

PUBLIC UTILITIES COMMISSION
505 Van Ness Avenue
San Francisco CA 94102-3298



Southwest Gas Corporation
GAS (Corp ID 905)
Status of Advice Letter 1333G
As of May 30, 2025

Subject: Annual adjustment of income guidelines for California Alternative Rates for Energy and Energy Savings Assistance Programs eligibility and Compliance with Assembly Bill (AB) 2672

Division Assigned: Energy

Date Filed: 05-01-2025

Date to Calendar: 05-09-2025

Authorizing Documents: D1208044

Disposition:	Accepted
Effective Date:	06-01-2025

Resolution Required: No

Resolution Number: None

Commission Meeting Date: None

CPUC Contact Information:

edtariffunit@cpuc.ca.gov

AL Certificate Contact Information:

Valerie J. Ontiveroz

702 876-7323

valerie.ontiveroz@swgas.com

PUBLIC UTILITIES COMMISSION
505 Van Ness Avenue
San Francisco CA 94102-3298



To: Energy Company Filing Advice Letter

From: Energy Division PAL Coordinator

Subject: Your Advice Letter Filing

The Energy Division of the California Public Utilities Commission has processed your recent Advice Letter (AL) filing and is returning an AL status certificate for your records.

The AL status certificate indicates:

- Advice Letter Number
- Name of Filer
- CPUC Corporate ID number of Filer
- Subject of Filing
- Date Filed
- Disposition of Filing (Accepted, Rejected, Withdrawn, etc.)
- Effective Date of Filing
- Other Miscellaneous Information (e.g., Resolution, if applicable, etc.)

The Energy Division has made no changes to your copy of the Advice Letter Filing; please review your Advice Letter Filing with the information contained in the AL status certificate, and update your Advice Letter and tariff records accordingly.

All inquiries to the California Public Utilities Commission on the status of your Advice Letter Filing will be answered by Energy Division staff based on the information contained in the Energy Division's PAL database from which the AL status certificate is generated. If you have any questions on this matter please contact the:

Energy Division's Tariff Unit by e-mail to
edtariffunit@cpuc.ca.gov



SOUTHWEST GAS CORPORATION

May 1, 2025

Advice Letter No. 1333-G

(U 905 G)

Public Utilities Commission of the State of California

Subject: Annual adjustment of income guidelines for California Alternative Rates for Energy and Energy Savings Assistance Programs eligibility and Compliance with Assembly Bill (AB) 2672.

Southwest Gas Corporation (Southwest Gas) hereby submits for approval by the California Public Utilities Commission (Commission) revisions to its California Gas Tariff. The tariff sheets being modified as a result of this submission are listed on Attachment A.

Purpose

The purpose of this submission is to comply with the Energy Division's March 26, 2025, "Notice to update the income guidelines to Investor Owned and Small Multi-Jurisdictional Utilities providing services under the California Alternative Rates for Energy (CARE), Family Electric Rate Assistance (FERA) and Energy Savings Assistance (ESA) Programs to update the income guidelines" (Energy Division Notice). The Notice directs utilities to update the income guidelines for the CARE and ESA Programs in accordance with Public Utility Code §739.1(a). The revised income guidelines are effective from June 1, 2025 through May 31, 2026, for all new CARE and ESA Program enrollments, as well as CARE post enrollment verifications and recertifications. Additionally, this Advice Letter also complies with AB 2672 concerning Southwest Gas' CARE Expanded Program and Homekey housing facilities.

Modifications to Tariff Rate Schedules and CARE Program Forms

Pursuant to the Energy Division Notice, Southwest Gas updated the income guidelines on 1) Schedule Nos. GS-12/GN-12/SLT-12 – CARE Residential Gas Service; 2) Schedule Nos. GS-35/GN-35/SLT-35 – Agriculture Employee Housing and Nonprofit Group Living Facility Gas Service; and 3) CARE Program Forms 902.6 (standard CARE Program application) and 902.16 (CARE Program application applicable to Submetered Master-Meter Tenants). Southwest Gas also modifies CARE Form 902.2 – *Application for Qualified Nonprofit Group Living Facilities for [CARE] Program*, to include Homekey facilities in Eligibility Criteria and Certification Requirements. Redlined edits for this form are included in Attachment B.



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May 1, 2025

This Advice Letter will not increase any rate or charge, cause the withdrawal of service, or conflict with any other schedule or rule.

Effective Date

Southwest Gas believes this Advice Letter is subject to Energy Division disposition and should be classified as Tier 2 (effective after Energy Division approval) pursuant to General Order (GO) 96-B. Southwest Gas respectfully requests that the tariff sheets submitted herein be approved May 31, 2025, which is thirty (30) days after submission. The revised income guidelines are effective June 1, 2025 pursuant to the Energy Division Notice.

