

讓您的公用事業費帳單節省多達 **60%** !

## 怎樣申請

1. 填寫申請表。
2. 附上住家成員收入、身份證件和住房資料複印本。
3. 在申請表上簽名並註明日期，然後寄到以下地址，或傳真至：(206) 287-5368

**Seattle City Light**  
**700 Fifth Avenue, Suite 3200**  
**Room 2801, PO Box 34023**  
**Seattle, WA 98124**  
**Attn: Utility Discount Program**

## 1. 顧客資訊

### CITY LIGHT公用事業帳戶負責人姓名

姓  名  中間名

郵寄地址

市  州  郵遞區號

西雅圖 City Light 帳戶號碼

主要電話號碼  電子郵件地址  所用主要語言

您的住房是否主要用電力取暖?  是  否

## 2. 家庭資訊

列出所有住家成員（包括18歲以下兒童）的資料。 \*\* 住家成員指住在您家中（不論是否親屬）並在您家中使用電力及其他公用事服務的人。即使這些人並不付房租，您仍然必須將他們列為住家成員。

姓名	出生日期	每月總收入	收入來源（雇主名稱、社會安全號、TANF 等）
		\$	
		\$	
		\$	
		\$	
		\$	
		\$	
		\$	

租金或房貸繳付金額： \$ \_\_\_\_\_ / 月

\*\* 住在政府補貼住房中和已享受公用事業津貼、公用事業減免或公用事業折扣者不得加入本計劃。

如果租金有補貼，請說明您是哪一種補貼：

- 西雅圖住房管理署
- 住房與城市發展部(HUD)
- 金縣住房管理局
- 聯邦住房法令第8條規定(Section 8)
- 收容與照顧專案 (Shelter + Care)
- 年長居民債券 (Senior Bond) – 無Section 8
- 基於專案的 Section 8
- 其他 \_\_\_\_\_

### 3. 文件提供準則

請提供每位年齡在18歲以上的住家成員的以下資料複印本：

1. 州駕駛執照、州身份卡或永久居民卡
2. 最新租約、購物貸款報表或報稅單和「房東說明」表格
3. 最近三(3)個月的收入文件。可接受的此類文件包括：

- 薪水支票存根或雇主出具的薪資單（示出總收入）
- DSHS 批准通知書
- 兒童贍養費
- 社會安全金通知函（SSA, SSI 等）
- 退休金、年金、個人退休帳戶(IRA)、利息和股息報表
- 華盛頓州勞工與工業部報表
- 學生財務輔助報表
- 租金/投資物業收入
- 自僱業者報表

#### 2014 合格加入計劃者列表

#### 可選擇提供的資訊

住家人數	月總收入	年總收入
1	\$2,550	\$30,600
2	\$3,335	\$40,020
3	\$4,120	\$49,440
4	\$4,905	\$58,860
5	\$5,689	\$68,268
6	\$6,474	\$77,688
7	\$6,621	\$79,452
8	\$6,768	\$81,216
9	\$6,915	\$82,980
10	\$7,063	\$84,756
每增加一人	\$147	\$1,764

#### 您屬於哪個族裔?

- 美洲印第安人、阿拉斯加原住民
- 亞裔美國人、亞裔
- 黑人、非裔美國人、非裔
- 西班牙語裔、南美裔
- 夏威夷原住民、太平洋島嶼居民
- 白人、高加索裔
- 混血族裔

#### 您是怎樣知道我們的服務的?

- 無線電廣播
- 電視
- 報紙
- 公用事業費帳單夾頁
- 網站
- 親友口耳相傳
- 其他 \_\_\_\_\_

### 4. 簽名

此申請表及支持文件用於審查向西雅圖市申請補充福利的資格，不得提供給聯邦歸化與移民局。我授權西雅圖市使用這些文件來讓我參加合乎本人資格的補助計劃。我了解這些個人資訊將受到審查與核實，而且還可能要求我提供其他文件。我允許西雅圖住房管理署、聯邦住房與城市發展法令第8條、金郡住房管理局、其他政府機構或受權代理人索取或提供這些資訊。遞交此份申請並不保證我會符合或加入任何計劃。我保證所提供的資訊均準確及完整；如果故意提供不實或誤導資訊，當受法律刑事追究。我了解如果我得到補助但未真實披露所有資訊，我的資格將被取消，而且西雅圖市可以追回我不合格期間的實際付出成本。如果我的收入或生活狀況發生改變，我會通知西雅圖市相關機構。

