

## Application for Discount

### Account Holder Information

Account Number

Name

Service Address

City, State, Zip

Phone

Alternate Phone

### (Incomplete applications will not be processed.)

I authorize my utility to contact any source necessary to establish the accuracy of information given by me that pertains to the verification of my eligibility. I understand I may be required to provide additional documentation to validate my eligibility. I understand that if I become ineligible for the discount, I must notify my utility immediately. I understand that if I move to a different service address, a new application is required and the discount will not be applied at the new address until the application has been received and approved. I further understand that discounts are limited to my primary account only.

I hereby declare, under penalty of law, that the income information provided on this form is true and accurate to the best of my knowledge and belief. My signature below certifies acknowledgement that any person obtaining a discount based on false information will be required to repay all discount amounts and all penalties allowable by law.

Signature

Date

## Do I Qualify?

Discounts are available to customers who meet specific eligibility requirements:

- 1 Your utility account must be in your name
- 2 You must be a current residential customer
- 3 Your household's gross income over the past 12 months must be at or below the following amounts, based on the number of people in your household:

Household/ Family Size	Annual Income at or below:
<input type="checkbox"/> 1	\$18,210
<input type="checkbox"/> 2	\$24,690
<input type="checkbox"/> 3	\$31,170
<input type="checkbox"/> 4	\$37,650
<input type="checkbox"/> 5	\$44,130
<input type="checkbox"/> 6	\$50,610
<input type="checkbox"/> 7	\$57,090
<input type="checkbox"/> 8	\$63,570
More than 8	\$63,570 plus \$6,480 for each additional person

The figures above reflect 150 percent of the federal poverty guidelines that took effect Jan. 18, 2018. Program participants are required to reapply every year.

Submit the completed form by email, fax or to our mailing address:

### TEP

Email: specialplans@tep.com  
Fax: 1-928-774-6396

### UES

Email: specialplans@uesaz.com  
Fax: 1-928-774-6396

### Address: TEP/UES

ATTN: Customer Assistance Programs  
2901 West Shamrell Blvd., Suite 110  
Flagstaff, AZ 86005-9964