



## About PWDRAP

The Palmdale Water District (PWD) is pleased to offer a Rate Assistance Program (RAP) to our customers who are 62 years of age or older, veterans or low-income families meeting the eligibility requirements identified below. If your household qualifies for a discount on your energy bill under the electric or gas CARE program(s), you may also qualify for rate assistance of up to fifty percent (50%) of the monthly service charge on your water bill.

To apply for PWDRAP for your residence, please fill out this application and submit the required documentation to PWD. If approved, the rate assistance will become effective within sixty (60) days after the date of approval and is good for that calendar year only. If your application is not approved, you will receive a letter explaining the reason(s) for the decision. Applications will be accepted and processed in the order they are received, contingent upon the availability of funds.

If you need assistance in completing the application or would like more information about the program, call PWD at 661-947-4111, option 2, and speak to a Customer Care Representative, or visit our office at 2029 East Avenue Q, Palmdale, or go to our web site at [www.palmdalewater.org](http://www.palmdalewater.org)

### INCOME REQUIREMENTS

(Effective June 1, 2018 through May 31, 2019)

Source: California PUC Alternative Rates for Energy (CARE)

| Number of person(s) living in residence | Maximum total "gross household income" from all sources |
|---|---|
| <u>1-2</u>                              | <u>\$32,920</u>   |
| <u>3</u>                                | <u>\$41,560</u>   |
| <u>4</u>                                | <u>\$50,200</u>   |
| <u>5</u>                                | <u>\$58,840</u>   |
| <u>6</u>                                | <u>\$67,480</u>   |
| <u>7</u>                                | <u>\$76,120</u>   |
| <u>8</u>                                | <u>\$84,760</u>   |
| <u>Each Additional Person</u>           | <u>\$8,640</u>  |

### What Counts as Income?

Total gross household income is all revenues from all household members, from whatever sources derived, including but not limited to: wages; salaries and other employment-related compensation; interest; dividends; spousal and child support payments; public assistance payments; Social Security and pensions; rental income; income for selfemployment; and all employment-related non-cash income.

### What are the Qualifications?

- Must complete and submit application. Applications will be accepted on a first-come, first-served basis, contingent upon availability of funds. Low-income senior applications take priority; however, if funds are available, we will process veterans and low-income family applications in that order.
- Must participate in the Southern California Edison or Southern California Gas CARE program.
- Total gross household income cannot exceed the amounts shown on the "Income Requirements" table.
- Must be a PWD residential customer and receive water through a 1" (1 inch) or smaller meter.
- Must provide verification of age and household income as required by the District.
- May not be claimed as a dependent on another person's federal or state income tax return.
- If the applicant is a tenant, copy of the rental agreement must be attached to this application along with affidavit.
- May be required to provide proof of ownership by means requested by PWD.
- Must reapply annually and/or each time you move.
- Must notify PWD within thirty (30) days if you become ineligible.
- Assistance is nontransferable with property or applicant
- Applicant may not own more than one property.



## **RATE ASSISTANCE PROGRAM (PWDRAP)**

### **AFFIDAVIT OF LESSEE/TENANT RESPONSIBILITY FOR WATER BILLS**

I, \_\_\_\_\_, do hereby affirm and say:

1. That I am the Landlord/Owner of the property located at \_\_\_\_\_  
\_\_\_\_\_ Palmdale, CA. (Zip Code) \_\_\_\_\_
2. That this property is a single residence.
3. That the water account number is: \_\_\_\_\_.
4. That the following information, as provided, is true and correct to the best of my knowledge:  
Lessee/Tenant responsible for paying the water bill:  
Name: \_\_\_\_\_  
Telephone: \_\_\_\_\_
5. That on \_\_\_\_\_ a lease/agreement was executed for the above described premises with said lease, requiring said lessee/tenant to be responsible for all water bills incurred during the term of the lease. This lease includes \_\_\_\_\_ (number of residents).
6. That the expiration of said lease/agreement is \_\_\_\_\_.

I declare under penalty of perjury under the laws of the state of California that the foregoing is true and correct. Executed this \_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_.

By Landlord/Owner:

Name: \_\_\_\_\_

Social Security # (last 4): \_\_\_\_\_

Mailing address: \_\_\_\_\_

Telephones: Cell: \_\_\_\_\_ Home/Office: \_\_\_\_\_

Signature: \_\_\_\_\_