



Bellevue Utility Bill Assistance Program

450 – 110th Ave NE, Bellevue, WA 98004

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

Phone: 425-452-5285 | Email: UtilityRelief@bellevuewa.gov | Web: bellevuewa.gov/UtilityRelief

February 1, 2025

Dear Applicant:

The City of Bellevue is now accepting applications from low-income seniors and low-income persons with permanent disabilities for the **2025 Utility Bill Assistance Program**. Enclosed are application materials for Bellevue's 2025 Utility Bill Assistance Discount for residents that pay utility bills for water, wastewater, and drainage services directly to the City. If your utility charges are included in your rent, or are paid through a third party, please contact Bellevue Utilities for a 2025 Utility bill Rebate Application.

This application packet includes:

- **2025 Utility Bill Assistance Discount Program Guidelines.** It provides a program description, eligibility information, instructions on how to apply, and submittal requirements.
- **2025 Utility Bill Assistance Discount Application Form.** Please complete each section of the application with required details. Use the checklist on the form to collect all necessary documentation. Remember to sign and date the form before turning the paperwork in.

There are two ways to apply for the 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. Please return your paperwork in the return envelope included with this packet.

For customers currently on the program: To ensure your discount continues without interruption, your application and required documentation must be received by **April 30, 2025**. If your application is received after April 30, 2025, your discount will be interrupted until application approval.

The Utility Bill Assistance Program will close at 4:00 p.m. on **Friday, October 31, 2025**. Applications will not be accepted after this time. If you have any questions, please call 425-452-5285. Language line assistance provided upon request. Assistance for hearing impaired: dial 711.

Please note: Assistance will not be issued until an application has been approved and processed. It can take up to 10 weeks to process an application but longer for incomplete applications and during peak application periods. Please review your application for completeness to avoid a slowdown and submit your application early to ensure timely processing before the deadline noted above.

Sincerely,

Program Administrator
Utility Bill Assistance Program | City of Bellevue Utilities



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 BILL ASSISTANCE DISCOUNT- 2025

450 - 110th Ave NE, Bellevue, WA 98004

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GUIDELINES FOR UTILITY BILL ASSISTANCE DISCOUNT

NOTE: If your utility costs are included in your rent or paid to a third party, visit the website noted above or call Bellevue Utilities to get a 2025 Utility Bill Assistance Rebate Application Packet.

1. PROGRAM DESCRIPTION

The City of Bellevue offers utility bill assistance to seniors and residents with permanent disabilities living within the service area of Bellevue Utilities that meet specific low-income guidelines. Residents that pay their bills directly to the City of Bellevue can get a discount of 70% off the basic costs of 2025 water, wastewater and drainage services (up to 11 CCF of water and wastewater service charges bimonthly and drainage service charges up to a 10,000 ft², moderately-developed lot) by qualifying for this program. Please note: certain charges such as capital recovery charges (CRCs) and direct facility connection charges (DFCCs) cannot be discounted. Residents MUST apply or renew their participation for this program annually. Approved residents also qualify for a rebate on utility occupation taxes paid to the City. Tax rebate checks will be mailed by the City in late December 2025. In addition, approved residents living within Bellevue city limits also qualify for a bill assistance on garbage service. Garbage bill discounts are implemented by Republic Services, Inc., the City's solid waste collection vendor.

NOTE: Programs are based on available funding and 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 31, 2025**.

3. EXPIRATION OF 2024 DISCOUNTS

To ensure your discount continues without interruption, your application and required documentation must be received by **April 30, 2025**. If your application is received after April 30, 2025, your discount will be canceled. Once your new application has been approved and processed, your discount will be applied, and your account will be credited back.

4. ELIGIBILITY REQUIREMENTS

Applicants must be:

- Low-income seniors, 62 years of age or older in 2025, (OR)
- Low-income permanently disabled persons receiving disability benefits from a government program such as the Social Security Administration and/or Veteran's Administration in 2025;
AND

- Living at the address receiving services in 2025. Applicant’s primary residence must be within the service area of City of Bellevue Utilities.
- Must meet the household income* guideline below:

| Household Size in <u>2024</u> | Total Household Income* for <u>2024</u> |
|-------------------------------|---|
| 1 person | \$52,700 |
| 2 persons | \$60,250 |
| 3 persons | \$67,800 |
| 4 persons | \$75,350 |
| 5 persons | \$81,400 |
| 6 persons | \$87,450 |

* 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 2024. Examples of income and required documentation are described in the “How to Apply” section that follows.

5. HOW TO APPLY

You must fill out and return a *2025 Utility Bill Assistance Discount Application* with required identification, residency, income and disability (if applicable) documentation. Applications are available online at bellevuewa.gov/utility or 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 below.
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. Submit the completed and signed application with copies of all required documentation. Application packages MUST be received by City of Bellevue Utilities no later than 4:00 p.m., PST, on **Friday, October 31, 2025**. Late or incomplete applications cannot be processed. Applicants are encouraged to turn their applications in early to ensure timely processing. There are two ways to apply for the 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. Please return your paperwork in the return envelope included with this packet.

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

6. REQUIRED DOCUMENTS Photocopies of the following must be provided with your signed application form:

A. Proof of 2024 (previous year) Income for each Member of Household. Please provide photocopies of completed and signed 2024 Tax Return(s) and other 2024 statements/documentation* for EVERY person living with you in 2024 and for ALL income sources that apply to your household during 2024. Some examples of household income include, but are not limited to:

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

* If unable to provide income documentation from the original source, provide all 2024 bank stmts. to evidence deposits for the same.

B. Identification for All 2024 Household Members Is Required. Valid photo identification is required for each person living in your household in 2024. 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. Do not submit copies of Social Security cards. Please DO NOT SEND ORIGINALS as we cannot return or guarantee their safety. NOTE:

Expired ID will not be accepted.

C. Proof of 2025 Primary Residence Within Bellevue Service Area Is Required. The qualifying person for assistance must be named on the City of Bellevue Utilities account for which assistance is requested, must reside in the dwelling unit at all times the discount is in effect, and contribute to the payment of utility service charges from their own resources.

D. If Permanently Disabled, Proof of Disability 2025 Award and Earnings Is Required. If you and/or any other 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 that recipient is entitled to and is receiving “disability” benefits in 2025. Documentation of disability income payments received during 2024 is also required.

7. FOLLOWING APPLICATION SUBMITTAL

Please note the following:

- Application processing at the onset of the program may take longer than 10 weeks due to extremely high application intake volume.
- Providing a complete application with all required documentation helps expedite processing.
- If your application is denied, you will be notified.
- Qualified applicants will see a utility bill assistance discount applied to their utility bill once the application has been approved and processed. Republic Services, Inc. will be notified to implement the garbage service rate discount, if applicable.
- If applicant remains in the Utility Bill Assistance Program throughout the year, a 2025 tax assistance rebate will be automatically processed *without additional paperwork*. Tax rebate checks will be mailed in late December 2025.

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 bill assistance which was procured by fraud or by any false, misleading representation of fact, or refusal to comply with any audit. 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 Bill Assistance Discount Application 2025

| | |
|----------------|-------|
| OFFICE USE: | |
| Date Received: | _____ |
| Date Complete: | _____ |
| Status: | _____ |
| Initial: | _____ |

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| OFFICE USE ONLY | |
|------------------------------------|---|
| Pin: _____ | Income: _____ F or P: _____ |
| CIS Cycle: _____ | Tax Proration: _____ Batch: _____ |
| Months (1-12): _____ | D or S: _____ Start Date Exception: _____ |
| Check: | |
| <input type="checkbox"/> Incl List | <input type="checkbox"/> Signature <input type="checkbox"/> Disability <input type="checkbox"/> Income <input type="checkbox"/> ID/Age <input type="checkbox"/> Residency |

1. Applicant's Legal Name (print): _____
LAST NAME
FIRST NAME

2. Are you 62 years or older? Yes No Birthdate: _____

3. Do you pay a utility bill for water to the City of Bellevue? Yes No
 ▶ **If Yes**, account # _____
 ▶ **If No, STOP.** You do not have the correct application. Contact Bellevue Utilities for a Bill Assistance Rebate Application.

