAP assistance	

V. Number of Assisted Household Applicants by Race and Ethnicity

A. Ethnicity	Number of Household Applicants	
1. Hispanic, Latino, or Spanish Origins		
2. Not Hispanic, Latino, or Spanish Origins		
3. Unknown/not reported		
4. TOTAL (Auto Calculated)	0	
B. Race		
	Number of Household Applicants	
1. American Indian or Alaska Native		
2. Asian		
3. Black or African American		
4. Native Hawaiian or Other Pacific Islander		
5. White		
6. Multi-race (two or more of the above)		
7. Other		
8. Unknown/not reported		
9. TOTAL (Auto Calculated)	0	
VI. Number of Assisted Household Applicants by Gender		
	Number of Household Applicants	
1. Self Identified Male		
2. Self Identified Female		
3. Other		
4. Unknown/not reported		
5. TOTAL (Auto Calculated)	0	
VII. Assisted Household Members by Race and Ethnicity*		
A. Ethnicity	Number of Household Members	
1. Hispanic, Latino, or Spanish Origins		
2. Not Hispanic, Latino, or Spanish Origins		
3. Unknown/not reported		
4. TOTAL (Auto Calculated)	0	
*See Instructions		
B. Race*	Number of Household Members	

1. American Indian or Alaska Native	
2. Asian	
3. Black or African American	
4. Native Hawaiian or Other Pacific Islander	
5. White	
6. Multi-race (two or more of the above)	
7. Other	
8. Unknown/not reported	
9. TOTAL (Auto Calculated)	0

*See Instructions

VIII. Assisted Household Members by Gender*	Number of Household Members
1. Self Identified Male	
2. Self Identified Female	
3. Other	
4. Unknown/not reported	
5. TOTAL (Auto Calculated)	0

*See Instructions

IX. Use of Funds to Non-Public Water Systems for Emergency Home Water Service

***This question is only applicable to recipients that were approved to use 'Non-Public Water System plan'**

Type of Emergency Home Water Service	Number of Households
1. Private Water Delivery as Supplemental Drinking Water Service	
2. Private Waste Hauling as Supplemental Wastewater Service	
3. Other Supplemental Water Services*	

*Below please specify Other Water Services funded by LIHWAP

Response:

Remarks

Enter any explanation needed regarding the reliability and/or validity of the above-reported data:

Response:

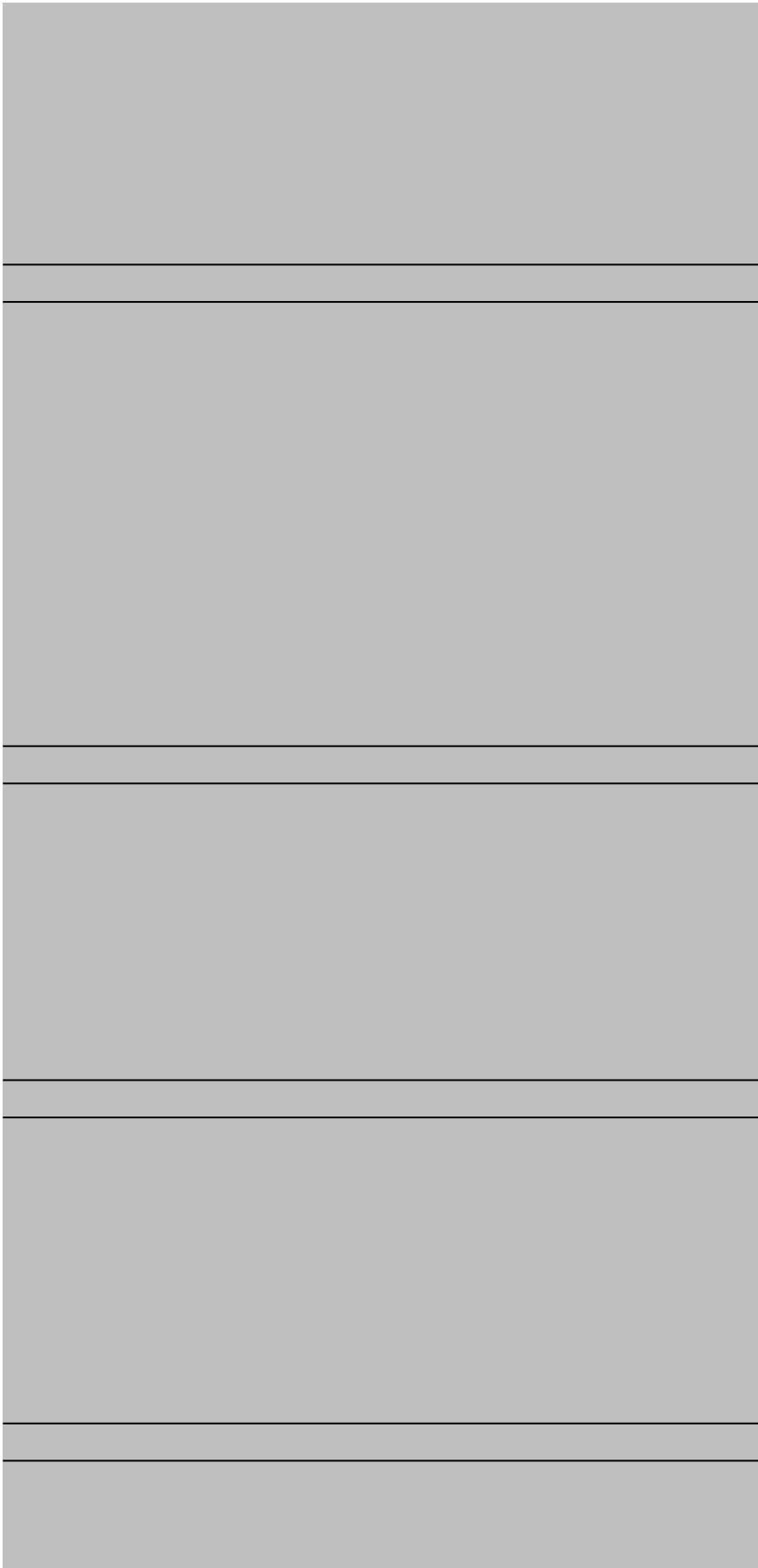
iscal Year (FY)

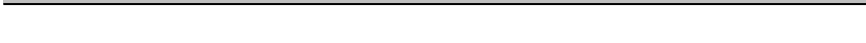
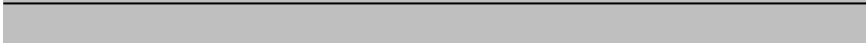
HHS Poverty Guidelines for most recent

C. 101%-125% poverty	D. 126%-150% poverty	E. Over 150% poverty	

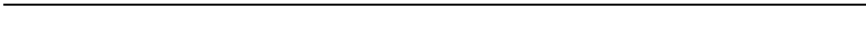
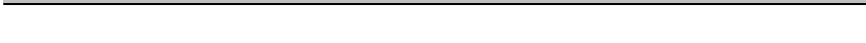
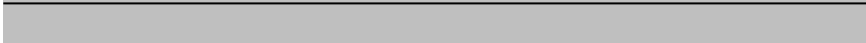
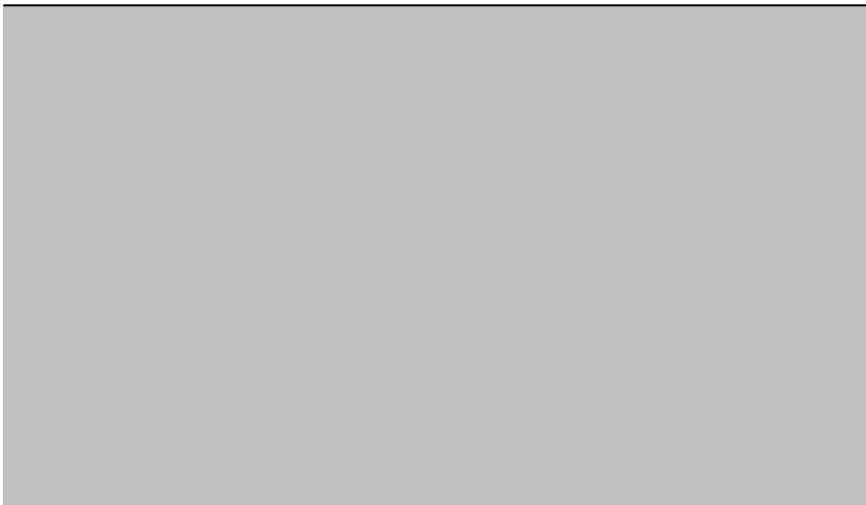
At least one household member is a member of one of the following target groups:

B. Disabled	C. Age 5 years or under (young child)	D. Any (elderly, disabled, or young child)	





ms for Emergency Home Water Service' funds in their LIHWAP



Module 3:

I. V

All Households (Based on billing period covered by assistance (i.e., monthly, quarterly))

1. Average Water Benefit Payment

2. Pre Water Burden Average

3. Post Water Burden Average

II. RESTORATION

Number of All LIHWAP-Assisted Households that Had:

1. Restoration of Home Water/Wastewater Service (Unduplicated Count)

2. Restoration of Home Water/Wastewater Service (Duplicated Count)

III. PREVENTION OF

Number of All LIHWAP-Assisted Households that Had:

1. Prevention of Loss of Home Water/Wastewater Service (Unduplicated Count)

2. Prevention of Loss of Home Water/Wastewater Service (Duplicated Count)

IV. Rate Reduction o

Number of All LIHWAP-Assisted Households that Had:

1. Rate Reduction of Current Home Water/Wastewater Service (Unduplicated Count)

2. Rate Reduction of Current Home Water/Wastewater Service (Duplicated Count)

Performance Data Report for Fiscal Year (FY)

WATER BURDEN TARGETING

Service Type		
Restoration of Service	Prevention of Disconnection	Reduction of Current Rates Charged
If Applicable	If Applicable	

LOSS OF HOME Water/Wastewater SERVICE

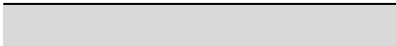
	Service Type	
<i>All Households</i>	Water or Wastewater	Multiple Services
Auto-Calculated	0	0
Auto-Calculated	If Applicable	If Applicable

LOSS OF HOME Water/Wastewater SERVICE

	Service Type	
<i>All Households</i>	Water or Wastewater	Multiple Services
Auto-Calculated	0	0
Auto-Calculated	If Applicable	If Applicable

LOSS OF CURRENT HOME Water/Wastewater SERVICE

	Service Type	
<i>All Households</i>	Water or Wastewater	Multiple Services
Auto-Calculated	0	0
Auto-Calculated	If Applicable	If Applicable



Other Water Services
0
If Applicable



Other Water Services
0
If Applicable



Other Water Services
0
If Applicable