



## BELLEVUE UTILITIES BILL ASSISTANCE Long-Term Assistance Guidelines

Need help?  
Call: 425-452-5285  
Email: [UtilityAssistance@bellevuewa.gov](mailto:UtilityAssistance@bellevuewa.gov)

### APPLICATION GUIDELINES

Bellevue Utilities offers two long-term bill assistance programs. Senior residents (62+) and residents with permanent disabilities living within the service area of Bellevue Utilities and meet specific low-income guidelines may qualify to receive a utility discount. Residents receiving kidney dialysis treatments may qualify for a discount on the water and wastewater required to provide those medical treatments without an income requirement. In addition, low-income residents may qualify to receive an annual tax rebate.

### HOUSEHOLD INCOME

1 Person	2 Persons	3 Persons	4 Persons	5 Persons	6 Persons
\$52,700	\$60,250	\$67,800	\$75,350	\$81,400	\$87,450

For each adult member (18 years and older) of your household, you must provide proof of annual income (Federal Tax Return) and proof of identification (Copy of Driver's License, State ID Card, Passport)

### 1. DISCOUNT/REBATE FOR SENIORS AND DISABLED RESIDENTS

#### ■ Residents Billed Directly by Bellevue Utilities

Qualify for 70% off the basic costs of water, wastewater and drainage services\*

*Please note:* Certain charges, such as capital recovery charges (CRCs) and direct facility connection charges (DFCCs), cannot be discounted up to 70% off utility costs. Additionally, directly billed customers are eligible for discounted garbage rates through Republic Services.

\*Up to 11 CCF of water and wastewater service charges bimonthly and drainage service charges up to a 10,000 ft<sup>2</sup>, moderately-developed lot.

#### ■ Residents Billed Indirectly

Qualify for a rebate of 70% off basic water, wastewater, and drainage costs paid through rent or other third party. Approved applicant also qualify (without additional paperwork) for a rebate on utility occupation taxes paid to the City. Tax rebate checks are mailed late December..

#### Who can apply?

- Low-income Seniors (aged 62 or older)
- Low-income permanently disabled residents receiving disability benefits from a government program such as the Social Security Administration and/or Veterans Administration
- Residents undergoing in-home kidney dialysis
- Lives within Bellevue Utilities service area and meet specific residency requirements.

\*Proof of January Puget Sound Energy Bill, Lease Agreement, or Landlord-Tenant Form required.\*

## 2. UTILITY TAX PROGRAM AND BENEFIT

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Low-income residents can qualify to receive a utilities tax rebate check for utility occupational taxes paid to the City.

### Who can apply?

- Low-income residents
- No age or disability requirements
- Lives within Bellevue Utilities service area and meet specific residency requirements.  
\*Proof of most recent Puget Sound Energy Bill, Lease Agreement, or Landlord-Tenant Form required.\*

## APPLICATION DEADLINE

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Utilities long-term bill assistance programs accept application starting in February (discount) or April (rebate). The deadline for both programs is October 31.

## REQUIRED DOCUMENTS FOR ALL HOUSEHOLD MEMBERS

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- Government issued photo identification (State ID, Driver's License, Passport).
- Birth Certificate (for household members under 18 years old) OR Current School ID Card
- Proof of Income for each household member.
- Proof of Residency in Bellevue service area (Puget Sound Energy Bill, Lease Agreement, Landlord-Tenant Form).
- Proof of Permanent Disability (if applicable).
- Proof of Unemployment (if applicable)

## SUBMITTING YOUR APPLICATION

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**Mail to:**  
City of Bellevue Utilities  
P.O. Box 90012  
Bellevue, WA 98004

**Drop Off:**  
City of Bellevue  
450 110th Ave NE  
Bellevue, WA 98004

OR  
Crossroads Mini City Hall  
Crossroads Shopping Center, #E1  
15600 NE 8th St.

\*Submissions via email cannot be accepted. Please contact our office for alternative submission options.\*

### Review Process

- When the application period opens in February/April, application processing may take longer than 10 weeks due to extremely high application volume.
- To ensure your discount continues without interruption, your application and required documentation must be received by April 30. If your application is received after April 30, your discount will be canceled until you submit a new application. Once your new application has been approved and processed, your discount will be applied, and your account will be credited.
- If your application is approved, a rebate check will be mailed to the address noted on your application.
- Providing a complete application with all required documentation helps expedite processing.
- You will be notified if your application is denied or needs more documentation,
- Approved applicants will see a utility bill assistance discount applied to their utility bill. Republic Services, Inc. will be notified by Bellevue Utilities to apply the garbage service rate discount, if applicable.



