



I, \_\_\_\_\_, am interested in the following program and authorize the the city of Seattle Human Services Department to release and receive information regarding my application to other agencies and City utilities regarding income, household members, and housing status.

Check All that Apply:

**Utility Discount Program (UDP)**

Provides reduced utility rates for income eligible families, seniors (65+), and persons with disabilities. Qualified applicants receive a 60% discount on their future SCL bill and 50% discount on their future SPU bill.

**Vehicle License Fee Rebate Program (VLFR)**

Provides a \$20 rebate in the form of a prepaid bank card. To be eligible for the rebate, residents must meet the income guidelines; have a car tab renewal date of 06/01/2015 or later and have already paid the fee; and have registered their car in Seattle.

**Seattle City Light Emergency Low Income Assistance (ELIA)**

Available for primary Seattle City Light account holders, who are income eligible and have received a credit notice from Seattle City Light, with a past due balance of \$250.00 or more. ELIA grants are provided once a year per household; the maximum grant is 50% of the balance, with ELIA applying up to \$200. The customer is required to make arrangements on the remaining balance.

**Project Share**

Is a donation-funded program, available to primary Seattle City Light account holders. Project Share provides payment assistance, and the average pledge is \$250.00 that can be used toward a customer's total account balance. Matching payment assistance is available on a case by case basis, and the customer must meet income guidelines.

**Seattle Public Utilities Emergency Assistance Program**

Seattle Public Utilities customers in single-family households who are past due on their account and at risk of having their water, sewer, and solid waste service shut off may be eligible for emergency payment assistance.

By signing below, I understand that I am signing this form under penalty of criminal prosecution if I knowingly have provided false or incomplete information regarding the total income of my household living situation, which results in assistance for which I am not eligible. I understand that by granting this permission it may result in my not receiving assistance if the information provided is neither accurate nor true. I authorize use of a photocopy of this authorization in lieu of an original. I understand that the City of Seattle Utilities may recover the true cost of my utility usage if the information is neither true nor accurate and I receive benefits for which I am not entitled.

**Signature:**

**Date:**



**City of Seattle  
Assistance Programs  
Application**

The City of Seattle is dedicated to assisting customers in accessing the affordability programs. The resulting application will be used to enroll customers in the following programs: The Utility Discount Program (UDP), The Seattle Public Utility Emergency Assistance Program (SPU-EAP), Project Share, The Emergency Low-Income Assistance Program (ELIA), and The Vehicle License Fee Rebate Program (VLFR).

**Section 1: Primary Account Holder Information**

Please place the primary Seattle City Light/Seattle Public Utility account holder and/or the Vehicle License holder's information in the space below.

<b>Primary Name:</b>	Last:		Middle:	
<b>Service Address:</b>	Street:		City:	Zip:
<b>Mailing Address:</b> <small>(if different than service address)</small>	Street:		City:	Zip:
<b>Primary Phone:</b>			<b>Message Phone:</b>	
<b>Email Address:</b>				
<b>Seattle City Light Account Number:</b>	01-	<b>Seattle Public Utilities Account Number:</b>	02-	
<b>Car License Plate Number:</b>			<b>Date Registration Paid:</b>	

**Section 2: Government issued Identification for all persons 18 years and older**

Please provide a copy of **one** of the items below for each adult:

- State driver's license
- State identification card
- Passport or Permanent Resident Card

**Section 3: Housing Information**

Please fill out the information below.

**By checking the box below, I certify that I am NOT in Section 8 housing OR in federally subsidized housing where a utility credit/allowance is applied.**

I am eligible for the Utility Discount Program based on Housing.

