



## Application for California Alternate Rates for Energy (CARE) Program

### Get a discount on your gas bill!

CARE provides a 20% discount on your gas bill every month for income-qualified customers. This discount is available for your primary residence only. The Southwest Gas bill must be in your name. You may not be claimed as a dependent on another person's income tax return other than your spouse's. You will need to renew your application every two years or when requested by Southwest Gas.

### There are 2 ways to qualify!

#### 1. Public Assistance Program Eligibility

If you or someone in your household participate(s) in any of the following programs, please select the program(s) below:

- ☐ Medicaid/Medi-Cal (age 65 and over)
- ☐ Medicaid/Med-Cal (under age 65)
- ☐ Medi-Cal for Families A&B (Healthy Families A&B)
- ☐ Supplemental Security Income (SSI)
- ☐ CalFresh/SNAP (Food Stamps)
- ☐ Head Start Income Eligible (Tribal Only)
- ☐ Bureau of Indian Affairs General Assistance
- ☐ Women, Infants, and Children (WIC)
- ☐ National School Lunch Program (NSLP)
- ☐ Low Income Home Energy Assistance Program (LIHEAP)
- ☐ CalWORKS (TANF) or Tribal TANF

#### 2. Income Eligibility

You can also qualify for CARE if you meet the income guideline qualifications based on your household income and household size. You do not need to complete this section if you qualify through an eligible Public Assistance Program and have completed the section above.

**CARE Program Income Requirements**  
(Effective June 1, 2022 through May 31, 2023)

Number of persons living in my home	Total combined gross annual household income (from ALL sources)						
	1-2	3	4	5	6	7	8
	\$36,620	\$46,060	\$55,500	\$64,940	\$74,380	\$83,820	\$93,260

**For each additional person, add \$9,440.**

**Entire application must be completed and signed. Please print clearly.**

The definition of "gross (before taxes) household income" is all money and noncash benefits available for living expenses from all sources, both taxable and nontaxable, before deductions, including expenses, for all people who live in your home.

**This includes, but is not limited to, the following (please check (✓) ALL that apply):**

- ☐ Wages or profit from self-employment
- ☐ Disability or Workers' Compensation payments
- ☐ Scholarships/grants/aid used for living expenses
- ☐ Interest/dividends from: savings, stocks, bonds, or retirement accounts
- ☐ Pensions
- ☐ TANF
- ☐ Unemployment benefits
- ☐ Insurance or legal settlements
- ☐ Cash and/or other income
- ☐ Spousal or child support
- ☐ Rental/Royalty Income

**Total combined gross annual  
household income:**

**Number of persons living in my  
household:**

\$	.00 per year		+		=
		Adults		Children	Total

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Your name (as shown on Southwest Gas bill)

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Your home gas service address (include apartment or space number)

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City State ZIP Code

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Southwest Gas account number ( ) Contact Phone Number

I certify that the information I have provided in this application is true and correct. I understand that Southwest Gas reserves the right to verify my household income and I agree to provide proof of income, if asked. I agree to inform Southwest Gas within 30 days if I no longer qualify to receive the CARE discount. I understand that if I receive the CARE discount without meeting the qualifications I may be required to pay back the CARE discount I received. I understand that Southwest Gas can share my information with other utilities or their agents to enroll me in their assistance programs.

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Signature

Date

**Mail To:  
ATTN: CARE  
SOUTHWEST GAS CORPORATION  
PO BOX 1498  
VICTORVILLE CA 92393-1498**

**This application may also be completed online at: [swgas.com/caassist](https://swgas.com/caassist)**

For more information, visit [swgas.com](http://swgas.com) or call:

Customer Solutions.....(877) 860-6020  
Hearing Impaired.....711

## OTHER ASSISTANCE PROGRAMS AND SERVICES

Whether you own or rent your residence, the **Energy Savings Assistance Program** is a great way to increase the energy efficiency of your home. It provides income-qualified customers with money-saving improvements at no cost.

**EPP Billing** - Your monthly bill will be averaged out to allow you to budget your energy costs and eliminate big payment swings.

**Medical Baseline** - If you depend on life-support or other equipment due to medical needs, you may be eligible for additional energy at the lowest price through the Medical Baseline Program.

**Low Income Home Energy Assistance Program (LIHEAP)** - If you spend a high percentage of your income on energy bills, you may be eligible to receive financial assistance and weatherproofing services through this program administered by the California Department of Community Services and Development 866.675.6623.

**Universal Lifeline Telephone Service (ULTS)** - Get discounted telephone access when you meet similar income guidelines as the CARE Program. To learn more, contact your local phone service provider.

## California Consumer Privacy Act ("CCPA") - NOTICE AT COLLECTION

Under the CCPA, Southwest Gas is required to notify you of the personal information we collect about you and why we collect it. This notice applies solely to customers, users, and others who reside in the state of California. A list of the categories of personal information we may collect about you and how we use such information can be found in our CCPA Privacy Policy on our website at <https://www.swgas.com/ccpa>.