

## Walnut Valley Affordable Rate Program

The Walnut Valley Water District will be offering an Affordable Rate Program to assist qualified customers in reducing water bill costs. The program provides for a possible reduction of up to 50 percent of the water bill base rate for eligible customers and is scheduled to begin in January 2008.

### What are the Qualifications?

- ◆ Must be a District residential customer and receive water through a 5/8-inch or 3/4-inch water meter.
- ◆ Must apply annually during the open enrollment period, which will be held from **November 1 - December 31**. Applications received after open-enrollment period will be accepted on a first come, first served basis.
- ◆ Must qualify for Southern California Edison or Southern California Gas Company's California Alternate Rates for Energy (CARE) program.
- ◆ Total gross household income cannot exceed the District's pre-established income requirements.
- ◆ May not be claimed as a dependent on another person's tax return.
- ◆ Must have and maintain a good payment history.

For more information and to obtain an application for the Affordable Rate Program, please contact our Customer Service Department at (909) 595-7554 or (626) 964-6551 or visit our web site at [www.wvwd.com](http://www.wvwd.com).

## Programa de Tarifas Accesibles Walnut Valley

El Distrito de Agua Walnut Valley estará ofreciendo un Programa de Tarifas Accesibles para apoyar a clientes calificados a reducir los costos de su factura de agua. El programa plantea una posible reducción de hasta el 50% de la base de facturación de agua para clientes elegibles y está programado para iniciar en Enero de 2008.

### ¿Cuáles son los Requisitos?

- ◆ Debe ser un cliente residencial del Distrito y recibir el agua mediante un medidor de agua de 5/8 de pulgada o 3/4 de pulgada.
- ◆ Debe efectuar anualmente su solicitud durante el periodo abierto de inscripciones, que se llevará a cabo de **Noviembre 01 - Diciembre 31**. Las solicitudes recibidas luego del periodo abierto de inscripciones serán aceptadas en base a orden de llegada.
- ◆ Debe calificar para el programa de Tarifas Alternas de Energía de California (CARE - California Alternate Rates for Energy) de Southern California Edison o Southern California Gas Company.
- ◆ El ingreso familiar bruto total no puede exceder los requerimientos pre-establecidos por el Distrito para ingreso.
- ◆ No podrá reclamarse como devolución de impuestos de dependiente o de otra persona.
- ◆ Debe tener y mantener un buen historial de pago.

Para mayor información y para obtener una solicitud para el Programa de Tarifas Accesibles, favor de contactar a nuestro Departamento de Servicio a Cliente al (909) 595-7554 o (626) 964-6551 o visite nuestro sitio web en [www.wvwd.com](http://www.wvwd.com).

核桃穀

平價計劃

核桃谷水區即將提供一套平價計劃幫助具備資格的客戶減少水費支出。

該計劃讓符合條件的客戶最多可以減少 50% 的水費支出。

該計劃即將於 2008 年 1 月份推出。

### 條件是什麼？

- ◆ 必須是區域內常駐客戶，並使用 5/8 英寸或 3/4 英寸的水錶接水；
- ◆ 必須在 **11 月 1 日至 12 月 31** 日這段公開註冊期間內申請。  
公開註冊期間之後接收到的申請，將基於先到先服務的原則。
- ◆ 必須符合南方加洲愛迪生或南方加洲煤氣公司的加洲備用能源價格計劃 (CARE) 之要求。
- ◆ 家庭全部收入不能超過區內之前制定的收入要求。
- ◆ 不可憑家屬身份進行返稅申報。
- ◆ 必須擁有並維持良好的付款記錄。

欲知詳情，或獲取該平價計劃申請表，請聯繫我們的客服部門：

(909) 595-7554 或 (626) 964-6551，或訪問我們的網站

<http://www.wvwd.com>



## APPLICATION FORM

### Walnut Valley Water District Walnut Valley Affordable Rate Program (WVARP)

The Walnut Valley Water District is pleased to offer an Affordable Rate Program to our customers who meet the eligibility requirements identified below. If your household qualifies for a discount on your energy bill under the electric or gas CARE programs, you may also qualify for a discount of up to 50% on the base rate of your water bill.

