

LOW INCOME DISCOUNT APPLICATION

Income limits below are effective until May 31, 2022



For residents of Rancho Palos Verdes

Name				EDCO Acct. #	
	Last	First			
Addre	ss			Telephone (Day)	
	Number	Street	Unit.#		
				Email	
	City	State	Zip		

To qualify for the low-income rate, you must: 1) live in a house or unit in the City of Rancho Palos Verdes, 2) receive an EDCO bill in your name, and 3) meet the low-income criteria as defined by the California Public Utilities Commission. The current limits are as follows:

Total Household Income Limits to Qualify for Low-Income Exemption*

Total Person Household	<u>1-2</u>	<u>3</u>	<u>4</u>	<u>5</u>	<u>6</u>	Each Add 'l <u>Person Add</u>
Annual Gross Income	\$34,840	\$43,920	\$53,000	\$62,080	\$71,160	\$9,080

^{*} As defined by the California Public Utilities Commission General Order 153, Section 1.3.7

Proof of income of each household member must be attached to this application.

Examples of income include: salaries, wages, dividends, interest, pension payments, social security, public assistance, disability payments, alimony; child support, and any other recurring source of income including business conducted within the home.

Examples of income do not include: insurance proceeds, gains from sale of real estate or stock, or any other income resulting from non-recurring or one-time only transactions. Please note, non-cash benefits such as food stamps, Medi-Cal, etc. are not considered as income.

CONTINUE ON REVERSE SIDE

PLEASE ENTER ALL REQUESTED INFORMATION BELOW AND SIGN

For Office	Verification by:	Date:	
Use Only	Reviewed by:	Date:	
	Approved/Denied by:	Date:	

"We'll Take Care of It"

	NAME	RELATIONSHIP (i.e., self, spouse, child)	Annual Income		
HOUSEHOLD INCOME: (Please include all persons in the household, including applicant)					
Tota	al number of persons in household:	Gross annual inco	ome: <u>\$</u>		
CER	TIFICATION:				
I declare, under penalty of perjury, that:					
(1) I am an EDCO customer at the premise, which I occupy.					
(2)	(2) I will notify EDCO within 10 days of any change in the fact or circumstances (including change in residence or income) which made me to become ineligible for an exemption for the low- income rate.				
(3)	The combined annual income of all members of the household in which I reside is less that the amount established by the California Public Utilities Commission for low-income familie of applicable household size.				
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Approved exemptions are valid for one year only.

Return completed application and copies of all pertinent documents to: Director of Customer Service, EDCO, 950 E. 27th Street, Signal Hill, CA 90755