Protest

Anyone may protest this Advice Letter to the Commission's Energy Division. The protest must state the grounds upon which it is based with specificity and must be sent no later than 20 days after the date of this Advice Letter submission. Protests are to be submitted electronically to the Commission's Energy Division at:

Email: edtariffunit@cpuc.ca.gov

In addition, protests and all other correspondence regarding this Advice Letter should be sent electronically to:

Ms. Valerie J. Ontiveroz
Senior Manager/Regulatory Affairs and Compliance
Email: valerie.ontiveroz@swgas.com
regserve@swgas.com

Notice

Pursuant to Energy Industry Rule 3.1(2), Southwest Gas is exempt from the notice requirements set forth in General Rule 4.2 in GO 96-B since this Advice Letter is submitted in accordance with the Energy Division Notice dated March 24, 2025.

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Service

In accordance with GO 96-B, General Rule 7.2, Southwest Gas is serving copies of this Advice Letter and related tariff sheets to the utilities and interested parties shown on the attached list.

Respectfully submitted,
SOUTHWEST GAS CORPORATION

By: Valerie J. Ontiveroz
Valerie J. Ontiveroz

Attachments

Distribution List

Advice Letter No. 1333-G

In conformance with GO 96-B, General Rule 4.3

The following individuals or entities have been served by electronic mail:

Linda Serizawa, Director
Public Advocates Office
California Public Utilities Commission
Linda.Serizawa@cpuc.ca.gov

Pacific Gas & Electric Company
PGETariffs@pge.com

Southern California Gas Company
GLenart@socalgas.com
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ATTACHMENT A
Advice Letter No. 1333-G

Cal. P.U.C. Sheet No.	Title of Sheet	Canceling Cal. P.U.C. Sheet No.
22nd Revised Sheet No. 5	Table of Contents (<i>Continued</i>)	21st Revised Sheet No. 5
41st Revised Sheet No. 6	Table of Contents (<i>Continued</i>)	40th Revised Sheet No. 6
17th Revised Sheet No. 85	Schedule Nos. GS-12/GN-12/SLT-12 - CARE Residential Gas Service (<i>Continued</i>)	16th Revised Sheet No. 85
16th Revised Sheet No. 94	Schedule Nos. GS-35/GN-35/SLT-35 - Agricultural Employee Housing and Nonprofit Group Living Facility Gas Service	15th Revised Sheet No. 94
4th Revised Sheet No. 294	Application for Qualified Nonprofit Group Living Facilities for California Alternate Rates for Energy (CARE) Program (FORM 902.2 – 05/2025)	3rd Revised Sheet No. 294
20th Revised Sheet No. 296	Application for California Alternate Rates for Energy (CARE) Program (New and Recertification) (FORM 902.6 – 05/2025)	19th Revised Sheet No. 296
20th Revised Sheet No. 298	CARE Program Application for Tenants of Submetered Residential Facilities (New and Recertification) (FORM 902.16 – 05/2025)	19th Revised Sheet No. 298

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CARE RESIDENTIAL GAS SERVICE

(Continued)

SPECIAL CONDITIONS

1. An approved CARE application and declaration of eligibility form is required from each customer for service under this schedule.
2. To qualify for service under this schedule, a customer can meet either of the following two eligibility requirements:

- a. Categorical Eligibility - One or more people in a household participate in any of the following public assistance programs: Medicaid/Medi-Cal (age 65 and over); Medicaid/Medi-Cal (age 65 and under); 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); or CalWORKS (TANF) or Tribal TANF.
- b. Income Eligibility - The total gross annual income, both taxable and nontaxable, from all sources for all persons in the applicant's household may not exceed the income limits shown below.

These income limits are effective from June 1, 2025 through May 31, 2026.

<u>Number of Persons in Household</u>	<u>Total Gross Annual Income</u>
1 - 2	\$42,300
3	\$53,300
4	\$64,300
5	\$75,300
6	\$86,300
7	\$97,300
8	\$108,300

For households with more than eight persons, add \$11,000 annually for each additional person residing in the household. The above income levels are subject to change annually by the Commission.

3. A person who is claimed as a dependent on another person's income tax return is not eligible for service under this schedule.

Schedule Nos. GS-35/GN-35/SLT-35

**AGRICULTURAL EMPLOYEE HOUSING AND
NONPROFIT GROUP LIVING FACILITY GAS SERVICE**

APPLICABILITY

Applicable to gas service for nonprofit group living facilities, as defined in Rule No. 1 of this California Gas Tariff, where a minimum of 70 percent of the gas consumed under this schedule is for residential purposes, and to qualified migrant housing centers; privately-owned employee housing; or agricultural employee housing operated by nonprofit organizations.

