

SAMPLE VENDOR AGREEMENT

THIS AGREEMENT shall be established between the Low Income Home Energy Assistance Program and the vendor _____ for payment of home heating bills by the Low Income Home Energy Assistance Program, for all eligible clients of this program.

The vendor, _____ agrees that it:

- A) Will charge the eligible household in the normal billing process;
- B) Will charge no more than the regular price which the non-LIHEAP; customer would be charged;
- C) Will notify the LIHEAP office of any price changes;
- D) Will assure that delivery tickets or receipts shall include tank number or account number, be signed by the eligible client or authorized representatives, and meter reading (consumption & cost) before forwarding to the Low Income Home Energy Assistance Program;
- E) _____ will include the LIHEAP payment received on behalf of each eligible household as a credit of payment during the normal billing cycle following the payment;
- F) Will not treat any household receiving assistance from LIHEAP adversely because of such assistance;
- G) Will use funds paid to the supplier for bills incurred from October 1, 2013 through September 30, 2014.
- H) Will not discriminate against the eligible household in offering deferred payments or level payment plans or in other conditions of sale, credit, deliver or price.

THE BLACKFEET LOW INCOME HOME ENERGY ASSISTANCE PROGRAM agrees to the following concerning eligible households:

- A) Approval/Authorization for payment for eligible clients will be certified by the Director of the Low Income Home Energy Assistance Program;
- B) Identify to the supplier each eligible household on whose behalf the program will make payment for home energy and the maximum payment for each eligible household;
- C) Make timely payments to the supplier;

D) Supply account numbers with each payment made to the supplier on behalf of an eligible household.

THIS AGREEMENT shall be in effect from October 1, 2013 until September 30, 2014.

IN WITNESS WHEREOF, THE PARTIES hereto have here unto set their hand the day and year above written.

Craig Wellman, Director
LOW INCOME HOME ENERGY
ASSISTANCE PROGRAM

Supplier/Vendor
Representative

SUBSCRIBED AND SWORN to before me this ____ day of _____

Notary Public for the State of
Montana.
Residing at _____
My commission Expires _____