



**City of Seattle
Assistance Programs
Application**

The City of Seattle is dedicated to assisting customers in accessing the assistance programs the city has to offer. The resulting application will be used to enroll customers in the following programs: The Utility Discount Program (UDP), The Seattle Public Utility Emergency Assistance Program (SPU-EAP), Project Share, The Emergency Low-Income Assistance Program (ELIA), and The Vehicle License Fee Rebate Program (VLFR).

Section 1: Primary Account Holder Information

Please place the primary Seattle City Light/Seattle Public Utility account holder or the Vehicle registratee's information in the spaces below.

Primary Name:	Last:	First:	Middle:	
	Service Address: Street:		City:	Zip:
Mailing Address: <small>(if different than service address)</small>	Street:		City:	Zip:
	Primary Phone:	Message Phone:		
Email Address:				
Seattle City Light Account Number:	01-	Seattle Public Utilities Account Number:	02-	
Car License Plate Number:	Date Registration Paid:			

Section 2: Government issued Identification for all persons 18 years and older

Please provide a copy of one of the items below for each adult:

- State driver's license
- State identification card
- Passport or Permanent Resident Card

Section 3: Housing Information

Please fill out the information below.

By checking the box below, I certify that I am NOT in Section 8 housing OR in federally subsidized housing where a utility credit/allowance is applied.

I am eligible for the Utility Discount Program based on Housing.

Amount you pay for rent or mortgage: \$ _____ If rent is subsidized (check one):

Housing Status:

<input type="checkbox"/> SHA	<input type="checkbox"/> HUD	<input type="checkbox"/> Straight Tax Credit-Hope VI
<input type="checkbox"/> Section 8	<input type="checkbox"/> Scattered Site	<input type="checkbox"/> King County Housing Authority
<input type="checkbox"/> Senior BOND	<input type="checkbox"/> Shelter + Care	<input type="checkbox"/> Other: _____
<input type="checkbox"/> Minimum Rent-Public Housing		

Housing Type: Single Family Home 2, 3 or 4 Units Apt. Building Condo Mobile Home

How do you heat your home? Electric Gas Oil Wood Other: _____

Do you rent or own your home? Rent Own

Cable TV customers may qualify for a low-income discount. If you subscribe to Cable TV, which company?

Comcast Wave Other: _____

Please complete the front and back of this form



Section 4: Household Member Information

Household members include everyone living in the home, regardless of age or whether or not they pay rent. Examples include: roommates, relatives, tenants, children, friends, extended family members etc. Please fill out the information below for all household members.

Name (Last, First)	Date of Birth	Sex	Relationship to You	Monthly Income	Income Source (employers name, Social Security, TANF, etc.)
		M <input type="checkbox"/> F <input type="checkbox"/>	Myself	\$ _____	
		M <input type="checkbox"/> F <input type="checkbox"/>		\$ _____	
		M <input type="checkbox"/> F <input type="checkbox"/>		\$ _____	
		M <input type="checkbox"/> F <input type="checkbox"/>		\$ _____	
		M <input type="checkbox"/> F <input type="checkbox"/>		\$ _____	

Total number in household: ____ If more than 5, list other household members on a separate page.

Section 5: Income Information

If the primary Seattle City Light account holder is receiving SNAP benefits, income documentation is NOT required for the Utility Discount Program and/or the Vehicle Licensing Program **ONLY**.

If on SNAP Benefits please provide the following information:

Client ID Number: _____ OR Social Security Number: _____-_____-_____

If you are **NOT** receiving SNAP benefits **OR** you are applying for SPU/EAP, ELIA, or Project Share please check all sources of income below and provide verification documentation of GROSS income for ALL persons 18 years old and older living in your home, received in the month prior to the application date.

- Wages
- Pension/Annuity
- Social Security/SSI
- Unemployment
- IRA
- SNAP Benefits*
- Child Support
- VA
- Other : _____
- Adoption Support
- Rental income
- TANF
- GAU

Accepted forms of documentation are:

- Paycheck stubs/ Employer statement showing GROSS earnings
- DSHS award letters (TANF, GAU/GAX)
- Child support
- Social Security/SSI award letter/Survivor benefits
- Pensions/Annuity/IRA, Interest & Dividends
- Labor and Industry (L&I) statement
- Student financial aid and tuition statement
- Rental/investment property income (Provide a copy of lease/rental agreement)
- Self-employed (Most recent full tax return & 3 months profit & loss statements)
- No Income (Declaration of No Income Statement and/or Employment Security Department Statement)
- Other income: _____

Section 6: Optional Information

How do you identify Yourself: Multi Racial American Indian, Alaska Native Asian American/Asian Black, African American, African Hispanic, Latino Hawaiian Native, Pacific Islander White, Caucasian

What is your primary language:

Would you like a home energy visit by Seattle City Light to help conserve energy? Yes No

How did you hear about our services? Radio Television Newspaper Newsletter Utility Bill insert Website Family or friends Other: _____

Signature

Please be advised that we may share your information with other City of Seattle Departments to determine your eligibility for other approved services. If you do not want your information shared for aforementioned purposes please check this box.

This application and supporting documentation are used to review eligibility for additional City benefits and is only shared in accordance with applicable state and local laws. I am aware that my information is subject to review and verification and that other documentation may be required. I grant permission to request or release information to, or from, the Seattle Housing Authority, Sec 8 HUD, King County Housing Authority, other government agencies, or their delegated agents; this may result in receipt or denial of City benefits. Submitting this application does not guarantee eligibility or enrollment in any programs. I certify that the information I provided is accurate and complete and that I may be subject to criminal prosecution if I have knowingly given false or misleading information. I agree to provide updated proof of eligibility at any time, if requested. I understand that if I am found to be in violation of program rules, and receive assistance and have not truly disclosed all information, I will be terminated from the program(s) and the City may recover the actual cost(s) for the periods I was not eligible. I will notify the City of Seattle if my income or living situation changes.

Signature: _____ Date: _____