TERRITORY

Throughout the Company's certificated California service areas, except as may hereafter be provided.

RATES

The commodity charges and basic service charge are set forth in the currently-effective Statement of Rates of this California Gas Tariff and are incorporated herein by reference.

The number of therms shall be determined in accordance with the provisions of Rule No. 2C of this California Gas Tariff.

Minimum Charge:

The minimum charge per meter per month is the basic service charge.

SPECIAL CONDITIONS

A. NONPROFIT GROUP LIVING FACILITIES

1. To be eligible for service under this schedule, the total gross annual income, both taxable and nontaxable, from all sources for each resident residing in the nonprofit group living facility may not exceed the Commission's CARE program eligibility income level shown below for a single-person household, and each resident may not be claimed as a dependent on another person's income tax return.

<u>Household Size</u>	<u>Total Gross Annual Income</u>
1 – 2	\$42,300

The above income limit is effective from June 1, 2025 through May 31, 2026.

SOUTHWEST GAS CORPORATION
P.O. Box 98510
Las Vegas, Nevada 89193-8510
California Gas Tariff

Canceling _____ 4th Revised _____ Cal. P.U.C. Sheet No. 294
3rd Revised _____ Cal. P.U.C. Sheet No. 294

APPLICATION FOR QUALIFIED NONPROFIT GROUP
LIVING FACILITIES FOR CALIFORNIA ALTERNATE
RATES FOR ENERGY (CARE) PROGRAM (FORM 902.2 - 05/2025)

(See Attached Form)

Advice Letter No. 1333 Issued by _____ Date Filed May 1, 2025
Decision No. _____ Amy L. Timperley Effective _____ T
Chief Regulatory Officer Resolution No. _____ T



APPLICATION FOR QUALIFIED NONPROFIT GROUP LIVING FACILITIES FOR CALIFORNIA ALTERNATE RATES FOR ENERGY (CARE) PROGRAM

Discount

If qualified, a nonprofit group living facility will be eligible for a discount on all rate elements of that portion of its bill for energy serving the residential end-users.

Instructions

1. **Read** the information provided in this application.
 2. **Determine** if the facility meets the eligibility criteria for a nonprofit group living facility.
The facility must meet ALL criteria in order to qualify for the 20% discount.
 3. **Complete** the entire application (please print or type).
Nonprofit corporations must complete this application for all qualified satellites.
 4. **Attach** all required documents.
The application is not considered complete without documents.
 5. **Mail to:**
ATTN CARE
Southwest Gas Corporation
PO Box 1498
Victorville, CA 92393-1498
-

Eligibility Criteria

Examples of potentially eligible nonprofit group living facilities consist of licensed or permitted homeless shelters, transitional housing, short- or long-term care facilities (hospices, nursing homes, seniors' or children's homes), group homes for mentally or physically disabled and/or disadvantaged persons or satellite facilities of a properly licensed "mothership" facility; and other nonprofit group living facilities that may not have a license or permit (homeless shelters, women's shelters or hospices).

The facility **MUST** meet all of the following criteria:

- The discount shall be used for the direct benefit of the income eligible residents in the facility (e.g., improved quality of care or improved food service).
- A licensed or appropriately permitted nonprofit establishment where 100% of the residents meet the Commission's existing CARE income eligibility standard for a single-person household.
- A minimum of 70% of the energy consumed on site must be used for residential purposes.
- Homeless shelters, women's shelters, or hospices that would otherwise qualify but are not licensed or do not possess a Conditional Use Permit, may qualify. Such facilities may qualify provided adequate proof satisfactory to Southwest Gas is submitted and approved showing that

its residents meet the CARE income eligibility requirements, and that its services are being provided to benefit income eligible residents.

- A nonprofit owner and/or operator of a government-subsidized residential facility may be eligible if services besides lodging are provided to residents, and all other eligibility criteria are met.

For Homeless Shelters & Homekey Housing

- Homeless shelters must provide verification to Southwest Gas that they provide at least 6 beds for a minimum of 180 days out of the year for persons who have no alternative residence.
- Homeless shelters and Homekey facilities operated in a government-owned or subsidized building by a nonprofit organization may qualify for CARE so long as the nonprofit entity is the Southwest Gas customer of record for the site, and a minimum of 70% of the energy consumed on site is used for residential purposes (eating or sleeping).

