



City of Bellevue
 P.O. Box 90012
 Bellevue, WA 98009-9012
 Language line assistance provided upon request.

2020 Utility Rate Rebate Program

Phone: 425-452-5285

TTY Relay: 711

Email: UtilityRelief@bellevuewa.gov

Web: bellevuewa.gov/UtilityRelief

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GUIDELINES FOR UTILITY RATE REBATE

NOTE: These guidelines apply only to Bellevue area residents seeking a rate rebate on 2019 utility costs for water, wastewater and drainage services. If these City of Bellevue services were paid indirectly by you through rent or other third party, this is the correct application packet for you. However, if you currently pay a utility bill directly to the City of Bellevue and are seeking a reduction in 2020 utility costs, this is not the appropriate application. Instead, please visit the website noted above or call the Bellevue Utilities contact phone number to get a 2020 Rate Discount Application Packet.

1. PROGRAM DESCRIPTION

The City of Bellevue offers rate relief assistance to seniors and residents with permanently disabilities living within the service area of Bellevue Utilities that meet specific low-income guidelines. Residents can get a rebate of 70% off their basic 2019 water, wastewater, and drainage costs previously paid through rent or other third party by qualifying for this program. Residents **MUST** apply or renew their participation for the program annually. Approved residents also qualify (without additional paperwork) for a rebate on utility occupation taxes paid to the City. Tax rebate checks are based on an applicant’s continued participation in the Rate Relief Program and will be mailed out in late December 2020.

NOTE: Programs are based on available funding and are subject to change without notice.

2. APPLICATION DEADLINE

Your completed application and all required documentation must be received by City of Bellevue Utilities no later than 4:00 p.m. on **Friday, October 30, 2020**.

3. ELIGIBILITY CRITERIA

Applicants for Bellevue’s 2020 Utility Rate Relief *Rebate* must be:

- Low-income seniors, 62 years of age or older during 2019; (OR)
- Low-income permanently disabled persons receiving disability benefits from a government program such as Soc. Sec. and/or Veteran’s Admin. in 2019; AND
- Living at the address receiving services in 2019. Address **MUST** be within the service area of City of Bellevue Utilities.
- Must meet the household income guidelines below.

Household Size in <u>2019</u>	Total Household Income for <u>2019</u>
1 person	\$38,750
2 persons	\$44,300
3 persons	\$49,850
4 persons	\$55,350
5 persons	\$59,800
6 persons	\$64,250

* Income means “disposable income” as defined in RCW 84.36.383, plus all gifts and disability benefits. Total household income is the total income for everyone living in your household during 2019. Examples of income and required documentation are described in the “How to Apply” section.

4. HOW TO APPLY

You must fill out and return a *2020 Utility Rate Rebate Application* with required identification, residency, income, housing assistance, and disability (if applicable) documentation. Applications are also available online at bellevuewa.gov/utilityrelief or you may call Bellevue Utilities at 425-452-5285 to request an application. Applications may also be picked-up at the Bellevue City Hall Service First desk and Crossroads Mini-City Hall. **Once you have the application, the next steps are:**

1. Collect the necessary documents from the required document list.
2. Complete the application. Read the "Important Information" statement, sign and date the application.

NOTE: If you are signing on behalf of an applicant, you must provide a copy of the Power of Attorney authorizing you to do so.

- Turn in the completed and signed application with all documentation. Application packages **MUST** be received by City of Bellevue Utilities at downtown Bellevue City Hall, no later than 4:00 p.m., PST, on **Friday, October 30, 2020**. Late or incomplete applications cannot be processed. Applicants are encouraged to turn their applications in early to ensure timely processing. You may return your application by mail to:

City of Bellevue/Utilities Customer Service ** P.O. Box 90012 ** Bellevue, WA 98009-9012.

Submitting an application does not guarantee eligibility. Applications submitted without complete documentation cannot be processed.

NOTE: In-person application appointments may have limited availability.

5. REQUIRED DOCUMENTS

Photocopies of the following must be provided with your signed application form:

- A. Proof of 2019 Income for each Member of Household.** Please provide photocopies of completed and signed 2019 Tax Returns and other 2019 statements/documentation* for EVERY person living with you in 2019 and for ALL income sources that apply to your household during 2019. Some examples of household income include, but are not limited to:

- | | | |
|--|---------------------|--|
| • Salary/Wages/Tips, etc. | (W-2) | • Unemployment/Labor and Industries |
| • Interest/Dividends | (1099-INT/1099-DIV) | (1099-G) |
| • Alimony/Spousal Maintenance | (State/DSHS Stmts.) | • Social Security Statement (SSA, SSI, SSDI, 1099) |
| • Business Income, include rental property income and/or rental pymts. co-tenant | (1040 + Sch. C) | • Housing Assistance (HUD, Section 8) |
| • Capital Gains/Losses | (1040 + Sch. D) | • Gifts/Cash |
| • IRA withdrawal | (1099-R) | • Work Study Earnings |
| • Pension/Veteran's/Annuities | (1099-R) | • Military pay/benefits |
| • Railroad Retirement Benefits | (RRB-1099) | • Other |

* If unable to provide income documentation from the original source, provide all 2019 bank stmts. to evidence deposits for the same.

