

HALDIMAND & NORFOLK



## SOCIAL SERVICES

# Confirmation of Payment from Ontario Works Discretionary Hydro Arrears Program

Date: \_\_\_\_\_

Attention: Hydro One

Fax: 1-519-668-5820

From: \_\_\_\_\_

Attention: \_\_\_\_\_

Re: \_\_\_\_\_

Account Number: \_\_\_\_\_

Please accept notification that the **OW Discretionary Hydro arrears Program** will be assisting in payment of the above account in the amount of \$ \_\_\_\_\_

Payment will be issued directly to Hydro One within 10 days of this notice.

Sincerely,

\_\_\_\_\_  
Intake Support Worker

**Partners in building a  
strong community**

[www.hnss.org](http://www.hnss.org)

**SIMCOE:** P.O. Box 570, 12 Gilbertson Drive, Simcoe ON N3Y 4N5

**T:** 519-426-6170 **F:** 519.426.9974

**DUNNVILLE:** 117 Forest Street East, Dunnville ON N1A 1B9

**T:** 905-318-6623 **F:** 905.774.1538