Individual Eligibility Guidelines

- Each resident whose total gross annual income (taxable and non-taxable) from all sources is no more than 200% of the federal poverty level income guidelines and is not claimed as a dependent on another person's income tax return.

Exclusions

- Publicly-owned and government-subsidized housing facilities are not qualifying group living facilities. A group living facility that would otherwise qualify for CARE would not be ineligible because compensation for room, board, or services is provided by a governmental agency on behalf of the resident under a disability, Supplemental Security Income (SSI), Social Security Administration (SSA), or other governmental assistance program.
- Facilities such as student housing and/or dorms, military barracks, fraternities and/or sororities are excluded.
- The discount cannot be used to offset any direct governmental subsidies.
- Any for-profit entity is ineligible.

Certification Requirements

- Facilities must recertify every two years to receive CARE.
- Nonprofit status of the corporation and/or facility, including homeless shelters, must be evidenced by including a letter of tax-exempt nonprofit status under Internal Revenue Service Code Section 501(c)(3). Applicants for Homekey facilities are also required to provide a California state tax exemption form in addition to the IRS 501(c)(3) form.
- Services provided to residents of licensed or permitted group living facilities must be evidenced by including a current certification from the appropriate state licensing

agency or copy of Conditional Use Permit along with the application. Homeless shelters are not required to certify provision of services, but must meet the minimum operational requirements and provide, if permitted, a copy of a current Conditional Use Permit. Homekey facilities must provide a license issued by the appropriate agency that permits Homekey facilities to provide housing.

- Other non-licensed or non-permitted facilities must provide adequate proof satisfactory to Southwest Gas that its residents meet the income eligibility requirements, and that its services are being provided to benefit income eligible residents.
- Except for homeless shelters, the facility must provide proof of every resident's eligibility by completing a CARE application form (properly authorized by the resident). Individual documentation of income may be waived for those seeking lodging at homeless shelters.
- At the time of each certification, all participating facilities, including homeless shelters, are required to demonstrate to Southwest Gas that they have passed on the discount for the benefit of the income eligible residents. Reasonable certification shall include a statement of the dollar amount of the annual discount and an explanation of how those funds were spent for the benefit of the income eligible residents.

About the Discount

PU Code Section 739 extends CARE program benefits to nonprofit group living facilities that provide a service, such as meals or rehabilitation, in addition to lodging, for the direct benefit of income eligible residents. This discount is required by state law and is under the direction of the California Public Utilities Commission (CPUC).

Note: Facilities receiving the discount are subject to verification by Southwest Gas. Facilities receiving the discount inappropriately will be re-billed at the correct rate.

For additional information, please call:

Customer Assistance(877) 860-6020

Hearing Impaired 711

Or visit our website at: www.swgas.com/caassist

Application

Name on Southwest Gas Bill		Account Number		
Service Address		City	State	ZIP Code
Mailing Address		City	State	ZIP Code
Name of Corporation/Facility		IRS Nonprofit Tax ID # Attach copy of IRS Code Section 501(c)(3) Letter of Tax-Exempt Nonprofit Status		
Name on State Business License (Attach copy of License) or Conditional Use Permit		Type of License		Expiration Date
Name on any other current license or Conditional Use Permit for the Corporation/Facility		Total Number of Residents of Facility		Total Number of Residents who meet Eligibility Guidelines as stated above
Is the facility operating as a satellite of a licensed, "mothership" facility? <input type="checkbox"/> Yes <input type="checkbox"/> No				
If Yes, provide name of "mothership" facility and attach a copy of current "mothership" license.				Name on Southwest Gas Bill
Address of satellite facility(ies)				
State primary purpose of the facility and the services offered:				
Is at least 70% of the facility's energy used for residential purposes? <input type="checkbox"/> Yes <input type="checkbox"/> No				
Does the facility receive any funding from a governmental agency? <input type="checkbox"/> Yes <input type="checkbox"/> No				
If Yes, please explain type of funding and which governmental agency provides the funding				
As an authorized representative of the facility, I certify, under penalty and perjury, under the laws of the State of California, that the above information is true and accurate. I am authorized by this facility to sign this application and have verified the eligibility of the residents. I further certify that the discount shall be used for the direct benefit, such as improved quality of care or improved food service, of the residents of the facility. I am responsible for the annual renewal of this facility's license from the appropriate licensing agency. I also understand that Southwest Gas may request additional proof of eligibility and verification.				
Authorized Representative Name (please print)		Authorized Representative Signature		Date Signed
				Telephone Number ()

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 at <https://www.swgas.com/ccpa>.

