

CITY OF SOUTH BEND UTILITY RELIEF PROGRAM

Purpose: To help the citizens of South Bend who have been impacted by COVID-19 pay for all or part (up to \$300) of their City of South Bend Utility bill for the billing period in April, May, June, July or August.

Qualifications:

- Must live in South Bend and be a City of South Bend utility customer
- Must be negatively impacted by COVID-19 in one of the following ways:
 - Loss of work
 - Reduction of work hours
 - Loss of childcare
 - Illness or family member illness
 - Other impacts as determined by the administrator
- Must be at or below the FY 2020 Income Limits for Pacific County:

Household size	Income limit
1	\$37,700
2	\$43,100
3	\$48,500
4	\$53,850
5	\$58,200
6	\$62,500

To Apply:

- Complete the basic intake form*
- Attach documentation of household income (a paystub, W2, or other verification)**
- Attach a copy of identification (Driver’s license, Passport, etc.) Address on identification must match service address
- Attach a copy of the City of South Bend Utility bill*

*Required for consideration

**Strongly encouraged; however, consideration will not be denied based on failure to produce documentation of household income

Please note: Funds are credited directly to your City of South Bend Utility Account

Approvals: Funds are awarded based on complete applications and proper documentation



CITY OF SOUTH BEND UTILITIES FUND

Application Form

Basic Information

Date:

Name:		Phone:
Street Address:		
City:	State:	Zip:
Email:		Phone: Cell:

Household and Income Information

# of Adults in the household:	How was your household impacted by COVID-19?	
# of children (under 18) in the household:		
Please answer all wage questions using monthly totals for all adults in the household		
Wages/Salary:		Social Security:
SSI:	TANF:	GAU:
Unemployment:	Retirement:	Veteran's assistance:
Food Stamps:	Other:	Total monthly income:

Signature of Applicant: _____

City of South Bend Utility Bill Account Number: _____