



Application for Year-Round Utility Assistance

Name: _____

Service location address: _____

Date of birth: _____

Phone number: _____

Utility account number: _____

Number of people in the household: _____

To qualify, a person must be 65 years of age or disabled and 60 years of age and the total household income shall not exceed the amounts below.

Information you provide is material to your eligibility for receiving a benefit. Therefore, giving false or misleading answers in this application to obtain a discount on your utilities is a crime, punishable up to 6 months jail and/or \$2,500 fine. (ORS 162.085)

I hereby request utility assistance and have provided the City of Ashland with income verification documentation for all members of the household above the age of 16.

I certify that the above information is true to the best of my knowledge.

Signature of applicant: _____

Date: _____

	Yearly 30% Discount	Yearly 20% Discount
1 Person Family	\$ 14,580	\$ 18,225
2 Person Family	\$ 19,720	\$ 24,650
3 Person Family	\$ 24,860	\$ 31,075
4 Person Family	\$ 30,000	\$ 37,500

UTILITY DIVISION

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