



FIRST RESPONDERS WITH BURN INJURIES DISCOUNT PROGRAM

First Responder Verification Form

Name and address of affiliated organization

Verification of Affiliation for _____
Name of First Responder Applicant Position

The Residential Energy Assistance Partnership (REAP) offers support to those who have significantly decreased ability to regulate their core body temperature due to severe burn injuries sustained in the course of providing first responder duties.

The REAP First Responders with Burn Injuries Discount Program provides electric bill payment assistance to those firefighter and police who qualify. As part of the qualification process, applicants must receive certification from the emergency response organization they were servicing during the time of injury.

For more information please call (210) 353-4838. Please fax completed form to (210) 353-3666.

THIS SECTION TO BE COMPLETED BY EMERGENCY RESPONSE AFFILIATED ORGANIZATION

Please accept this verification of the applicant's association with _____

(Organization).

I certify the above-named applicant was in service to the Organization as a _____

(Police/Firefighter) and during service to the Organization sustained a qualifying injury on _____ (injury date).

Whosoever obtains or attempts to obtain program enrollment for which he or she is not entitled, by means of willful false statements or other fraudulent means, may be considered guilty of a criminal offense.

Printed Name	Signature	Date
Title	Organization	Telephone