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**Vendor Monitoring Report** FFY2011

Energy Vendor: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Vendor #: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Vendor Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Contact Person: Phone #: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Number of EAP clients served by vendor: \_\_\_\_\_\_\_\_\_ Number of client records checked:\_\_\_\_\_\_

**If Vendor is not complying with EAP regulations, please provide an explanation below.**

## EAP Payments

1. Were all EAP payments properly credited to client(s) account? Yes / No (If no explain below)

**Note:** EAP payments can only be credited to home energy costs. EAP payments can not be credited to water, garbage, sewer, gasoline, machine parts, engine oil, etc.

1. Was EAP client billed through the standard billing process, and given any cash discounts when applicable? Yes / No

If no explain:

# **Refunds**

1. When customer moves, are refunds made to agency within 30 days after client moved? Yes / No
2. At customer’s request, did vendor refund remaining EAP grant after September 30th? Yes / No

## Disconnects/Refusal to Deliver Fuel

1. Does vendor advise customers facing a disconnect situation or refused fuel delivery due to unpaid bill they may be able to receive assistance through their local energy assistance agency and should immediately contact their EAP Service Provider? Yes / No

## Consumption

1. Did consumption information match vendor(s) records? Yes / No

**Consumption Period: \_\_\_\_\_\_\_ to\_\_\_\_\_\_\_\_\_. (Note:** Use the same twelve month period used for the household in FFY2011. The intention is to recreate the same period submitted for the sample households for FFY2011.)

1. Did vendor comply with program regulations? Yes / No

1. Vendor comments regarding operation of Energy Assistance Program:

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**Vendor Monitoring Report** Energy Assistance Program – FFY2011

Energy Vendor: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Vendor #: \_\_\_\_\_\_\_\_\_\_\_ Phone #: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Vendor Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Contact Person: ­­­­­­­­­­­­­­­­­­­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **HH #** | **Household Name** | **Household Address** | **Account Number** | **Fuel Type** | **(1) Consumption****Amount** | **(2) Original****EAP Grant** | **(3) Remaining****EAP Grant** | **(4) Balance Owing for heat costs only** |
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**INSTRUCTIONS:** Service Providers are required to monitor major vendors and a sampling of smaller vendors to assure compliance with the vendor agreement and program policy. Please do the following:

(1) Fill in the heat consumption costs for a twelve month period used for the household in FFY2011. Attach copies of statements to verify these costs. (Recreate the same period submitted for the sample households for FFY2011. Remember, FFY2011 consumption data included the 2009-2010 heating season timeframe.)

(2) Amount of household’s EAP grant is listed in this column.

(3) List remaining EAP funds from original EAP grant still remains on household’s account, and has not yet been spent for heat costs.

**Note:** Provide computer printout for each household listed on the Vendor Report from the date household received their EAP grant until the date the household spent their entire EAP grant for heat costs.

(4) List amount household currently owes for heat costs only. **Electric companies—**please list amount owing for total electric costs only. Do not include water, sewer, garbage, or loans that are listed on any electric account.