Low Income Energy Assistance Program

Date: [Insert Date]

[Your Name] [Your Address] [City, State, Zip Code] [Email Address] [Phone Number]

Dear [Recipient Name],

We are pleased to confirm your participation in the Low Income Energy Assistance Program (LIHEAP). This letter serves as verification that you have been approved for energy assistance.

Below are the details of your assistance:

- **Case Number:** [Insert Case Number]
- Assistance Amount: \$[Insert Amount]
- Effective Date: [Insert Start Date]
- End Date: [Insert End Date]

If you have any questions or need further assistance, please do not hesitate to contact us at [Contact Information].

Thank you for your application.

Sincerely,

[Your Organization's Name] [Your Organization's Address] [City, State, Zip Code]