4. Complete address for your Primary Residence:

 STREET ADDRESS

 CITY STATE ZIP CODE

5. Current mailing address (if different):

 STREET ADDRESS

 CITY STATE ZIP CODE

6. Phone (with area code): _____ Email address: _____

7. Do you: Own house/condo Rent house / condo / apartment

8. Have you qualified for this program before? Yes - Year: _____ No

9. Were you permanently disabled and receiving disability benefits in 2024? 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

9. How many people lived with you in your household in 2024? _____

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? (If Yes, provide evidence) |
|----------------------------------|-----------|-----------------------------|---------------------------|--|
| A. | | | | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| B. | | | | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| C. | | | | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| D. | | | | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| E. | | | | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| F. | | | | <input type="checkbox"/> Yes <input type="checkbox"/> No |

11. Did you or anyone living in your household in 2024 have income from any of the sources below during 2024? You MUST check the 'Yes' or 'No' box for each item below and provide documentation* to verify the same.

| Source of Income | Required Document | |
|-----------------------------|-----------------------|--|
| Salary/Wage/Tips, etc. | W-2 | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Interest and Dividends | 1099-INT/1099-DIV | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Alimony/Spousal Maintenance | State/DSHS Statements | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Capital Gains/Losses | 1040 + Schedule D | <input type="checkbox"/> Yes <input type="checkbox"/> No |

| Source of Income | Required Document | |
|--|--|--|
| Business Income, include rental income and/or rental payments from co-tenant | 1040 + Schedule C | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| IRA withdrawal | 1099-R | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Pension/Veteran's Benefits/Annuities | 1099-R | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Railroad Retirements Benefits | RRB-1099 | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Unemployment/Labor and Industries | 1099-G | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Social Security | SSA,SSI, SSDI, 1099 Statements | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Work Study Earnings | School Statements | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Gifts/Cash - Explain: | | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Housing Assistance | KCHA, Section 8 | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Military pay/benefits | Statement/Other proofs | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Other Income for 2024: | Supporting Documents | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Did you/member(s) of household file a 2024 Tax Return? | Provide copy of signed 1040 with all attachments. | <input type="checkbox"/> Yes <input type="checkbox"/> No |

*If unable to provide income documentation from an original source, provide 2024 bank statements reflecting all deposits for the above.

12. Do you prefer to receive future notices, applications, or renewal forms in a language other than English? Yes No

▶ If yes, please select your preferred language:

- Spanish Chinese Traditional Japanese Korean Vietnamese
 Russian Hindi Other (please specify) _____

13. 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 2024. For those under the age of 18, submit a certified birth certificate. Expired ID will not be accepted.
- Income Documentation for 2024:** (i.e. 2024 tax returns, statements, etc.) Evidence of all income for EACH household member living with you during 2024. Includes EVERY income source that was marked “yes” in Question 13.
- 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 2024. Documentation of 2025 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 p.m. PST, Friday, October 31, 2025**. Late or incomplete applications cannot be processed. Applicants are encouraged to submit their applications early to ensure timely processing. You may submit your application by:
 - **Mail:** Return your application by mail to:
City of Bellevue Utilities, PO Box 90012, Bellevue, WA 98009-9012; or

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 2025 Utility Bill Assistance Program Guidelines for Utility Bill Assistance Discount (02/01/2025) 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 2024.
- That I understand the rate discount is for charges paid in 2025 only and it is my responsibility to re-apply or renew my participation for this or any other bill assistance 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 assistance and do not disclose all sources of disposable income for household members for 2024, 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.*

***Please take a moment to answer the questions below to help us improve and better serve you in the future.** Please note that answering these questions is optional and will have zero impact on your eligibility.

1. How do you prefer to submit your application/documents to the City of Bellevue?
 - Mail Online

2. How did you hear about the City of Bellevue’s Bill Assistance programs?
 - City of Bellevue Website Newspaper City Hall Customer Service
 - Friends or Neighbors City of Bellevue 211
 - Community Centers Facebook Page Other (please specify)
 - Hopelink Mini City Hall _____

3. Which platform do you prefer to use for updates and news about City of Bellevue programs?
 - Facebook Library Email
 - Instagram Parks Mail
 - TikTok City of Bellevue Website Other (please specify)
 - Email Text _____
 - Community Centers Message

4. What did you find most challenging about applying for the City of Bellevue’s Utility Bill Assistance Program?
 - Language and Communication Barrier Understanding the Requirement Other (please specify)
 - Meeting Deadline Gathering Documentation _____

OFFICE USE ONLY

Approved/Disapproved: _____ Date: _____

Verified: _____ Date: _____

Old CIS Multiplier Date: _____ New CIS Multiplier Date: _____

CIS Update - Initials: _____ Verified: _____

DISC Update - Initials: _____ Verified: _____

Application Denied:

Over Income Doesn’t Qualify Incomplete Paperwork Other: _____

Updated CIS Logged Denied Added to 2026 Mailing List

Office Notes:

51L-22-7505a 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) or email ADATitleVI@bellevuewa.gov. If you are deaf or hard of hearing dial 711. All meetings are wheelchair accessible.