## **LIEAP Reallocation Survey**

January 22, 2019

## Low Income Energy Assistance Program (LIEAP) Reallocation Survey

Please complete this survey and return to Arlisha Cooper at <a href="mailto:Arlisha.Cooper@dhhs.nc.gov">Arlisha.Cooper@dhhs.nc.gov</a> by <b>Tuesday, January 29, 2019</b> . Thank you.
County Name:
Director Name:
1. Is your county willing to reallocate <u>LIEAP funds</u> for the current program year to other counties that may have a need for additional funds?
YESNO If yes, please indicate the amount you would be willing to reallocate. \$ Amount to Reallocate
2. Does your county have a need for additional <b>LIEAP funds</b> for the current program year?
YESNO If yes, please indicate the amount you would like to request if available. \$ Amount Requested
Director Signature:
Date: