UTILITY CONNECTION PROGRAM APPLICATION

For instructions in completing this application see reverse

(1) Name of applicant	Birthdate	Social Security Number
(1) Name of Co-Applicant	Birthdate	Social Security Number
(2) Name of Dependent	Birthdate	Social Security Number
(2) Name of Dependent	Birthdate	Social Security Number
(2) Name of Dependent	Birthdate	Social Security Number
(2) Name of Dependent	Birthdate	Social Security Number

(3) Property Address

(4) Is this your residence?	(5) Number of dwelling units: Year Built:	(6) Number of units occupied:
(7) Assessor's parcel number:	(8) Telephone number:	(9) Annual gross family income: $

(10) Race / Ethnicity: *(Voluntary)*	[ ] White	[ ] African American	[ ] Native American
	[ ] Asian	[ ] Other	[ ] Hispanic

(11) Signature of Applicant Date	(12) Signature of Applicant Date

FOR OFFICE USE ONLY – DO NOT WRITE BELOW THIS LINE.

Date application was received:	Does applicant qualify? [ ] Yes [ ] No

[ ] Owner-occupied   [ ] Income eligible tenant & landlord   [ ] Income eligible tenant, over income landlord

Owner income: [ ] High [ ] Moderate [ ] Low   Family size: [ ]   FHH: [ ]   Elderly: [ ]

_____% of Median Income   Family Type:_____   Disabled: [ ]   Farmworker: [ ]

If application was denied, indicate reason:

Loan application approved for: $_____   Grant amount: $_____

RECOMMENDED FOR APPROVAL		DIVISION MANAGER APPROVAL	
BY:	Date:	BY:	Date:

INSTRUCTIONS

1. Print the name, birthdate and social security number of yourself and the co-applicant if there is one.
2. Print your property address, parcel number, and a phone number where you can be reached between 8:00 am and 5:00 pm during the week. Also, please indicate if this is your main residence, rental, or combination of both if there is more than one dwelling and the year the unit(s) were built.
3. If you have any dependents living with you such as children or parents, print the name, birthdate and social security number of each dependent. Attach additional page if necessary.
4. In order to qualify for assistance, your combined family income must not exceed specified limits. To determine your eligibility print your annual gross family income. **Be sure to enclose copies of your latest federal tax return or W-2 forms.** If property is a rental and landlord's income exceeds the maximum, please enter "NA" (not applicable). Tax returns or W-2's are not necessary if the landlord's income exceeds the maximum. Utility Connection Program Tenant Information forms must be completed for each tenant household, and tenant's income cannot exceed maximums to quality for assistance.
5. Race / Ethnicity – Please check one. *(Voluntary)*
6. Applicant shall sign and date application.
7. Co-Applicant, if there is one, shall sign and date the application also.

Mail this completed application to the Community Development Division, 2220 Tulare Street, 6th Floor, Fresno, CA 93721, or you may deliver this application for our office located at 2220 Tulare Street, 8th floor-Telephone (559) 600-4292.