簽名

日期



## 公用事業折扣計劃

公用事業折扣計劃 (Utility Discount Program) 將標準民用費率打折約 60%，幫助您繳清 City Light 帳單，不再積欠。該計劃只向 City Light 顧客的民用住房提供，不適用商用住房。

參加計劃的資格不能追溯既往，折扣只適用於您被批准參加計劃以後的帳單。

如果需要更多資訊，請電 (206) 684-3417, 與我們聯絡，或發送電子郵件至 [SCL\\_RateAssistance@seattle.gov](mailto:SCL_RateAssistance@seattle.gov)。



City of Seattle

Seattle City Light

Save **60%** on your utility bill!

Dear Seattle City Light Customer:

Thank you for your interest in our Utility Rate Discount Program. The Utility Discount Program (UDP) provides a rate discount of up to 60% off, and can be a valuable tool in managing and reducing your electric bill.

Eligibility for the program is not retroactive, the discount (if approved) is applied to future bills after you have been approved for participation.

**Applicants receive housing subsidy or have Section 8 housing may not be able to receive the discount. Please call 206-684-3417 to see if you can sign up.**

Attached you will find a Program Application, a Landlord Tenant form, list of Required Information, and an Employment form. The Employment form must be completed for all occupants over the age of 18 years who cannot provide pay stubs.

Even if you do not have a social security number, you can still apply. Just make sure you write "NONE" for Social Security Number on the Employment form. Identification is **not** shared with any agencies, and only used for application purposes.

Please read and complete the application, and return all income and paperwork to the address listed on the application.

We will review your application and contact you if we have questions or need additional information. The review process will take 4-6 weeks.

We look forward to helping you better manage your electric utility bills. If you have any questions, please call us at (206) 684-3417  
Sincerely,

Your Seattle City Light Customer Service Team



Utility Discount Program, 700 Fifth Avenue, Suite 3200, P.O. Box 34023, Seattle, WA 98124-4023

Tel: (206) 684-3417, Fax: (206) 625-3709, Seattle.gov/Light/Discount, Email: [SCL\\_RateAssistance@seattle.gov](mailto:SCL_RateAssistance@seattle.gov)

Accommodations for people with disabilities provided upon request.

Seattle City Light is the 10th largest publicly owned utility in the nation dedicated to exceeding our customers' expectations in safely producing and delivering power that is low cost, reliable and environmentally responsible.



## Utility Discount Program

### *Frequently Asked Questions*

1. How long does it take to process my application?

Due to large volume of applications received, the average time to process an application is 1-2 billing cycles (2-4 months). However, if your application has all the requested documents (photo ID, three consecutive months of payroll statements/stubs for all household members over 18, and rental agreement or mortgage statement/taxes), it will shorten the process time and will help expedite the approval process.

2. How will I know if I've been approved?

You will receive a letter in the mail of your approval or ineligibility. After approval, if you have a Seattle City Light bill in your name, the discount will be noted "Winter/Summer Rate Assistance." If you have a Seattle Public Utilities (SPU) bill in your name, the discount will be noted as a "Utility Credit" on your bill. *Please note: If you live in the SPU service territory and do not have an SPU bill in your name, you may be eligible for the utility credit, which may be added to your SCL account.*

3. Will this help with the bill that I have now?

The Utility Discount Program **is not retroactive** and it will only apply to your future bill(s) after your application has been processed and approved. We recommend that applicants continue to make payments or seek other options (payment arrangements or other programs that can help with the immediate bill(s)).

4. What if I have a disconnect bill (SPU or SCL bill that says non-payment will result in service disconnection) and I've been waiting for my application to be processed?

Please contact SCL or SPU directly and make payment arrangements if you are unable to pay the full amount. You may also be eligible for other assistance such as the Energy Assistance Program (SPU), Emergency Low Income Assistance (SCL) or Project Share (SCL). Please note many programs may have different requirements and eligibility processes. Submitting an application does not guarantee benefits or an expedited process if your household is subject to disconnection. The phone number for both SCL and SPU is 206-684-3000.

5. How much is the discount and how long will I be on the program?

The discount is approximately 50% for both qualifying SCL or SPU bills. The average time you will be on the program once approved is six to 18 months. Customers who are ready to recertify will receive a recertification "card" to call our office within 5-10 business days to begin the recertification process. Customers will need to complete a recertification form with an updated household status and provide supporting documents.

6. Will the discount move with me if I move to another apartment or another residence?

No. Customers who move to another residence or another unit in the same apartment must reapply. The customer's premise number (last six digits of the account number) is different for each address.



**UTILITY DISCOUNT PROGRAM  
APPLICATION CHECKLIST - REQUIRED DOCUMENTATION**

*Please send these with your application and check all that apply.*

- 1. DID YOU COMPLETELY FILL OUT AND SIGN THE APPLICATION?     Yes
- 2. DID YOU ATTACH GOVERNMENT-ISSUED PHOTO IDENTIFICATION FOR EACH PERSON 18 YEARS AND OLDER?
  - State driver’s license
  - State identification card
  - Passport or Permanent Resident Card
  - Other \_\_\_\_\_

**3. DO YOU HAVE YOUR HOUSING DOCUMENTS?**

**RENTERS**

- Statement from Landlord form    **OR**
- Current and complete Lease/Rental Agreement and current rent payment receipt

**HOMEOWNERS**

- Mortgage Statement – if you have a mortgage
- Property Tax Statement – if you do not have a mortgage anymore.

**4. DID YOU SEND YOUR INCOME PAPERWORK FOR EACH PERSON 18 YEARS & OLDER WHO LIVES IN THE HOME?**

Please provide verification of GROSS income received in the three (3) Months BEFORE Signing the Application:

- Example: If You Sign Application in August → Send Proof of Income for April, May, June and July**

***Include all that applies to Household Members:***

- Paycheck stubs/ Employer statement showing GROSS earnings for 3 months
- DSHS award letters (TANF, GAU/GAX)
- Child support
- Social Security/SSI award letter
- Pensions/Annuity/IRA, Interest & Dividends
- Labor and Industry (L&I) statement
- Student financial aid statement
- Rental/investment property income
- Self employed (Most recent full tax return & 3 months profit & loss statements)
- Any Household Member who is 18 years or older should complete the Social Security number section & sign the “Employment Security Dept” request for records form”
- Other \_\_\_\_\_



**City of Seattle  
Seattle City Light  
Utility Discount Program**

**STATEMENT FROM  
LANDLORD/TENANT**

**By signing below, I authorize my Landlord/manager to release my rental information below.**

**TENANT SIGNATURE**

x \_\_\_\_\_

**PROPERTY OWNER OR AUTHORIZED MANAGER:** Complete all sections below with only the information you know to be true. Write "unknown" to questions you can't answer. (Do not leave any box blank.)

**SECTION A. TENANT INFORMATION**

1. STREET ADDRESS & APARTMENT (APT) NUMBER		5. NAMES OF ALL ADULTS AND CHILDREN LIVING AT THIS ADDRESS	
CITY	STATE	ZIP CODE	
2. TENANT'S NAME			
3. DATE MOVED IN	4. TYPE OF RESIDENCE		Attach more pages if needed.
	<input type="checkbox"/> House <input type="checkbox"/> Apt <input type="checkbox"/> Duplex/Triplex <input type="checkbox"/> Condo <input type="checkbox"/> Mobile Home		

**SECTION B. RENTAL INFORMATION – THIS SECTION NEEDS TO COMPLETED IN FULL TO PROCESS THE APPLICATION.**

6. NAME OF PERSON(S) PAYING THE RENT		7. TOTAL RENT AMOUNT: \$ _____	
8. DOES THE TENANT RECEIVE SUBSIDIZED RENT? <input type="checkbox"/> YES <input type="checkbox"/> NO  <b>If YES, please select one of the following:</b> <input type="checkbox"/> Seattle Housing Authority <input type="checkbox"/> Bond - No Section 8 <input type="checkbox"/> HUD <input type="checkbox"/> Section 8 – Project Based <input type="checkbox"/> King County Housing Authority <input type="checkbox"/> Tax Credit Unit <input type="checkbox"/> Section 8 - Voucher <input type="checkbox"/> Minimum Rent (e.g. SHA) <input type="checkbox"/> Shelter+Care <input type="checkbox"/> Housing First <input type="checkbox"/> Other _____		10. DOES THE TENANT PAY THE FULL AMOUNT OF RENT IN BOX 7? <input type="checkbox"/> YES <input type="checkbox"/> NO If NO, who pays additional rent? _____  If NO, amount tenant pays: \$ _____	
9. DOES THE TENANT RECEIVE <u>ANY FORM</u> OF DEDUCTION FROM THE GROSS RENT FOR A UTILITY ALLOWANCE, DEDUCTION, OR UTILITY CREDIT? <input type="checkbox"/> Yes <input type="checkbox"/> No		11. DOES THE TENANT WORK IN EXCHANGE FOR A PORTION OF RENT IN BOX 7? <input type="checkbox"/> YES <input type="checkbox"/> NO If YES, amount tenant receives: \$ _____	

12. LANDLORD/MANAGER'S NAME		13. PROPERTY OWNER'S NAME (If different from Landlord Manager)	
STREET ADDRESS OR P.O. BOX NUMBER		OWNER'S NAME	
CITY	STATE	ZIP CODE	
CONTACT TELEPHONE NUMBER		CITY	STATE      ZIP CODE
LANDLORD/MANAGER SIGNATURE	DATE	WORK TELEPHONE NUMBER	
x _____			

Submit this Application to: **Seattle City Light – Utility Discount Program**  
**700 Fifth Ave, Suite 3200, Room 2801**  
**Seattle, WA 98124-4023**  
**Telephone Number: (206) 684-3417   Fax Number: (206) 287-5368**

A response to your request will be sent within 5 BUSINESS DAYS.

**1. PROVIDE THE FOLLOWING INFORMATION:**

**Name** (please include any alias or maiden name):

**Social Security Number:**

**2. CHECK ONE OR MORE BOXES TO INDICATE THE RECORDS BEING REQUESTED:**

I am requesting a copy of my Employment History from  
\_\_\_\_\_ through \_\_\_\_\_  
(start date) (end date)

I am requesting a copy of my Unemployment Payment History from  
\_\_\_\_\_ through \_\_\_\_\_  
(start date) (end date)

If you are seeking records other than the above (identify here):

If you do not have a Social Security number then write the number that you use to work in the above space. If you do not use another number then write "No Social Security number".

**3. AUTHORIZATION AND SIGNATURE:**

**a) Mail or Fax records to:**

**ATTN:**  
Seattle City Light  
Utility Discount Program  
700 5<sup>th</sup> Avenue - SMT/Room 2801  
Seattle, WA 98124  
Phone (206) 684-3417  
FAX: (206) 287-5368

c) I authorize the requested information/records be released and sent to the entity identified in Section 3a.

d) By signing below I declare under the penalty of perjury under the laws of the State of Washington that I am the individual whose records are being requested.

X \_\_\_\_\_  
**Signature (Required)**

\_\_\_\_\_  
**Date**