



Utility Rate Assistance Program (URAP) Application for Residential Customers

1. CUSTOMER INFORMATION: *(please print clearly)*

City of Riverbank Account Number _____

Name _____ Telephone _____

Home Address (*Do NOT use a P.O. Box*) _____ Apartment # _____ City _____ Zip Code _____

Mailing Address (*If different from home address*) Apartment # _____ City _____ Zip Code _____

2. # OF ADULTS IN HOUSEHOLD: _____ **# OF CHILDREN IN HOUSEHOLD:** _____

Attach a copy of an accepted form of identification for each household member. (*See instructions on back of application*)

3. TOTAL ANNUAL GROSS HOUSEHOLD INCOME: (*All sources before taxes.*) \$ _____

4. HOUSEHOLD INCOME SOURCES:

You must report all income sources for each person who resides in this household. Check all income sources below that household members receive and **attach documentation for each income source.**

(*See instructions on the back of this application.*)

- | | | |
|--|--|---|
| <input type="checkbox"/> Gross wages and/or gross profits from self-employment | <input type="checkbox"/> Disability or Workers Compensation payments | <input type="checkbox"/> Interests/Dividends from: savings, stocks, bonds, or retirement accounts |
| <input type="checkbox"/> Unemployment benefits | <input type="checkbox"/> Pensions | <input type="checkbox"/> Scholarships, grants or other aid for living expenses |
| <input type="checkbox"/> Spousal or Child Support | <input type="checkbox"/> Social Security | <input type="checkbox"/> Insurance or legal settlements |
| <input type="checkbox"/> General Assistance, cash and/or other income | <input type="checkbox"/> SSP or SSDI | |
| | <input type="checkbox"/> Rental or royalty income | |

5. DECLARATION and APPLICATION CHECKLIST: (*please read and sign*)

I certify under penalty of perjury that the information on this application is truthful and correct. I have read and understand the requirements of the Utility Rate Assistance Program and agree to provide proof of income in order to participate. I agree to notify the City of Riverbank of any changes to my household or income that may affect my eligibility for assistance.

- I have included an accepted form of identification for each adult member of the household.
- I have included accepted proof of income to verify the gross annual household income.
- I have hidden or removed the first five digits of any Social Security number on the documentation submitted.

Applicant's Signature: _____ **Date:** _____

6. SEND completed application and all required documentation:

BY US MAIL to:
City of Riverbank
Finance Department
6707 Third Street
Riverbank, CA 95367

OR

In Person:
City of Riverbank
Finance Department
6707 Third Street
Riverbank, CA 95367

Normal processing time is 2-3 weeks.

If your application is approved, your URAP discount will take effect the next full billing cycle.

FOR OFFICE USE ONLY

DATE RECEIVED	ELIGIBLE?	PROCESSED BY:	DATE:
	YES NO		
COMMENTS			



Utility Rate Assistance Program (URAP) Application Instructions

PROGRAM SUMMARY

The City of Riverbank offers its Utility Rate Assistance Program (URAP) to assist low-income senior & low-income permanently-disabled residential residents with their water, sewer, & garbage/organics bill. For qualifying residents, Riverbank will discount \$22 for water, \$16 for sewer, & \$12.18 for garbage/organics on each applicable service's base bimonthly charge. Households must meet the program income guidelines shown in the table at right in order to qualify for the program. The program is based on a first-come, first serve basis and is dependent upon funding availability. **If your application is approved, your URAP discount will take effect the next full billing cycle.**

URAP 2025 Income Guidelines	
Number Persons in Household	Household Annual Income of <i>(all income sources before taxes)</i>
1	\$34,500 or less
2	\$39,400 or less
3	\$44,350 or less
4	\$49,250 or less
5	\$53,200 or less
For each additional person, add:	\$3,950

PROGRAM REQUIREMENTS

1. Applicant must be a senior* -or- permanently-disabled. *** Water & Sewer age limit is 65+, Garbage age limit is 60+**
2. It must be a residential account.
(The property cannot be a commercial property, duplex, triplex, four-plex, mobile home park or apartment building with a single meter).
3. Home must have an individual water meter.
4. The City of Riverbank bill must be in your name.
5. You must live at the address where the discount will be received.
6. Your household must meet the URAP income guidelines in the table above. These guidelines are based on the HCD Annual Income Limits currently in effect at the time your application is submitted.
7. You cannot be claimed as a dependent on another person's income tax return *(other than your spouse)*.
8. You must submit a copy of the California Driver's License or California ID for **each adult household member**: *(Social Security cards are **not** an accepted form of identification).*
9. You must **verify the household gross annual income** by submitting:
 - Last year's tax return (1040, 1040A, or 1040-EZ) including all Schedules C and E filed with the return
 - Social Security/pension benefits statement, SSI letter, which is obtained by calling 1-800-772-1213.
 - Two most recent paystubs (if applicable)
 - Copies of any other source of income indicated in Question #4 of the application**Note:** *For your protection, please **hide or remove the first five digits of any Social Security number** on anything you submit.*
10. You must notify the City of Riverbank if your household no longer qualifies for the URAP.
11. You are required to recertify your eligibility every two (2) years.

FOR MORE INFORMATION

Call (209) 863-7109

Email: utilities@riverbank.org

Website: www.riverbank.org