- B. Identification of All 2019 Household Members Is Required.** Valid photo identification is required for each person living in your household in 2019. Acceptable forms of ID include: Driver's License, WA State ID card, Passport, or other government issued photo ID. For household members under the age of 18, submit a copy of their certified birth certificate. Please **DO NOT SEND ORIGINALS** as we cannot return or guarantee their safety. NOTE: **Expired ID will not be accepted.**

- C. Proof of 2019 Primary Residence Within Bellevue Service Area Is Required.** Please provide a copy of your Puget Sound Energy (PSE) bill for January 2020. Include a copy of each page as we must verify your name, address and the energy usage bar graph that details the prior year's history. If you do not have an account with PSE, please provide a signed Lease Agreement effective for each month of 2019. If necessary, you can request a Landlord/Tenant Form, which may be completed by your landlord.

Continued on Next Page 

- D. Proof of 2019 Housing Assistance (if applicable). If you received housing assistance in 2019, please provide evidence showing the amount of assistance and the tenant payment.
- E. If Permanently Disabled, Proof of 2019 Disability Award and Earnings Is Required. If you and/or another member of your household are permanently disabled, you MUST provide a Benefit Verification Letter from a government program such as Social Security and/or Veterans' Administration specifically stating the recipient was entitled to and was receiving 2019 "disability" benefits. Documentation of disability income payments received during 2019 is also required.

6. FOLLOWING APPLICATION SUBMITTAL

Please note the following:

- This process can take 10 weeks or longer.
- Providing a complete application package with signature and all required documentation helps expedite processing.
- If your application is approved, a rebate check will be mailed to the address noted on your application.
- If applicant remains in the Utility Rate Relief Program throughout the year, a tax relief rebate will be automatically processed *without additional paperwork*. Tax rebate checks will be mailed in late December 2020.
- If your application is denied, you will be notified.

The Utilities Department reserves the right to audit or request additional information related to any application or renewal to ensure eligibility and compliance with the program's requirements. The department may deny any application or renewal which contains any false or misleading representation of fact or may revoke eligibility for rate relief which was procured by fraud or by any false or misleading representation of fact. Any funds reimbursed or the difference in rates discounted as a result of fraud or false or misleading representation of fact by the applicant shall be returned to the City. The City may use any lawful means necessary to seek repayment of said funds.

NOTE: Applicants must promptly notify Bellevue Utilities if there is a change of address.



For alternate formats, interpreters, or reasonable accommodation requests please phone at least 48 hours in advance 425-452-5285 (voice) or email UtilityRelief@bellevuewa.gov. For complaints regarding accommodations, contact City of Bellevue ADA/Title VI Administrator at 425-452-6168 (voice). If you are deaf or hard of hearing dial 711. All meetings are wheelchair accessible.



BELLEVUE UTILITY RATE REBATE APPLICATION - 2020

B2

450 110TH Ave NE
P.O. Box 90012, Bellevue, WA 98009-9012 Web: bellevuewa.gov/UtilityRelief
Phone: 425-452-5285 Email: UtilityRelief@bellevuewa.gov
Language line assistance provided upon request. TTY Relay: 711

OFFICE:
Date Rec'd _____
Date Complete: _____
Location: _____

OFFICE USE ONLY					
PIN:	T	INCOME:	F or P:		
CIS CYCLE:	TAX PRORATION (1-11):		BATCH:		
MONTHS (1-12):	D or S:		START DATE EXCEPTION:		
			ID		
Check:					
___ Incl List	___ Signature	___ Disability	___ Income	___ ID/Age	___ Residency

- Applicant's Legal Name (print): _____

LAST NAME
FIRST NAME
- Are you 62 years old or older? Yes No Birthdate: _____ Last 4 digits of SSN _____
- Complete address for your Primary Residence _____
- Current mailing address (if different): _____
- Name of apartment/condo complex (if applicable): _____
- Phone (with area code): _____ Email address: _____
- Do you: Own house/condo Rent house / condo / apartment
- Do you pay a utility bill for water to the City of Bellevue? Yes No If Yes, STOP. You do not have the correct application. Contact Bellevue Utilities for a Rate Discount Application.
- Have you qualified for this program before? Yes - Year _____ No
- Did you receive housing assistance in 2019? Yes No If yes, provide evidence showing the amount of assistance and tenant payment.
- Were you permanently disabled and receiving disability benefits in 2019? Yes No If yes, evidence is required.
 If applying on behalf of a permanently disabled child, do disability benefits pay a portion of utility costs?
 Yes No

12. How many people lived with you in your household in **2019**? _____ Print the names of each person below:

FIRST NAME (Legal Names Only)	LAST NAME	Date of Birth (mm/dd/yy)	Relationship to Applicant	Permanently Disabled? Yes or No (If Yes, provide evidence)
A.				
B.				
C.				
D.				
E.				
F.				

