

| Mobile Home Park/ | Other Sub-Metered Faci | lities Name | | | |
|--|---|--|--|--------------|--|
| lobile Home Park/ | Other Sub-Metered Faci | lities Address | City | / | Zip Code |
| G&E Account umber: | Electricity | | - Ga | s | |
| anager or Landlo | rd Name | | | _(Telepi |) hone |
| anager or Landlo | rd Mailing Address | | Cit | y | Zip Code |
| pplicant Status | O ADD NEW | O DROP | O RE-CERTIFY | | O MOVE TO DIFFERENT SPACE |
| B TENANT I | | ase print clearly) | | | |
| ame (As it appears | on your energy bill) | ()Telephone | | | |
| ome Address (Do | NOT use a P.O. Box) | Unit | # | City | Zip Code |
| | different from the above ad | | | City | Zip Code |
| HOUSEHO | OLD INCOME ELIG | IBILITY: check a | all sources of house | ehold ir | ncome. |
| HOUSEHC Pensions Social Securit SSP or SSDI Interests/Divid Savings, Stoc Retirement Action | y | Wages and/or Pr Self-Employment Rental or Royalty Unemployment B | ofits from t / Income Benefits kers | ehold ir | ncome. Scholarships, Grants or Other A for Living Expenses Insurance or Legal Settlements Spousal or Child Support Cash and/or Other Income |
| Pensions Social Securit SSP or SSDI Interests/Divid Savings, Stoc Retirement Action | y lends from: ks, Bonds, or ccounts SSISTANCE PROC | Wages and/or Pr Self-Employment Rental or Royalty Unemployment E Disability or Work Compensation Pa | ofits from t / Income Benefits kers ayments | | Scholarships, Grants or Other A for Living Expenses Insurance or Legal Settlements Spousal or Child Support |
| Pensions Social Securit SSP or SSDI Interests/Divid Savings, Stoc Retirement Act PUBLIC A household pathousehold pathouseh | y lends from: ks, Bonds, or SSISTANCE PROC articipate. i-Cal (under age 65) i-Cal (age 65 and over) Security Income (SSI) VP (Food Stamps) lome Energy Assistance | Wages and/or Pr Self-Employment Rental or Royalty Unemployment B Disability or Work Compensation Pa GRAM ELIGIBI Women, Ir (WIC) Healthy Fa CalWORK | ofits from t / Income Benefits kers ayments LITY: check all pro ofants and Children amilies A & B s (TANF) or | | Scholarships, Grants or Other A for Living Expenses Insurance or Legal Settlements Spousal or Child Support Cash and/or Other Income |
| Pensions Social Securit SSP or SSDI Interests/Divid Savings, Stoc Retirement Ad PUBLIC A household pa Medicaid/Med Supplemental CalFresh/SNA Low Income H Program (LIHI DECLARAT agree to provide nousehold income may be required to state or federal age | y lends from: ks, Bonds, or ccounts SSISTANCE PROC articipate. i-Cal (under age 65) i-Cal (age 65 and over) Security Income (SSI) P (Food Stamps) Iome Energy Assistance EAP) ION: (please read and sig proof of household incom no longer qualifies me to r o pay back the discount I encies, other utilities or the | Wages and/or Pr Self-Employment Rental or Royalty Disability or Work Compensation Pa GRAM ELIGIBI Women, Ir (WIC) Healthy Fa CalWORK Tribal TAN | ofits from t / Income Benefits kers ayments LITY: check all pro- fants and Children amilies A & B s (TANF) or IF gree to inform Pacif I understand that if nd that PG&E can sl e enrollment in their a | ograms | Scholarships, Grants or Other A for Living Expenses Insurance or Legal Settlements Spousal or Child Support Cash and/or Other Income s in which you or someone in you National School Lunch Program (NSLP) Bureau of Indian Affairs Genera Assistance Head Start Income Eligible |