SOUTHWEST GAS CORPORATION
P.O. Box 98510
Las Vegas, Nevada 89193-8510
California Gas Tariff

Canceling 20th Revised Cal. P.U.C. Sheet No. 296
19th Revised Cal. P.U.C. Sheet No. 296

APPLICATION FOR CALIFORNIA ALTERNATE RATES FOR ENERGY
(CARE) PROGRAM (NEW AND RECERTIFICATION) (FORM 902.6 - 05/2025)

(See Attached Form)

Advice Letter No. 1333
Decision No. _____

Issued by
Amy L. Timperley
Chief Regulatory Officer

Date Filed May 1, 2025
Effective _____
Resolution No. _____

Application for California Alternate Rates for Energy (CARE) Program

Get a discount on your gas bill!
CARE provides a discount on your gas bill every month for eligible and income-qualified customers at your primary residence. 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 - Please select the program(s) below if you or someone in your household participate(s) in any of the following:

☐ Medicaid/Medi-Cal (age 65 and older)

☐ CalFresh/SNAP (Food Stamps)

☐ National School Lunch Program

☐ Medicaid/Medi-Cal (under 65)

☐ Head Start Income Eligible (Tribal Only)

☐ Low Income Home Energy Assistance Program (LIHEAP)

☐ Medi-Cal for families A&B (Healthy Families A&B)

☐ Bureau of Indian Affairs General Assistance

☐ CalWORKS (TANF) or Tribal TANF

☐ Supplemental Security Income (SSI)

☐ Women, Infants, and Children (WIC)

2

Income Eligibility - You can qualify for CARE if you meet the income guideline qualifications below. You do not need to complete this section if you qualify through an eligible Public Assistance Program.

CARE Program Income Requirements (effective June 1, 2025 - May 31, 2026)

Number of persons living in my home	1-2	3	4	5	6	7	8
	\$42,300	\$53,300	\$64,300	\$75,300	\$86,300	\$97,300	\$108,300
	For each additional person, add \$11,000						

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 all expenses, for all people who live in your home.

Please provide your total combined gross annual household income, provide the number of persons living in your household, and select all income sources that apply.

Total combined gross annual household income:

\$.00 per year

Number of persons living in my household:

+

=

Adults + Children = Total

☐ Wages or profit from self-employment

☐ Social Security/SSDI/SSI/SSP

☐ Cash and/or other income

☐ Scholarships/grants/aid used for living expenses

☐ TANF

☐ Pensions

☐ Disability or Workers Compensation payments

☐ Unemployment Benefits

☐ Rental/Royalty Income

☐ Interest/Dividends from savings, stocks, bonds, or retirement accounts

☐ Insurance or Legal Settlements

☐ Spousal or Child Support

Entire Application must be completed and signed. Please print clearly.

Your name (as it appears on your Southwest Gas bill)

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

CityStateZip Code

Southwest Gas account number

Contact phone number

If you have been provided with a code, please enter it here:

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 eligibility and I agree to provide proof of eligibility, 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 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.

Signature

Date

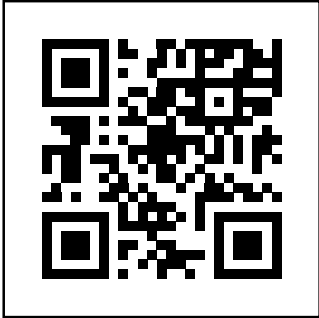


CARE

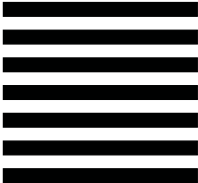
Application for California Alternate Rates for Energy

- Get a **DISCOUNT** on your bill and **SAVE MONEY!**
- Check inside to see if you qualify. Enrolling is easy.

Use the QR code or visit Swgas.com/CARE to complete this application online and access Spanish, large type and master meter tenant forms.



Utilice el código QR o visite Swgas.com/CARE para completar esta solicitud en línea y acceder a los formularios para inquilinos en español, con letra grande y con medidor maestro.

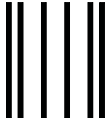


NO POSTAGE
NECESSARY
IF MAILED
IN THE
UNITED STATES

BUSINESS REPLY MAIL
FIRST-CLASS MAIL PERMIT NO. 478 LAS VEGAS NV

POSTAGE WILL BE PAID BY ADDRESSEE

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



For more information call:

Customer Solutions (877) 860-6020
Hearing Impaired 711

OTHER ASSISTANCE PROGRAMS AND SERVICES

- Whether you own or rent, the energy savings assistance program provides income-qualified customers with money-saving energy-efficient home improvements at no cost.
- **EPP Billing** - Average out your monthly bill 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. Contact the California Department of Community Services and Development at (866) 675-6623.
- **Universal Lifeline Telephone Service (ULTS)** - Get discounted phone access when you meet similar income guidelines as the CARE program. To learn more, contact your local phone service provider.
- Visit swgas.com/caassist to learn more about these helpful programs and services.

CALIFORNIA CUSTOMERS

California Consumer Privacy Act ("CCPA") - NOTICE 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 www.swgas.com/ccpa.

SOUTHWEST GAS CORPORATION
P.O. Box 98510
Las Vegas, Nevada 89193-8510
California Gas Tariff

Canceling 20th Revised Cal. P.U.C. Sheet No. 298
19th Revised Cal. P.U.C. Sheet No. 298

CARE PROGRAM APPLICATION FOR TENANTS OF SUBMETERED
RESIDENTIAL FACILITIES (NEW AND RECERTIFICATION) (FORM 902.16 - 05/2025)

(See Attached Form)

Advice Letter No. 1333
Decision No. _____

Issued by
Amy L. Timperley
Chief Regulatory Officer

Date Filed May 1, 2025
Effective _____
Resolution No. _____

There are 2 ways to qualify:

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

		Adults	+	Children	=	Total
<input type="checkbox"/>	Wages or profit from self-employment	<input type="checkbox"/>		<input type="checkbox"/>		Cash and/or other income
<input type="checkbox"/>	Scholarships/grants/aid used for living expenses	<input type="checkbox"/>		<input type="checkbox"/>		Pensions
<input type="checkbox"/>	Disability or Workers Compensation payments	<input type="checkbox"/>		<input type="checkbox"/>		Rental/Royalty Income
<input type="checkbox"/>	Interest/Dividends from savings, stocks, bonds, or retirement accounts	<input type="checkbox"/>		<input type="checkbox"/>		Spousal or Child Support

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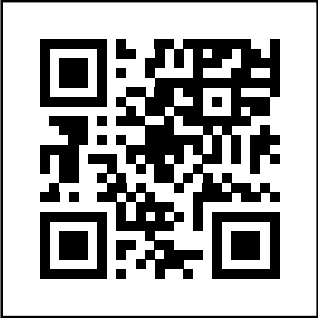
SOUTHWEST GAS

CARE Application for California Alternate Rates for Energy

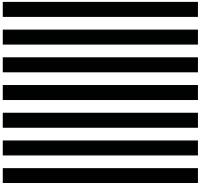
Program Application for Master-Meter Tenants

- Get a **DISCOUNT** on your bill and **SAVE MONEY!**
- Check inside to see if you qualify. Enrolling is easy.

Use the QR code or visit [Swgas.com/CARE](https://swgas.com/CARE) to complete this application online and access Spanish, large type and master meter tenant forms.



Utilice el código QR o visite [Swgas.com/CARE](https://swgas.com/CARE) para completar esta solicitud en línea y acceder a los formularios para inquilinos en español, con letra grande y con medidor maestro.



NO POSTAGE
NECESSARY
IF MAILED
IN THE
UNITED STATES

BUSINESS REPLY MAIL
FIRST-CLASS MAIL PERMIT NO. 478 LAS VEGAS NV



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

POSTAGE WILL BE PAID BY ADDRESSEE



Tenants: To qualify for a rate discount through your facility landlord or manager, submetered tenants must meet these qualifications:

- Submetered tenants do not receive a bill from Southwest Gas
- Submetered tenants receive gas service and a gas bill from their facility landlord or manager.

For more information call:

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

OTHER ASSISTANCE PROGRAMS AND SERVICES YOU MAY QUALIFY FOR:

- Whether you own or rent, the energy savings assistance program provides income-qualified customers with money-saving energy-efficient home improvements at no cost.
- **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 the California Department of Community Services and Development at (866) 675-6623.
- **Universal Lifeline Telephone Service (ULTS)** - Get discounted phone access when you meet similar income guidelines as the CARE program. To learn more, contact your local phone service provider.
- Visit swgas.com/caassist to learn more about these helpful programs and services.

CALIFORNIA CUSTOMERS

California Consumer Privacy Act ("CCPA") - NOTICE 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 www.swgas.com/ccpa.

ADVICE LETTER NO. 1333
ATTACHMENT B

Form 902.2 Redlines



APPLICATION FOR QUALIFIED NONPROFIT GROUP LIVING FACILITIES FOR CALIFORNIA ALTERNATE RATES FOR ENERGY (CARE) PROGRAM

Discount

If qualified, a nonprofit group living facility will be eligible for a ~~20%~~ discount on all rate elements of that portion of its bill for energy serving the residential end-users.

Instructions

1. **Read** the information provided in this application.
 2. **Determine** if the facility meets the eligibility criteria for a nonprofit group living facility.
The facility must meet ALL criteria in order to qualify for the 20% discount.
 3. **Complete** the entire application (please print or type).
Nonprofit corporations must complete this application for all qualified satellites.
 4. **Attach** all required documents.
The application is not considered complete without documents.
 5. **Mail to:**
ATTN CARE
Southwest Gas Corporation
PO Box 1498
Victorville, CA 92393-1498
-

Eligibility Criteria

Examples of potentially eligible nonprofit group living facilities consist of licensed or permitted homeless shelters, transitional housing, short- or long-term care facilities (hospices, nursing homes, seniors' or children's homes), group homes for mentally or physically disabled and/or disadvantaged persons or satellite facilities of a properly licensed "mothership" facility; and other nonprofit group living facilities that may not have a license or permit (homeless shelters, women's shelters or hospices).

The facility **MUST** meet all of the following criteria:

- The discount shall be used for the direct benefit of the income eligible residents in the facility (e.g., improved quality of care or improved food service).
- A licensed or appropriately permitted nonprofit establishment where 100% of the residents meet the Commission's existing CARE income eligibility standard for a single-person household.
- A minimum of 70% of the energy consumed on site must be used for residential purposes.
- Homeless shelters, women's shelters, or hospices that would otherwise qualify but are not licensed or do not possess a Conditional Use Permit, may qualify. Such facilities may qualify provided adequate proof satisfactory to Southwest Gas is submitted and approved showing that

its residents meet the CARE income eligibility requirements, and that its services are being provided to benefit income eligible residents.

- A nonprofit owner and/or operator of a government-subsidized residential facility may be eligible if services besides lodging are provided to residents, and all other eligibility criteria are met.

For Homeless Shelters & Homekey Housing

- Homeless shelters must provide verification to Southwest Gas that they provide at least 6 beds for a minimum of 180 days out of the year for persons who have no alternative residence.
- Homeless shelters and Homekey facilities operated in a government-owned or subsidized building by a nonprofit organization may qualify for CARE so long as the nonprofit entity is the Southwest Gas customer of record for the site, and a minimum of 70% of the energy consumed on site is used for residential purposes (eating or sleeping).

Individual Eligibility Guidelines

- Each resident whose total gross annual income (taxable and non-taxable) from all sources is no more than 200% of the federal poverty level income guidelines and is not claimed as a dependent on another person's income tax return.

Exclusions

- Publicly-owned and government-subsidized housing facilities are not qualifying group living facilities. A group living facility that would otherwise qualify for CARE would not be ineligible because compensation for room, board, or services is provided by a governmental agency on behalf of the resident under a disability, Supplemental Security Income (SSI), Social Security Administration (SSA), or other governmental assistance program.
- Facilities such as student housing and/or dorms, military barracks, fraternities and/or sororities are excluded.
- The discount cannot be used to offset any direct governmental subsidies.
- Any for-profit entity is ineligible.

Certification Requirements

- Facilities must recertify every two years to receive CARE.
- Nonprofit status of the corporation and/or facility, including homeless shelters, must be evidenced by including a letter of tax-exempt nonprofit status under Internal Revenue Service Code Section 501(c)(3). Applicants for Homekey facilities are also required to provide a California state tax exemption form in addition to the IRS 501(c)(3) form.
- Services provided to residents of licensed or permitted group living facilities must be evidenced by including a current certification from the appropriate state licensing

agency or copy of Conditional Use Permit along with the application. Homeless shelters are not required to certify provision of services, but must meet the minimum operational requirements and provide, if permitted, a copy of a current Conditional Use Permit. Homekey facilities must provide a license issued by the appropriate agency that permits Homekey facilities to provide housing.

- Other non-licensed or non-permitted facilities must provide adequate proof satisfactory to Southwest Gas that its residents meet the income eligibility requirements, and that its services are being provided to benefit income eligible residents.
- Except for homeless shelters, the facility must provide proof of every resident's eligibility by completing a CARE application form (properly authorized by the resident). Individual documentation of income may be waived for those seeking lodging at homeless shelters.
- At the time of each certification, all participating facilities, including homeless shelters, are required to demonstrate to Southwest Gas that they have passed on the discount for the benefit of the income eligible residents. Reasonable certification shall include a statement of the dollar amount of the annual discount and an explanation of how those funds were spent for the benefit of the income eligible residents.

About the Discount

PU Code Section 739 extends CARE program benefits to nonprofit group living facilities that provide a service, such as meals or rehabilitation, in addition to lodging, for the direct benefit of income eligible residents. This discount is required by state law and is under the direction of the California Public Utilities Commission (CPUC).