13. Did you or anyone living in your household in 2019 have income from any of the sources below during 2019? You **MUST** check the 'Yes' or 'No' box for each item below and provide documentation* to verify the same.

Y N

	Salary/Wages/Tips, etc. (W-2)
	Interest & Dividends (1099-INT/1099-DIV)
	Alimony/Spousal Maintenance (State/DSHS Stmts.)
	Capital Gains/Losses (1040 + Sch. D)
	Business Income, include rental income and/or rental payments from co-tenant (1040 + Sch. C)
	IRA withdrawal (1099-R)
	Pension/Veteran's Benefits/Annuities (1099-R)
	Railroad Retirement Benefits (RRB-1099)

Y N

	Unemployment/Labor and Industries (1099-G)
	Social Security (SSA, SSI, SSDI, 1099 Stmts.)
	Work Study Earnings (School Stmts.)
	Gifts/Cash – Explain:
	Housing Assistance (KCHA, Section 8)
	Military pay/benefits
	Other income for 2019:
	Did you/member(s) of household file a 2019 Tax Return? Provide copy of signed 1040 with all attachments.

* If unable to provide income documentation from an original source, provide 2019 bank statements reflecting all deposits for the above.

14. Do you consent to have your contact information (name and mailing address) shared with other City of Bellevue departments to receive information about other low-income assistance programs? Yes No

CHECK LIST: Provide COPIES (no originals) of the following documents with your application. Applications cannot be processed without required documentation.

- Identification** – Valid picture identification for all persons 18 years and older who lived in the household during 2019. For those under the age of 18, submit a certified birth certificate. **Expired ID will not be accepted.**
- Proof of 2019 Residency** – Puget Sound Energy bill (Jan. 2020) showing your name, address, and usage graph for January – December 2019 OR Lease/Rental Agreement for 2019 OR have landlord complete our Landlord/Tenant Form (available upon request).
- Income Documentation for 2019** (i.e., 2019 tax returns, statements, etc.) Evidence of all income for EACH household member living with you during 2019. Includes EVERY income source that was marked “yes” in Question 13.
- Proof of Housing Assistance for 2019** – If you received housing assistance for 2019, evidence must be provided. This needs to include the amount of assistance paid by KCHA or Section 8 and the amount of rent paid by you.
- Proof of Permanent Disability** - If applicable, provide Benefit Verification Letter from a government program such as Social Security and/or VA, stating specifically that recipient was entitled to and received “disability” benefits in 2019. Documentation of 2019 disability income is also required.

How to Apply

1. Collect the required identification, residency, income, housing assistance, and disability (if applicable) documents. Applications submitted without complete documentation cannot be processed.
2. Fill out the application, read the "Important Information" statement. Sign and date the application.
3. Completed application and documentation must be received by City of Bellevue Utilities no later than **4:00 p.m., PST, on Friday, October 30, 2020**. Late or incomplete applications cannot be processed. Applicants are encouraged to turn their applications in early in the program year to ensure timely processing. You may return your application by mail to:

City of Bellevue/Utilities Customer Service ** P.O. Box 90012 ** Bellevue, WA 98009-9012

IMPORTANT INFORMATION – PLEASE READ BEFORE SIGNING

I, the undersigned, under penalty of perjury of the laws of the state of Washington do hereby declare and certify:

- That I have read and understood all of the **2020 Utility Rate Relief Program Guidelines for Utility Rate Rebate (4/01/2020)** provided with this application, and that all of the information provided by me on this application is accurate, complete, and true to the best of my knowledge.
- That I understand that submitting the required documentation does not guarantee eligibility to the program. Such information will, however, be used to determine if I qualify for benefits under the program.
- That I understand that the income documents I provided will be used by the City to create an income worksheet that will be used to determine income qualification.
- That I have read the definition of "disposable income" for the program and to the best of my knowledge, I and my household are eligible for the program.
- That I have provided a true and accurate list of "disposable income" to the City for 2019.
- That I understand the rate rebate is for charges paid in 2019 only and it is my responsibility to re-apply or renew my participation for this or any other rate relief program during application periods for those programs.
- That I understand that any attempt to falsify my information will result in my disqualification from the program for this year and may subject me to repayment of funds received and further civil or criminal penalties.
- That I understand the City reserves the right to audit my records to determine my eligibility for the program.
- That I understand that if I receive utility relief and do not disclose all sources of disposable income for household members for 2019, the City may recover the funds received for the period that I was not eligible.

Applicant Signature* _____ Date: _____

* If signing for an applicant, MUST provide a copy of the Power of Attorney authorizing you to do so.

Office Use Only

Approved/Disapproved: _____ Date: _____

Verified: _____ Date: _____

DISC Update - Initial: _____ Verified: _____

Application Denied: Over Income Doesn't Qualify Incomplete Paperwork Other: _____
 Logged Denied Added to 2021 mailing list

Office Notes: