



**City of Trenton  
Trenton Municipal Utilities**

**1100 Main St  
Trenton MO 64683**

**660-359-4310 ~ 660-359-2281 ~ Fax: 660-359-2284**

**www.trentonmo.com**

**UTILITY BILL ASSISTANCE WITH GREEN HILLS COMMUNITY ACTION AGENCY**

I understand that in order to receive assistance on my utility bill, I must make my co-pay with Trenton Municipal Utilities before Green Hills Community Action Agency will provide assistance with my delinquent bill. I understand that my co-pay consists of all charges except the electricity charge. I also understand that an unpaid amount that Green Hills Community Action Agency can not assist with will also be due within 24 hours from notification to prevent disruption in my utility services.

\_\_\_\_\_ **Customer's Signature** \_\_\_\_\_ **Date**

**Customer Information**

**Name:** \_\_\_\_\_ **Contact #:** \_\_\_\_\_

**Address:** \_\_\_\_\_ **Account #:** \_\_\_\_\_

**Name of Utility Bill:** \_\_\_\_\_

**GHCAA Staff Signature:** \_\_\_\_\_ **Print Name:** \_\_\_\_\_

**Total Amount of Bill:** \_\_\_\_\_ (See attached Financial Sheet from Utility)

**Amount of Co-pay Paid:** \_\_\_\_\_

**Total Amount requesting Assistance:** \_\_\_\_\_

\_\_\_\_\_ **TMU employee Signature**

\_\_\_\_\_ **Date**

**GHCAA Approved:** \_\_\_\_\_ **Amount: \$** \_\_\_\_\_

**GHCAA Denied**

**GHCAA Employee Name:** \_\_\_\_\_ **Date:** \_\_\_\_\_