

Ukiah C.A.R.E.S. "City Assistance for Relief through Energy Support"

SENIOR DISCOUNT

To pre-qualify: MAIL FOR					
Salvation Army Office PO Box 2046				Single Family Program	
	Ukiah, CA 95482-204	6	P	hone: (707) 510-1103	
APPLICATION INFORMATION** Please type or print** How did you find out about the program?					
1) Name - As it appears on you	Social Security #	Ac	count #		
2) Home Address - Do NOT	use P.O. Box Apt/Unit #	City	State	Zip Code	
		Ukiah	CA	95482	
3) Mailing Address - if diffe	rent from above address	City	State	Zip Code	
4) Home Phone Work/Message Phone		Total # in Household	Rent/N	Rent/Mortgage \$	
THIS ASSIS	TANCE APPLIES TO CITY	OF UKIAH ELECTRI	C CHARGE	SONLY	
Proof of Income and copy of City Electric Bill must accompany this application					
OFFICE USE ONLY					
5) Source Name	Gross Monthly Income\$ \$ \$ \$ \$ \$ \$ \$	TOTAL GROSS MONTHI LESS RENT OR MORTG TOTAL NET INCOME* *Should be less than or equal t	AGE (\$	)	
Appointment Date	_ Amt Non-Electric \$ Begin Date Reason	Amt of Benefit \$ C	Amt Ava	ailable \$	
Required Documentation attached. Utility Bill/Late Notice A		Identification R Non-Electric Portion Paid Re	-	Income	
<ul> <li>SENIOR DISCOUNT PROGRAM QUALIFICATIONS - guidelines available upon request</li> <li>Verified total household income must meet 200% of the Federal Poverty Income Guidelines</li> <li>The City of Ukiah Utility bill must be in the eligible senior's name</li> <li>The eligible senior must be 62 years or older</li> <li>This application is valid for twelve months from date of eligibility - You must renew every twelve month period</li> <li>You must notify City of Ukiah in writing within 30 days of becoming ineligible for the Senior Discount Rate</li> </ul>					
PLEASE READ CAREFULLY AND SIGN BELOW					
I understand that I must include in my report of household income all money (including cash assets) and non-cash benefits, available for living expenses, from all sources, both taxable and non-taxable, for all people who live in my home which they have received or expect to receive during the calendar year. This includes (but is not limited to) Wages and Commissions; Child/Spousal Support; Interest, Dividends Business or Rental Income; Support from family/friends; Cash Gifts, Loans; Lottery Winnings; Tax Refunds and Money from Insurance Policies or Legal Settlements; Social Security; Retirement, Veterans Disability or Unemployment Benefits and Workers Compensation; AFDC; SSI; SSP; Cash Public Assistance. By signing below, I certify under penalty of perjury that this information is true and correct under the laws of the State of California. I understand that the Salvation Army and/or City of Ukiah reserves the right to request verification of continued economic need at any time, and I will notify Salvation Army and/or City of Ukiah of any changes that affect my eligibility. I understand that this information may be shared with my other energy utility, if applicable.					
X Customer Signature		Date		03PA:CARES applications.xls	