## UTILITIES BILL ASSISTANCE APPLICATION

### Long-Term Assistance

For assistance, call 425-452-5285 or email: [UtilityAssistance@bellevuewa.gov](mailto:UtilityAssistance@bellevuewa.gov).

Language line assistance provided upon request. TTY Relay: 711

Please complete all steps of this application to ensure faster processing.

For more information, see attached program guidelines or visit [BellevueWa.gov/utility-bill-assistance](http://BellevueWa.gov/utility-bill-assistance).

#### STEP 1: Primary Account Holder Information

The Primary Account Holder is the person whose name is listed on the utility bill.

First Name \_\_\_\_\_ Last \_\_\_\_\_

Are you 62 years or older? ☐ Yes ☐ No Date of Birth (mm/dd/yyyy): \_\_\_\_\_

Were you permanently disabled and receiving disability benefits last year? ☐ Yes ☐ No

Do you pay a Bellevue Utilities bill? ☐ Yes ☐ No Utility Account # \_\_\_\_\_

#### Service Address:

Street \_\_\_\_\_ Unit/Apartment # \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP Code \_\_\_\_\_

#### Mailing Address: *(if different than current address)*

Street \_\_\_\_\_ Unit/Apartment # \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP Code \_\_\_\_\_

Phone Number \_\_\_\_\_ Email Address \_\_\_\_\_

Do you: ☐ Own house/condo ☐ Rent house / condo / apartment

Would you like to opt-out of receiving information about other low-income assistance programs? ☐ Yes ☐ No

**STEP 2: Household Information:**

Bellevue Utilities defines a household as a person(s) who lives in the home and contributes to the household income. This could be a spouse, partner, child, parent or anyone else. Situations not considered to contribute to a household: Minor dependents under the age of 18 count towards your household size but their income is not counted towards household income. Registered in-home caregivers do not count towards household size or household income. If you are a tenant and your landlord lives in the same housing unit, the landlord does not count towards the household size or income. Renters in your home do not count towards household size or income: however, you must include any rental income to your household income.

Last year, how many people lived in your home for the whole year? \_\_\_\_\_

Complete the table below for all household members including yourself.

Full Name (first, last)	Date of Birth (mm/dd/yy)	Relationship to Applicant	Receiving Disability Benefits? (Check if applicable)	Total Annual Income
		Myself	<input type="checkbox"/>	
			<input type="checkbox"/>	
			<input type="checkbox"/>	
			<input type="checkbox"/>	
			<input type="checkbox"/>	

### STEP 3: Household Income

Select all sources of income the household receives for members 18 years or older.

Submit photocopies of all income documents.

Source of Income	Required Document	
Salary/Wages/Tips, etc	W-2	<input type="checkbox"/> Yes <input type="checkbox"/> No
Social Security Statements	SSA, SSI, SSDI 1099	<input type="checkbox"/> Yes <input type="checkbox"/> No
Business Income, rental property income and/or rental payments	Document 1040 + Schedule C	<input type="checkbox"/> Yes <input type="checkbox"/> No
Pension/ Veterans Benefits/ Annuities	1099-R	<input type="checkbox"/> Yes <input type="checkbox"/> No
IRA Withdrawal	1099-R	<input type="checkbox"/> Yes <input type="checkbox"/> No
Capital Gains/Losses	1040 + Schedule D	<input type="checkbox"/> Yes <input type="checkbox"/> No
Interest & Dividends	1099-INT/ 1099-DIV	<input type="checkbox"/> Yes <input type="checkbox"/> No
Did you or members of your household file a 2024 Tax Return?	1040 with all attachments for all household members	<input type="checkbox"/> Yes <input type="checkbox"/> No
Other Income: Unemployment, gifts, cash, military pay, work study earnings, Alimony/ Spousal Maintenance		<input type="checkbox"/> Yes <input type="checkbox"/> No

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

*\* 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.*

#### STEP 4: Sign Your Application

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 understand all of the Utility Rate Relief Program Guidelines for this year's Utility Rate Discount or Utility Rate Rebate 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 the prior year.
- That I understand the rate discount/rebate is for charges paid this year 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 the prior year, 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.*

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



For alternate formats, interpreters, or reasonable modification requests please phone at least 48 hours in advance 425-452-5285 (voice) or email [UtilityAssistance@bellevuewa.gov](mailto:UtilityAssistance@bellevuewa.gov). For complaints regarding modifications, contact the City of Bellevue ADA, Title VI, and Equal Opportunity Officer at [ADATitleVI@bellevuewa.gov](mailto:ADATitleVI@bellevuewa.gov).

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