



## BELLEVUE UTILITY EMERGENCY ASSISTANCE PROGRAM - 2021

450 110<sup>TH</sup> Ave NE

P.O. Box 90012, Bellevue, WA 98009-9012

Phone: 425-452-5285

Language line assistance provided upon request. TTY Relay: 711

Web: [bellevuewa.gov/UtilityRelief](http://bellevuewa.gov/UtilityRelief)

Email: [UtilityRelief@bellevuewa.gov](mailto:UtilityRelief@bellevuewa.gov)

### GUIDELINES FOR EMERGENCY ASSISTANCE PROGRAM

NOTE: These guidelines only apply to residents currently paying a utility bill directly to the City of Bellevue for water, wastewater and drainage services. If you are indirectly billed for your utility services (e.g., the costs are included in your rent or paid to a third party), you are not eligible for this program.

#### PROGRAM DESCRIPTION

The City of Bellevue offers temporary utilities service charge relief to residents living within the service area of Bellevue Utilities that meet specific low-income guidelines, are not currently served by the Utility Rate Relief Program, and who are experiencing financial crises. Residents that pay their bills directly to the City of Bellevue may qualify for a 100% discount on a basic level of service (benefit not to exceed \$301 per bill) for up to 2 bills (4 months) of utility service charges by qualifying for this program. Some charges, such as capital recovery charges (CRCs), may not be waived. Residents may only receive this assistance once every three (3) years.

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

#### ELIGIBILITY CRITERIA

Applicants must be:

- Low-income, meeting the household income\* guideline below; AND

Household Size in <u>2021</u>	Monthly Household Income*
1 person	\$3,483
2 persons	\$3,983
3 persons	\$4,479
4 persons	\$4,975
5 persons	\$5,375
6 persons	\$5,775

- Living at the address receiving services in 2021 and be named on the City of Bellevue Utilities account. Applicant's primary residence must be within the service area of City of Bellevue Utilities; AND
- Experiencing a "financial shock" which is defined as a recent, unexpected event or expense that threatens financial stability. This expense or event must interfere with the ability of the household to cover necessary basic needs expenses, such as housing, utilities, food, health, and/or other necessary expenses; AND
- Not currently participating in the Utility Rate Relief Program.

\* Income means "disposable income," as defined in RCW 84.36.383, plus all disability compensation and any and all gifts. Total household income is the total income for everyone living in the household during 2021. Examples of income and required documentation are described in the "How to Apply" section that follows.

#### HOW TO APPLY

You must fill out and return a *2021 Utility Emergency Assistance Application* with required identification, evidence of financial shock, residency, and income documentation. Applications are available by calling Bellevue Utilities at 425-452-5285 to request an application. **Once you have the application package, 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.

3. Turn in the completed and signed application with copies of all required documentation. There are two ways to submit the materials for this program:
- By Mail –You may apply by mail. Please sign and date the application and include copies of all required documentation when returning your paperwork. Incomplete application forms or missing documentation will delay the processing of your application. The mailing address for the program is:

City of Bellevue Utilities  
Attn: Utility Rate Relief Program  
P.O. Box 90012  
Bellevue, WA 98009-9012

- Electronically - You may submit your application electronically by emailing [UtilityRelief@bellevuewa.gov](mailto:UtilityRelief@bellevuewa.gov) and requesting access to a secure folder where you may upload your scanned documents. Please do not email your documents.

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

#### **REQUIRED DOCUMENTS** Photocopies of the following must be provided with your signed application form:

- A. Proof of Income for each Member of Household for the last 30 days. Please provide photocopies of statements/documentation\* for EVERY person living with you in 2021 and for ALL income sources that apply to your household during the last 30 days. Some examples of household income include, but are not limited to:

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| • Salary/Wages/Tips, etc. (pay stubs)   | • IRA withdrawal (statements)                    |
| • Interest/Dividends (statements)   | • Pension/Veteran's/Annuities (statements)       |
| • Alimony/Spousal Maintenance (State/DSHS stmts.)   | • Railroad Retirement Benefits (statements)      |
| • Business Income, include rental property income and/or rental pymts. co-tenant (evidence of pymts received) | • Unemployment/Labor and Industries (statements) |
| • Capital Gains   | • Social Security Statement (SSA, SSI, SSDI)     |
|   | • Gifts/Cash                                     |
|   | • Work Study Earnings                            |
|   | • Military pay/benefits                          |
|   | • Other  |

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

- B. Identification for All 2021 Household Members Is Required. Valid photo identification is required for each person living in your household in 2021. 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 "Financial Shock." Evidence of a job loss or unexpected expense such as medical costs, car repair, etc.

#### **FOLLOWING APPLICATION SUBMITTAL**

Please note the following:

- Providing a complete application with all required documentation helps expedite processing.
- If your application is denied, you will be notified.
- Qualified applicants will be notified once the application has been approved and processed.

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.



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](mailto: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.