



Utility Assistance Program (UAP) Application Instructions

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Getting Started With DCAid Service Portal

NOTE: Do not use multiple browsers if you encounter a technical error.

When encountering a technical issue, some applicants may try to use a different browser or device to complete their application. Please, do not open a new browser, as this can cause data and application duplication. If you encounter an issue, please call our **State Utility Assistance Hotline** at **211** to speak with an agent during our operating hours or to schedule a callback.

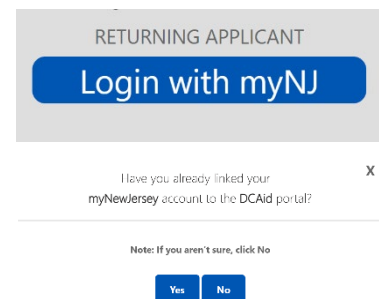
Logging In

Visit this link <https://dcaid.dca.nj.gov/en-US/> to get started.

Returning Applicants

I have applied for Low-Income Household Water Assistance Program (LIWAP), ARP Utility Debt Relief, Universal Service Fund (USF), or the Low-Income Heating Assistance Program (LIHEAP).

- Click *Login with myNJ*
- If you have already linked your myNewJersey account to the DCAid portal, click *Yes*, if not click *No* to request access to the DCAid Service Portal. After requesting access to the DCAid Service Portal, you will be redirected to login.
- If you have previously linked your myNewJersey account to the DCAid portal, click *Yes* and login with your myNewJersey Login ID



and Password. If you receive an error, click the *Return to the myNewJersey* Login Page. You may use one of the following links to complete the login:

- Forgot your login ID? – The portal will ask you to provide your Email address that is on file on your account. The portal will also ask you to answer the security question you established when you set up your account. You will receive a confirmation that the login ID information was emailed to you. <https://my.state.nj.us/selfservice/IDRetrieval>
- Forgot your password? – The portal will ask you to provide your Login ID. The portal will also ask you to answer the security question you established when you set up your account. You will receive a confirmation that your password has been reset. Please check your email for the new password, and instructions on how to change it to one that is easier to remember. <https://my.state.nj.us/selfservice/PasswordReset>
- Need help? – You may click the Request Help button to submit a help request. <https://my.state.nj.us/mynjhhelp/HelpRequest>

First Time Applicants

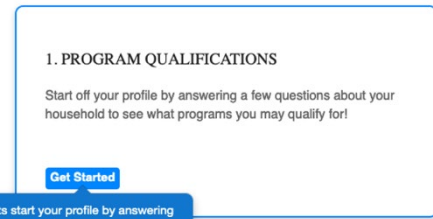
This is my first time applying for assistance and I need to create a new account.

- Click *Apply for Access*
- Enter your First Name, Last Name, and Email. Enter your Email a second time.
- Click the *Request Access* button.
- Indicate if you have a myNewJersey Logon ID.
 - If *Yes*, enter your Login ID and your Password, then click the *Continue* button. If needed, there are links on the right to help if you don't know your Login ID or Password.
 - If *no*, you need to complete more information.
 - Enter a myNewJersey Logon ID. This is your choice – you will establish your login with this field.
 - Enter a Password and then enter your Password a second time.
 - For security verification, enter a Question that you may be asked when you contact the helpdesk, or if you want to learn your Login ID or change your Password.
- Click the *Continue* button.



Program Qualifications

- After logging into the Portal, you should see a *Program Qualifications* card.
- Click the *Get Started* button on the Program Qualifications card to get started with the following questions:
 - Are you a New Jersey resident? *Answer (Yes or No)*
 - Do you receive rental assistance? *Answer (Yes or No)*
 - Do you live in subsidized housing? *Answer (Yes or No)*
 - Do you live in a residential health care facility? *Answer (Yes or No)*
 - Did you apply online for USF/HEA relief last season? (*Answer Yes or No*)
 - If Yes
 - A Recertification popup will appear with the following fields:
 - SSN for head of household for USF/HEA application (*Enter SSN*)
 - DOB for head of household for USF/HEA application (*Enter the date of birth*)
 - Click on the *Verify SSN & DOB* button.
 - If verified, the following field will appear:
 - Has your address changed from the one below? *Answer (Yes or No)*
 - An *Incomplete Recertification* application will be created, which must be filled out and submitted. It can be accessed by going to the Program Applications section (<https://dcaid.dca.nj.gov/en-US/>) and clicking on the *Get Started* button on the Recertification card.
 - If verification fails, you will have two more attempts.
 - If No
 - Click *Continue*
- Click the *Submit* button.



Get Started
Start your profile by answering a few questions to see

Recertification

In order to recertify for USFHEA, your household must reside at the same address. If your address has changed, you will apply as a new USFHEA applicant.

Enter the SSN of a household member from the previous year's USF/HEA application:

Enter the matching DOB of the person's SSN entered above:

You have 3 attempts left.

Verify SSN & DOB ✓

Cancel

Starting The Application

- After completing Program Qualification questions, click the *Apply* button on the Program Applications card from the Landing Page.
- Click the *Get Started* button on the USF/HEA card or if applicable, click on the *Get Started* button on the Recertification card.

2. PROGRAM APPLICATIONS

Let's enter the program portal to apply for the relief you qualify for based on the information you've provided so far!

Apply

USF/HEA

These programs assist Low- and Medium-Income eligible households that are having a difficulty paying their heating and cooling bills by providing financial assistance.

Get Started

- Read through the Acknowledgement statement and click to checkmark when complete.

I acknowledge what documents may be required.

Contact Details Section

NOTE: If you are completing a Recertification, some section will automatically populate based on your responses in previous sections. If your information is not automatically populated, or it needs to be updated, please continue with the following steps below:

- First Name: *Enter the first name of the Applicant.*
- Last Name: *Enter the last name of the Applicant.*
- Phone Number: *Enter household's (family) primary telephone number (include area code).*
 - *Do not include a 1 at the start of your phone number.*
- Select the device type: *Mobile or Landline.*
- Select if you want DCA to send you application updates via text.

The screenshot shows a form titled 'Property' with a sub-section 'Contact Details'. The form includes the following fields and options:

- First Name ***: A text input field.
- Last Name ***: A text input field.
- Phone Number ***: A text input field with a note: "10-digit phone number only. Do not include country code, letters, or symbols".
- Device Type ***: A dropdown menu.
- Text Message Opt-in**: A checkbox labeled "I want DCA to send me application updates via text".
- Email ***: A text input field with a note: "The New Jersey Department Of Community Affairs will provide status updates regarding your application through the email that you provide".
- Preferred Language**: A dropdown menu.

- Email: *Enter the Email address of the applicant.*
- Preferred Language: *Select your preferred language from the drop-down menu.*

Address Section

- Housing type: *Select the applicable housing type from the drop-down menu.*
- Monthly Housing Payment Type: *Select the applicable Housing Payment Type from the drop-down menu.*
- Monthly Housing Payment: *Enter the amount paid monthly by the Applicant for housing.*
- Street Address 1: *Enter the Street Address of the Applicant.*
- Apartment, Suite, etc.: *Enter the apartment, suite, or unit number.*
- City: *Enter the name of the municipality where the primary residence of your household (family) is located.*
- State: *The state is automatically set to New Jersey (NJ).*
- Zip: *Enter the Zip Code of the household's (family) primary residence.*
- County: *Enter the county of the household's (family) primary residence.*
- Is Mailing Address Different From Street Address:
 - *Select Yes if your Mailing Address is different from your Street Address.*

Address

Housing Type *

Monthly Housing Payment Type *

Note: Amount paid monthly to a landlord for use of their property Mortgage Payment Amount paid monthly to a lender for a property you own Property Tax tax amount paid for a property you own

Monthly Housing Payment *

The amount paid monthly to live at your residence despite whether you rent or own.

\$

Street Address *

Apartment, Suite, etc.

City *

State *

NJ

Zip *

County *

Is Mailing Address Different From Home Address? *

Program Questions Section

- Medically Necessary Cooling: *Answer (Yes or No)*
- Have you received medically necessary cooling in the past 5 years? *Answer (Yes or No)*

Cooling Information

Medically Necessary Cooling *

To receive additional assistance during the summer for cooling for medical necessity.

Have you received medically necessary cooling in the past 5 years? *

- Do you pay for your own heat? Answer (Yes or No)

- If Yes

- Primary Heating Fuel: Select the Applicant's heating fuel type

from the drop-down menu. If you select Coal, Kerosene, Oil, Propane or Wood; you will be asked to add a Heating Fuel Supplier Name.

- If you select Electricity, you will be asked to add your Electric Account Number and Electric Supplier Name.
- If you select Natural Gas, you will be asked to add a Natural Gas Account Number, and a Natural Gas Supplier Name.
- Annual Heating Cost: Enter your Annual Heating Cost for your Primary Heating Fuel.

Energy Information

Do you pay for your own heat? *

Yes

Primary Heating Fuel *

Please select the heating fuel type that provides heat to your home.

Coal
Electricity
Kerosene
Natural Gas
Oil
Propane
Wood

- If No

- Describe your best heating situation? Select the response that best describes

the Applicant's heating situation from the drop-down menu.

Energy Information

Do you pay for your own heat? *

No

Describe your best heating situation *

- Do you have a natural gas utility account? Answer (Yes or No)

- If Yes

- Natural Gas Account Number: Enter the Applicant's natural gas account number.
- Natural Gas Supplier Name: Select the name of the Applicant's natural gas supplier from the drop-down menu.

- Do you have an electric utility account? Answer (Yes or No)

- If Yes

- Electric Account Number: Enter the Applicant's account number for their electric provider.
- Electric Supplier Name: Select the name of the Applicant's electric services from the drop-down menu.

- Click the Next button.

Household Members Section

- Click on the Add a Household Member button. After clicking this button, a popup will appear.

Add a Household Member

- Relationship: *Select the appropriate relationship, in relation to the Applicant, of the Household Member.*
- First Name: *Enter the first name of the Household Member.*
- Last Name: *Enter the last name of the Household Member.*
- Gender: *Select the appropriate gender of the Household Member from the drop-down menu.*
- Date of Birth: *Enter the Household Member's date of birth.*
- Disabled: *Answer (Yes or No)*
- Citizenship: *Select the appropriate citizenship status of the Household Member from the drop-down menu. If you select U.S. Citizen, Qualified Non-Citizen, or Work-Permit Only IRS, you will be asked to enter a SSN.*
- Social Security Number: *Enter the Household Member's Social Security Number.*
- Race: *Select the appropriate Race option for the Household Member from the drop-down menu.*
- Ethnicity: *Select the appropriate Ethnicity option for the household member from the drop-down menu.*
- Click the *Submit* button.
- Repeat these steps for each Household Member in the Applicant's household.
- Click *Next* once finished.

The screenshot shows a 'Create' form with the following fields and values:

- Relationship: Applicant
- First Name: John
- Last Name: Washington
- Gender: Male
- Date of Birth: 10/25/1990
- Disabled: No
- Citizenship: US Citizen

Household Member's Income Section

- Click on the *Add an Income* button.
- Household Member: *Select the appropriate household member's name.*
- Income Source: *Select the Household Member's Income Source from the drop-down menu.*
- Pay Cycle: *Select the Household Member's Pay Cycle from the drop-down menu.*
- Gross Income per Pay Cycle: *Enter the Household Member's Gross Income per Pay Cycle.*

The screenshot shows an 'Add an Income' form with the following fields:

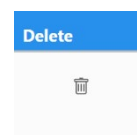
- Household Member: Select Household Member
- Income Source: [Empty]
- Pay Cycle: [Empty]
- Gross Income per Pay Cycle: \$ [Empty]

- Click the *Submit* button to close the Household Member Income popup for this member.
- Repeat these steps for each Household Member in the Applicant’s household.
- Click *Next* once finished.

Documents Section

- All documentation must be current (within 60 days) at the time of application and upload.
- Select which document type you will upload.
- After choosing a document type, the *Upload File* button will switch the blue. Click the blue *Upload File* button, to the right of the associated document type name, to upload the Applicant’s documentation.
- A popup will appear.
- *Select Yes or No* if you have more than one file to upload for this document type.
 - If applicable, click on the link to download the form, fill it out, and save any changes to your device in a file where you can easily access it.
 - Some forms may need to be printed out and filled out by hand. You can take a picture or scan the completed form afterwards for upload.
- Click on the gray *Choose File* button, under the *Choose a file* to upload section.
- Select the file that you would like to upload, and click the blue *Submit* button in the lower lefthand corner.
- The file should appear in the documents table with the file name and the Status will be marked as *Complete* once the upload has been successfully submitted.
- If you press the *Trash Can* icon that appears next to each uploaded file, under the Delete column, it will delete the associated uploaded file. If a deleted file is required, a new document will need to be uploaded before being able to proceed with the application.
- If you have trouble figuring out what document is needed for each category, select the *info (i)* icon next to the category name.
- If the upload file button is grayed out, select the document type first and the button should turn blue for you to upload your file.
- Repeat these steps for all other required documents.
- Once all documentation has been uploaded and all statuses are marked complete, click the *Next* button to proceed with your application.

| Category | Document Type | Upload | FileName | Status | Delete |
|--|---|-------------|----------|---------------|--------|
| Address Verification ⓘ | Please select an option Please select an option | Upload File | No File | Not submitted | 🗑️ |
| Proof of Identity for Jasmine Thomas 2 ⓘ | Mortgage Statement Property Tax Statement Tenant Lease Verification Form Current Lease | Upload File | No File | Not submitted | 🗑️ |



Review Application Section

- After finishing the application, you should see a summary page of your application.
- Please review your application details and go back to make any changes before continuing to the next step.
- If your information for the application is correct, click Next to continue.

Contact Information

| | | |
|--------------------|--------------|-------------------|
| Preferred Language | Phone Number | Email |
| English | 0000000000 | test123@gmail.com |
| First Name | Last Name | |
| test | test | |

Cooling Information

Medically Necessary Cooling

Yes

Energy Info

Do you pay for your own heat?

No

Applicant Certification Section

- Read through the *Fair Hearing Process*.
- After you have finished reading the Fair Hearing Process, enter the following information:
 - o Enter the *Fair Hearing Name*.
 - o Enter the *Last Four Digits of the SSN*.
 - o Enter the *Fair Hearing Signature*.
 - o *Date*: This field will be automatically populated with the current date after the Helper Signature field has been filled out.
- Read through the *Applicant Certification* attestation and answer the following questions:
 - o Did someone help you with this application? Answer (Yes or No)
 - If Yes
 - Agency County: Select the appropriate Agency County from the drop-down menu.
 - Agency Name: Select the Agency Name from the drop-down menu.
 - Helper Name: Enter the name of the Agent that helped you complete the application.
 - Helper Signature: Have the Helper type their signature into the field.
 - Helper Signature Date: This field will be automatically populated with the current date after the Helper Signature field has been filled out.
 - If No

- Applicant Signature: Type your signature into the field, which signifies that you understand and agree to everything in the Applicant Certification statement.
- Applicant Signature Date: This field will be automatically populated with the current date after the Applicant Signature field has been filled out.
- Click the *Submit* button to submit your application.

NOTE: After clicking Submit, you will not be able to edit your application. Please review your application details before clicking submit.

Survey Section

After submitting your application, a prompt will appear asking if you would like to complete a survey.

- Would you like to take our three-question survey? *Answer (Yes or No)*
- If Yes
 - You will be taken to the Survey.
- If No
 - You will be redirected back to your Profile page, where your application will show in the UAP Applications table as “Submitted.”
- Click the blue *Submit* button once complete.
- You will then be redirected back to your Profile page, where your submitted application will show in the UAP Applications table as “Submitted.”

NOTE: Please allow up to 60 days for your application to be processed.

Review or Edit Existing Applications

- You can review or edit existing Incomplete and Submitted applications by visiting your Profile Page.

Applications in progress or submitted:

2024 Season

HEA: October 1st, 2023 - June 30th, 2024

USF: October 1st, 2023 - September 30th, 2024

UAP Applications

| Application ID | App Type | Application Status | Contact | Season | Created On | Owning Business Unit | Email (Owning Team) |
|----------------|----------|--------------------|----------------|--------|--------------------|----------------------|---------------------|
| UAP-0206118 | USFHEA | Incomplete | Jasmine Thomas | 2024 | 10/10/2023 1:12 PM | njdca-housing-prod | |

After logging in using this site <https://dcaid.dca.nj.gov/en-US/>, scroll down to the *Applications In Progress* or *Submitted* section, you will see that applications are listed by Seasons. Currently, there are only the 2023 and 2024 Seasons. Each application type has its own table where Incomplete and Submitted applications are listed.

- Each application table will have columns listed for Application ID, Application Status, App Type, Contact, Created On, and Season.
- To review or edit an existing application, locate the appropriate application table (i.e. UAP Applications, etc.) under the correct Season in which they were submitted.
- Locate the Application ID column, the first one from the left, for the desired application type, and click on the blue-highlighted Application ID. As an example, for a UAP application, it would look something like “UAP-0001181.”
- For Submitted applications, this will open the application in a read-only state. You can move between sections by clicking the blue Next button.