

ProjectPLEDGE

A way to help those in need.

ProjectPLEDGE is administered by:



CITY OF PALO ALTO
UTILITIES

Inspired by a brighter tomorrow.

Application for Payment Assistance

ProjectPLEDGE offers a one-time financial hardship credit of up to \$750 applied to the outstanding balance of the Applicant's City of Palo Alto Utilities (CPAU) account. To apply you must be the CPAU customer-of-record unless that customer is deceased. The financial hardship credit received shall not exceed the outstanding balance of the Utilities account at the time of application.

City of Palo Alto Utilities Account Number: _____

Customer Name: _____
Last First MI

Service Address: _____
No. Street (Apt #) ZIP

Contact Telephone Number : (_____)_____

Please indicate the applicable circumstance(s) creating need for one-time utilities bill payment assistance:

- Applicant is unemployed and either single or with a live-in, non-working, spouse/domestic partner.
- Both Applicant and live-in, working spouse/domestic partner, are unemployed.
- Unexpected acute medical condition or unexpected unreimbursed medical expenses.
- Recent death of either the customer or live-in spouse/domestic partner.

Copies of documentation to validate the circumstance(s) indicated above, such as current unemployment check, death certificate, and/or doctor/hospital invoice showing patient's payment responsibility, is required and must be submitted with this application. Application and documentation should be mailed to: Utilities Customer Service Center, PO Box 10250, 250 Hamilton Avenue, 2nd Floor, Palo Alto, CA 94303. Voice: (650) 329-2161; Fax: (650) 617-3142. Receipt of this application will be acknowledged within five business days, but does not guarantee acceptance by City of Palo Alto Utilities.

By signing and submitting this application, the Applicant acknowledges and understands that receipt of payments from the City of Palo Alto ProjectPLEDGE program could potentially impact the level of income required to be declared by the Applicant for purposes of calculating other benefits the Applicant may qualify for from Federal, State or County agencies. The City of Palo Alto, through its ProjectPLEDGE program or otherwise is not responsible for the impact that its ProjectPLEDGE Program payments may have on the benefits received by the Applicant from Federal, State or County agencies.

Applicant's Signature _____ Date _____

Individuals with disabilities who require accommodations to access City facilities, services or programs, or who would like information on the City's compliance with the Americans with Disabilities Act (ADA) of 1990, may contact the City's ADA Coordinator at (650) 329-2550 (voice) or email ada@cityofpaloalto.org