

# **Charlestown Township Trustee**

**322 Main Cross Street, Charlestown In. 47111**

**Office Hours: Mon. – Fri. 9:00-4:30, Sat. 9:30 -12:00**

**Evening Hours by Appointment**

**Office phone 812.256.2104**

**Emergency Contact Cell 502.544.0110**

***Below is a list of information needed to start your application for assistance.  
Please bring the following for all the members of your household during the last  
30 days.***

- **Identification** for all adults over 18 who are not enrolled in high school (driver's license or other form of verifiable ID)
- **Tax Return** (most recent)
- **Non-U.S. citizens: Visa or Permanent Alien Card**
- **Lease agreement or household payment invoice**
- **Landlord's name, address and phone number**
- **Utility bills (all) including water, sewer, electric, LP gas, and natural gas**
- **Non-utility bills (all) such as cell phone, landline telephone or Internet service.**
- **Current bank statement(s): checking/savings accounts (printout from the bank for the last 30 days) – if no bank account where do you cash checks**
- **Credit cards and other monthly obligations**
- **Check stubs for any adult employed over 18 and not enrolled in school**
- **Job application**
- **Medical expenses verification, hospital summary, physician's statement**
- **Other \_\_\_\_\_**

**Signature of applicant \_\_\_\_\_ Date \_\_\_/\_\_\_/\_\_\_\_\_**