Note: Facilities receiving the discount are subject to verification by Southwest Gas. Facilities receiving the discount inappropriately will be re-billed at the correct rate.

For additional information, please call:

Customer Assistance(877) 860-6020

Hearing Impaired 711

Or visit our website at: www.swgas.com/caassist

Application

Name on Southwest Gas Bill		Account Number		
Service Address		City	State	ZIP Code
Mailing Address		City	State	ZIP Code
Name of Corporation/Facility		IRS Nonprofit Tax ID # Attach copy of IRS Code Section 501(c)(3) Letter of Tax-Exempt Nonprofit Status		
Name on State Business License (Attach copy of License) or Conditional Use Permit		Type of License		Expiration Date
Name on any other current license or Conditional Use Permit for the Corporation/Facility		Total Number of Residents of Facility	Total Number of Residents who meet Eligibility Guidelines as stated above	
Is the facility operating as a satellite of a licensed, "mothership" facility? <input type="checkbox"/> Yes <input type="checkbox"/> No				
If Yes, provide name of "mothership" facility and attach a copy of current "mothership" license.			Name on Southwest Gas Bill	
Address of satellite facility(ies)				
State primary purpose of the facility and the services offered:				
Is at least 70% of the facility's energy used for residential purposes? <input type="checkbox"/> Yes <input type="checkbox"/> No				
Does the facility receive any funding from a governmental agency? <input type="checkbox"/> Yes <input type="checkbox"/> No				
If Yes, please explain type of funding and which governmental agency provides the funding				
As an authorized representative of the facility, I certify, under penalty and perjury, under the laws of the State of California, that the above information is true and accurate. I am authorized by this facility to sign this application and have verified the eligibility of the residents. I further certify that the discount shall be used for the direct benefit, such as improved quality of care or improved food service, of the residents of the facility. I am responsible for the annual renewal of this facility's license from the appropriate licensing agency. I also understand that Southwest Gas may request additional proof of eligibility and verification.				
				()
Authorized Representative Name (please print)		Authorized Representative Signature		Date Signed Telephone Number

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 at <https://www.swgas.com/ccpa>.



ADVICE LETTER SUMMARY

ENERGY UTILITY



MUST BE COMPLETED BY UTILITY (Attach additional pages as needed)

Company name/CPUC Utility No.:

Utility type:

☐ ELC ☐ GAS ☐ WATER
☐ PLC ☐ HEAT

Contact Person:

Phone #:

E-mail:

E-mail Disposition Notice to:

EXPLANATION OF UTILITY TYPE

ELC = Electric GAS = Gas WATER = Water
PLC = Pipeline HEAT = Heat

(Date Submitted / Received Stamp by CPUC)

Advice Letter (AL) #:

Tier Designation:

Subject of AL:

Keywords (choose from CPUC listing):

AL Type: ☐ Monthly ☐ Quarterly ☐ Annual ☐ One-Time ☐ Other:

If AL submitted in compliance with a Commission order, indicate relevant Decision/Resolution #:

Does AL replace a withdrawn or rejected AL? If so, identify the prior AL:

Summarize differences between the AL and the prior withdrawn or rejected AL:

Confidential treatment requested? ☐ Yes ☐ No

If yes, specification of confidential information:

Confidential information will be made available to appropriate parties who execute a nondisclosure agreement. Name and contact information to request nondisclosure agreement/ access to confidential information:

Resolution required? ☐ Yes ☐ No

Requested effective date:

No. of tariff sheets:

Estimated system annual revenue effect (%):

Estimated system average rate effect (%):

When rates are affected by AL, include attachment in AL showing average rate effects on customer classes (residential, small commercial, large C/I, agricultural, lighting).

Tariff schedules affected:

Service affected and changes proposed¹:

Pending advice letters that revise the same tariff sheets:

¹Discuss in AL if more space is needed.

Protests and all other correspondence regarding this AL are due no later than 20 days after the date of this submittal, unless otherwise authorized by the Commission, and shall be sent to:

CPUC, Energy Division
Attention: Tariff Unit
505 Van Ness Avenue
San Francisco, CA 94102
Email: EDTariffUnit@cpuc.ca.gov

Name:
Title:
Utility Name:
Address:
City: State:
Telephone (xxx) xxx-xxxx:
Facsimile (xxx) xxx-xxxx:
Email:

Name:
Title:
Utility Name:
Address:
City: State:
Telephone (xxx) xxx-xxxx:
Facsimile (xxx) xxx-xxxx:
Email: