

PUBLIC UTILITIES COMMISSION

505 VAN NESS AVENUE

SAN FRANCISCO, CA 94102-3298



June 3, 2021

Edward N. Jackson
Director, Rates and Regulatory Affairs
Liberty Utilities (Apple Valley Ranchos Water) Corp.
21760 Ottawa Road
Apple Valley, CA 92308-6533

Dear Mr. Jackson,

The Commission has approved Liberty Utilities' (Apple Valley Ranchos Water) Advice Letter No. 254, filed on May 17, 2021, regarding authorization to update the eligibility income guidelines in its rate assistance program for low-income customers, also known as the Customer Assistance Program ("CAP").

Enclosed are copies of the following revised tariff sheets, effective June 1, 2021, for the utility's files:

P.U.C.	
Sheet No.	Title of Sheet
1092-W	Form No. 13, Customer Assistance Program Application
1093-W	Schedule No. CAP, Customer Assistance Program, Page 1
1094-W	Schedule No. CAP, Customer Assistance Program, Page 2
1095-W	Schedule No. CAP-SC, Customer Assistance Program, Page 1
1096-W	Table of Contents, Page 1
1097-W	Table of Contents, Page 2

Please contact Carmen Rocha at MDC@cpuc.ca.gov or 415-703-2162, if you have any questions.

Thank you,

/s/ROBIN BRYANT

Robin Bryant
Water Division

Enclosures

LIBERTY UTILITIES
(APPLE VALLEY RANCHOS WATER) CORP.
21760 OTTAWA ROAD
P. O. BOX 7005
APPLE VALLEY, CA 92307-7005

	<u>REVISED</u>	Cal. P.U.C. Sheet No.	<u>1092-W</u>
Canceling	<u>REVISED</u>	Cal. P.U.C. Sheet No.	<u>1025-W</u>

Form No. 13
Liberty Utilities (Apple Valley Ranchos Water) Corp.
Notice and Application for
Customer Assistance Program (CAP)

(To be inserted by Utility)

Advice No.	<u>254-W</u>	<u>GREGORY S. SORENSEN</u>
		Name
Decision No.	<u></u>	<u>PRESIDENT</u>
		Title

(To be inserted by Cal. P.U.C.)

Date Filed	<u>05/17/2021</u>
Effective	<u>06/01/2021</u>
Resolution No.	<u></u>

Para nuestros vecinos que tal vez necesiten ayuda, Liberty tiene el orgullo de ofrecer el Programa de Asistencia al Cliente (CAP).

CAP es un programa de asistencia tarifaria para clientes de bajos ingresos que ofrece un descuento mensual de \$8.17 en la factura de agua a los clientes residenciales que cumplen con los requisitos.

Hay dos formas de tener derecho a CAP:

- 1

Si participa en un programa de asistencia para clientes de bajos ingresos de otra empresa de servicios públicos (como CARE de Southern California Gas Company) o si recibe beneficios de programas como Medicare, Medi-Cal y otros.
- 2

Si proporciona información de que el ingreso en el hogar cumple con los lineamientos del programa.

Inscribirse es rápido y fácil. Sólo llene el formulario de solicitud adjunto y tráigalo personalmente a nuestra oficina o envíelo por correo.



Tiene alguna pregunta sobre CAP?
Llame a la oficina de Servicio al Cliente al 760-247-6484
O visite libertyutilities.com

COMO PUEDE CALIFICAR

1

PROGRAMAS DE ASISTENCIA PUBLICA
Si usted u otra persona que vive en su hogar recibe beneficios de cualquiera de los siguientes programas:

- Medi-Cal/Medicaid
- Health Families Categories A & B
- Women, Infants & Children (WIC)
- CalWORKS (TANF) or Tribal TANF
- Head Start Income Eligible-Solamente Tribal
- Bureau of Indian Affairs General Assistance (BIA GA)
- CalFresh/SNAP (Estampillas para comida)
- National School Lunch Program (NSLP)
- Low Income Home Energy Assistance Program (LIHEAP)
- Supplemental Security Income (SSI)

2

INGRESO MÁXIMO EN EL HOGAR:
(En vigor del 1 de junio de 2021 a el 31 de mayo 2022)

Número de personas en el hogar	Ingreso total anual*
1-2	\$34,840
3	\$43,920
4	\$53,000
5	\$62,080
6	\$71,160
7	\$80,240
8	\$89,320

Por cada miembro adicional en el hogar, añada \$9,080
*Incluye los ingresos actuales del hogar de todas las fuentes de ingreso antes de deducciones.

Liberty
21760 Ottawa Rd.,
Apple Valley, CA 92308

Solicitud para El Programa de Asistencia al Cliente (CAP)

Número de cuenta

Número de cliente

1. Actualmente participo en el siguiente programa(s):

☐ Southern California Edison (C.A.R.E.)

☐ Medi-Cal/Medicaid

☐ CalFresh/SNAP

☐ TANF/Tribal TANF

☐ Southern California Gas Company (C.A.R.E.)

☐ WIC

☐ Healthy Families A&B

☐ LIHEAP

☐ SSI

☐ National School Lunch (NSLP)

☐ Bureau of Indian Affairs General Assistance

☐ Head Start Income Eligible (Tribal Only)

2. Marque el número de personas que viven en su hogar:

☐ Uno (1)

☐ Dos (2)

☐ Más de Seis (6+),

Número

☐ Tres (3)

☐ Cuatro (4)

☐ Cinco (5)

☐ Seis (6)

+

=

Adultos

Niños

Número Total

3. Escriba el total del ingreso familiar anual para todas las personas en su hogar. Este es el ingreso antes de las deducciones de todas las fuentes:

\$

4. Marque todas las fuentes de ingresos de su hogar:

☐ Sueldos

☐ Beneficios de desempleo

☐ Interés o Dividendos de:

☐ Cuentas de Ahorros

☐ Acciones o Bonos

☐ Cuentas de Jubilación

☐ Pagos de discapacidad

☐ Compensación al trabajador

☐ Seguro Social, SSI, SSP

☐ Pensiones

☐ Indemnizaciones de seguro

☐ Indemnizaciones legales

☐ CalWORKs (TANF/AFDC)

☐ CalFresh/SNAP

☐ Apoyo para los niños

☐ Dinero en efectivo y/u otros ingresos

☐ Apoyo de cónyuge

5. Declaración y afirmación de autocertificación: Yo declaro que la información prociata en esta solicitud es verdadera y correcta. Estoy de acuerdo con proveer comprobantes de mis ingresos si me lo piden. Si en algún momento no califico para recibir el descuento, notificaré a Liberty Utilities. Si ya no califico pero sigo recibiendo el descuento, tal vez tendré que pagar la cantidad del descuento que recibí. Entiendo que Liberty Utilities puede compartir mi informacion con otras compañías de servicios públicos o sus representantes, para registrarme en sus programas de asistencia.

Firma

Nombre en letra de molde

Fecha

Dirección

Ciudad

Teléfono

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Need a Helping Hand?
Apply for the Customer Assistance Program (CAP)

See if Your Household Qualifies

www.libertyutilities.com

LIBERTY UTILITIES
(APPLE VALLEY RANCHOS WATER) CORP.
21760 OTTAWA ROAD
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APPLE VALLEY, CALIFORNIA 92307-7005

Canceling REVISED Cal. P.U.C. Sheet No. 1093-W
REVISED Cal. P.U.C. Sheet No. 1041-W

Page 1

SCHEDULE NO. CAP

CUSTOMER ASSISTANCE PROGRAM

(T)

APPLICABILITY

Applicable to residential domestic service to CAP households accommodation with a 1-inch or smaller meter, where the customer meets all the Special Conditions of this rate schedule. (T)

TERRITORY

Town of Apple Valley and vicinity, Town of Yermo and vicinity, San Bernardino County, California.

RATES

Quantity Rate

Customers will be charged per 100 cubic feet of water delivered at the quantity rate reflected in Schedule Nos. 1 and 1 YE-R, Residential General Metered Service.

Service Charge

Customers will be charged a monthly service charge at the applicable mere size rate reflected in Schedule Nos. 1 and 1 YE-R, Residential General Metered Service. Customers will receive a monthly CAP Credit of \$8.17 prorated based on days of service, if service is not provided for a full month. (T)

SPECIAL CONDITIONS

1. CAP Household: A CAP Household is a household where the total gross income from all sources is less than or equal to the maximum household income levels for the CARE programs approved by the Commission as reflected on Form No. 13, Customer Assistance Program (CAP) Application. Total gross income shall include income from all sources, both taxable and non-taxable. Persons who are claimed as a dependent on another person's income tax return (other than your spouse) are not eligible for this program. (T)
(T)
(T)

(Continued)

(To be inserted by utility)

Issued By

(To be inserted by Cal. P.U.C.)

Advice No. 254-W

CHRISTOPHER G. ALARIO
Name

Date Filed 05/17/2021

Dec. No. D.20-09-019

PRESIDENT
Title

Effective 06/01/2021

Resolution No. _____

LIBERTY UTILITIES
(APPLE VALLEY RANCHOS WATER) CORP.
21760 OTTAWA ROAD
P. O. BOX 7005
APPLE VALLEY, CALIFORNIA 92307-7005

REVISED Cal. P.U.C. Sheet No. 1094-W
Canceling REVISED Cal. P.U.C. Sheet No. 527-W

Page 2

SCHEDULE NO. CAP

CUSTOMER ASSISTANCE PROGRAM

(T)

SPECIAL CONDITIONS (continued)

2. Application and Eligibility Declaration: An application and eligibility declaration on a form authorized by the Commission is required for each request for service under this schedule. Renewal of a customer's eligibility declaration will be required every two years and may be required on an annual basis. Customers are only eligible to receive service under this rate schedule at one residential location at any one time, and the rate applies only to the customer's permanent primary residence. The schedule is not applicable where, in the opinion of the Utility, either the accommodation or the occupancy is transitory.
3. Commencement of Rate: Eligible customers shall be billed on this schedule commencing no later than one billing period after receipt and approval of the customer's application by the Utility.
4. Verification: Information provided by the applicant is subject to verification by the Utility. Proof of enrollment in the Southern California Edison CARE program will be accepted by the Utility as documentation of eligibility status.
5. Notice from Customer: It is the customer's responsibility to notify the Utility if there is a change in the customer's eligibility status.
6. Customers may be re-billed for periods of ineligibility under the applicable rate schedule.
7. All bills are subject to the Public Utilities Commission Reimbursement Fee set forth on Schedule No. UF.

(To be inserted by utility)

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REVISED Cal. P.U.C. Sheet No. 1095-W
Canceling REVISED Cal. P.U.C. Sheet No. 1042-W

Page 1

SCHEDULE NO. CAP-SC

CUSTOMER ASSISTANCE PROGRAM

(T)

APPLICABILITY

Applicable to all metered water service, excluding Non-Metered Fire Service, Gravity Irrigation Service and customers that receive a CAP credit.

(T)

TERRITORY

Town of Apple Valley and vicinity, Town of Yermo and vicinity, San Bernardino County.

SPECIAL CONDITIONS

1. A surcharge of \$5.74 per month is applicable to all metered customers, excluding customers receiving Non-Metered Fire Sprinkler Service, Gravity Irrigation Service, and customers that receive a CAP credit. The surcharge offsets CAP credits and CAP program costs and will be applied to each customer's bill.

(T)

(To be inserted by utility)

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(Continued)

(To be inserted by utility)

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P. O. BOX 7005
APPLE VALLEY, CALIFORNIA 92307-7005

REVISED CPUC Sheet No. 1097-W
Canceling REVISED CPUC Sheet No. 1027-W

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