**Amount you pay for rent or mortgage: \$ \_\_\_\_\_** If rent is subsidized (check one):

**Housing Status:**

<input type="checkbox"/> SHA	<input type="checkbox"/> HUD	<input type="checkbox"/> Straight Tax Credit-Hope VI
<input type="checkbox"/> Section 8	<input type="checkbox"/> Scattered Site	<input type="checkbox"/> King County Housing Authority
<input type="checkbox"/> Senior BOND	<input type="checkbox"/> Shelter + Care	<input type="checkbox"/> Other: _____
<input type="checkbox"/> Minimum Rent-Public Housing		

**Housing Type:**  Single Family Home  2, 3 or 4 Units  Apt. Building  Condo  Mobile Home

**How do you heat your home?**  Electric  Gas  Oil  Wood  Other: \_\_\_\_\_

**Do you rent or own your home?**  Rent  Own

**Cable TV** customers may qualify for a low-income discount. If you subscribe to Cable TV, which company?

Comcast  Wave  Other: \_\_\_\_\_

**Please complete the front and back of this form**



**Section 4: Household Member Information**

Household members include everyone living in the home, regardless of age or whether or not they pay rent. Examples include: roommates, relatives, tenants, children, friends, extended family members etc. Please fill out the information below for all household members.

Name (Last, First)	Date of Birth	Sex	Relationship to You	Monthly Income	Income Source (employers name, Social Security, TANF, etc.)
		M <input type="checkbox"/> F <input type="checkbox"/>	Myself	\$	
		M <input type="checkbox"/> F <input type="checkbox"/>		\$	
		M <input type="checkbox"/> F <input type="checkbox"/>		\$	
		M <input type="checkbox"/> F <input type="checkbox"/>		\$	
		M <input type="checkbox"/> F <input type="checkbox"/>		\$	

Total number in household: \_\_\_\_\_ If more than 5, list other household members on a separate page.

**Section 5: Income Information**

If the primary Seattle City Light account holder is receiving SNAP benefits, income documentation is NOT required for the Utility Discount Program and/or the Vehicle Licensing Program **ONLY**.

**If on SNAP Benefits or Provider One please provide the following information:**

: \_\_\_\_\_ OR Social Security Number: - \_ -

If you are **NOT** receiving SNAP benefits **OR** you are applying for SPU/EAP, ELIA, or Project Share please check all sources of income below and provide verification documentation of GROSS income for ALL persons 18 years old and older living in your home, received in the month prior to the application date.

- Wages
- Pension/Annuity
- Social Security/SSI
- Unemployment
- IRA
- SNAP Benefits\*
- Child Support
- VA
- Other : \_\_\_\_\_
- Adoption Support
- Rental income
- TANF
- GAU

Accepted forms of documentation are:

- Paycheck stubs/ Employer statement showing GROSS earnings
- DSHS award letters (TANF, GAU/GAX)
- Child support
- Social Security/SSI award letter/Survivor benefits
- Pensions/Annuity/IRA, Interest & Dividends
- Labor and Industry (L&I) statement
- Student financial aid and tuition statement
- Rental/investment property income (Provide a copy of lease/rental agreement)
- Self-employed (Most recent full tax return & 3 months profit & loss statements)
- No Income (Declaration of No Income Statement and/or Employment Security Department Statement)
- Other income: \_

**Section 6: Optional Information**

Black, African American, African  Hispanic, Latino  Hawaiian Native, Pacific Islander  White, Caucasian

**What is your primary language?**

**Would you like a home energy visit by Seattle City Light to help conserve energy?**  Yes  No

**How did you hear about our services?**  Radio  Television  Newspaper  Newsletter

Utility Bill insert  Website  Family or friends  Other: \_\_\_\_\_

**Signature**

**Please be advised that we may share your information with other City of Seattle Departments to determine your eligibility for other approved services. If you do not want your information shared for aforementioned purposes please check this box.**

This application and supporting documentation are used to review eligibility for additional City benefits and is only shared in accordance with applicable state and local laws. I am aware that my information is subject to review and verification and that other documentation may be required. I grant permission to request or release information to, or from, the Seattle Housing Authority, Sec 8 HUD, King County Housing Authority, other government agencies, or their delegated agents; this may result in receipt or denial of City benefits. Submitting this application does not guarantee eligibility or enrollment in any programs. I certify that the information I provided is accurate and complete and that I may be subject to criminal prosecution if I have knowingly given false or misleading information. I agree to provide updated proof of eligibility at any time, if requested. I understand that if I am found to be in violation of program rules, and receive assistance and have not truly disclosed all information, I will be terminated from the program(s) and the City may recover the actual cost(s) for the periods I was not eligible. I will notify the City of Seattle if my income or living situation changes.

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