- To apply for WVARP at your residence, please fill out this application and submit the required documentation to the District during the open enrollment period from November 1, 2007 to December 31, 2007. If approved, the discount will become effective within sixty (60) days after the date of approval. If your application is not approved, you will receive a letter from the District explaining the reason for that disapproval. Applicants may apply any time throughout the year; however, applications received after the open enrollment period will be accepted on a first come, first served basis, contingent upon the availability of funds.

If you need help completing the application, or would like more information about the program, call 909-595-1268 or visit our office at 271 S. Brea Canyon Road, Walnut CA 91789, or visit our website at [www.wvwd.com](http://www.wvwd.com).

Income Requirements (effective June 1, 2007)	
Number of persons living in my home	Maximum total "gross household income" from all sources
1 or 2	\$29,300
3	\$34,400
4	\$41,500
5	\$48,600
6	\$55,700
For each additional person, add	\$ 7,100

#### 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 self-employment, and all employment-related non-cash income.

#### What are the Qualifications?

- Must apply annually during the District's annual open enrollment period. Applications received after the open enrollment period will be accepted on a first come, first served basis, contingent upon the availability of funds.
- Must qualify for Southern California Edison's or Southern California Gas Company's CARE program.
- Total gross household income cannot exceed the amounts shown on the "Income Requirements" chart above. These amounts will be updated annually, based upon the approved limits set by the CPUC for the CARE program.
- Must be a District residential customer and receive water through a 5/8-inch, 3/4-inch, or smaller water meter.
- Must provide verification of household income if requested.
- May not be claimed as a dependent on another person's federal or state income tax return.
- May be required to provide a copy of annual property tax statement, or other documentation requested by the District to evidence home ownership.
- Must reapply each time you move.
- Must notify the District within 30 days if you become ineligible.
- Must have and maintain a good payment history with the District – no terminations of service within the previous twelve (12) months and not more than three (3) late notices during that twelve (12) month period.
- The discount is not transferable with the property.

# APPLICATION FORM

## Walnut Valley Water District Walnut Valley Affordable Rate Program (WVARP)



I am a residential customer of the Walnut Valley Water District.

Account Number: \_\_\_\_\_  
 Name (as it appears on your bill): \_\_\_\_\_  
 Phone Number: \_\_\_\_\_  
 Street Address: \_\_\_\_\_  
 City, Zip: \_\_\_\_\_

<b>1</b>	Check the total number of person(s) in your household.	<input type="checkbox"/> One (1) <input type="checkbox"/> Two (2) <input type="checkbox"/> Three (3) <input type="checkbox"/> Four (4) <input type="checkbox"/> Five (5) <input type="checkbox"/> Six (6) <input type="checkbox"/> More than six (6+) number: _____
<b>2</b>	Write the total Gross Annual Income for all person(s) in your household. This is income before deductions from all sources.	\$ _____
<b>3</b>	Can anyone else claim you as a dependent on his/her Income Tax Return (other than your spouse)?	<input type="checkbox"/> Yes <input type="checkbox"/> No
<b>4</b>	Check the utility CARE program(s) for which you currently qualify. (check all that apply)	<input type="checkbox"/> Southern California Edison <input type="checkbox"/> Southern California Gas Company
<b>5</b>	Attach a copy of your most recent utility bill showing enrollment in their CARE program and submit with this application.	

**Declaration and Self Certification Statement:**

I declare that the information I have provided in this application is true and correct. I agree to provide proof of income if asked. I agree to inform the Walnut Valley Water District if I no longer qualify to receive a discount. I know that if I receive any discount without qualifying for it, I may be required to pay back the discount received.

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

Did you complete **1** through **5**? If you need help or would like more information about the program, call (909) 595-1268.

**MAIL YOUR COMPLETED APPLICATION TO:**  
 The Walnut Valley Water District  
 WVARP  
 271 S. Brea Canyon Road  
 Walnut, CA 91789

For District Use Only			
Date Received _____		Documentation Provided _____	
Approved (Y/N) _____	Effective Date _____	Approved By _____	Date _____
If Not Approved, Reason: _____			