

DOCUMENTS NEEDED FOR THE SHARE PROGRAM

(951) 955-6478

- **CURRENT ELECTRIC BILL**
- **ANY DISCONNECTION NOTICES or URGENT NOTICES**
- **INCOME FOR EVERYONE IN THE HOUSEHOLD (the last 4-weeks)**
 - Paycheck stubs
 - SSI or SSA Award letter (2014)
 - **Current bank statement showing direct deposit only for SSI, SSA, TANF or Pension**
 - **Unemployment check stubs**
 - **Current TANF Notice of Action**
 - **Child support receipts**
 - **Alimony – spousal support**
 - **Disability insurance payments**
 - **Self Employed: (Profit & Loss, 1040 Tax Form)**
 - **Job paid in cash**
- **CURRENT - VALID PICTURE I.D.**
- **SOCIAL SECURITY CARD**
- **PROOF OF U.S. CITIZENSHIP (one of the following)**
 - **U. S. Birth Certificate**
 - **Current U.S. Passport**
 - **Valid Permanent Resident Alien Card**
 - **Certificate of Naturalization or Citizenship**
 - **Military DD2-14 Form (showing applicant's place of birth)**
 - **Military I.D. (showing applicant's place of birth)**



NO DOCUMENT WILL BE ACCEPTED AS PROOF OF CITIZENSHIP UNLESS IT CLEARLY SPECIFIES PLACE OF BIRTH IN THE USA OR SHOWS PROOF OF CURRENT LEGAL IMMIGRATION STATUS

**TO BETTER SERVE YOU, THESE DOCUMENTS ARE REQUIRED FOR
THE UTILITY PAYMENT ASSISTANCE**

– THANK YOU –

SHARE ENERGY FUND

What Is SHARE?

SHARE is a program of Riverside Public Utilities to assist qualified, low-income residential electric customers with their utility bills and deposits. Administered by Community Action Partnership, this program is supported by voluntary customer contributions and has been expanded with funds from the state-mandated Electric Public Benefits Charge.

Do I Qualify?

SHARE funds are available to Riverside households who meet the following income guidelines:

Number in Household	Total Annual Income* Does Not Exceed	Total Monthly Income* Does Not Exceed
1	\$17,655	\$1,471.25
2	\$23,895	\$1,991.25
3	\$30,135	\$2,511.25
4	\$36,375	\$3,031.25
5	\$42,615	\$3,551.25
6	\$48,855	\$4,071.25
7	\$55,095	\$4,591.25
8	\$61,335	\$5,111.25

For additional income levels, please call 951-955-6478

**Income levels are based on the Federal Poverty Guidelines and are subject to change.*

To apply, call **(951) 955-6478** on Monday - Friday, 8:00AM - 5:00PM
For other state and county assistance programs, call **(951) 955-6448**

SHARE Program Guidelines

- Customers must fulfill all program guidelines, program specific and general RPU program guidelines, to be eligible for incentives.
- The level of incentive is up to \$150 per customer. Assistance will be available on a one-time basis during a 12-month period. A 12-month period starts when a customer applies for and receives assistance and only if the customer has not applied for and received such assistance within twelve months of the date of the new application.
- Any change of address within the 12 month waiting period before customers can apply for SHARE again, does not void the 12 month waiting period. A customer is still ineligible for SHARE until a 12 month period has passed since they last applied and received SHARE assistance.
- Applicants must complete an application at Community Action Partnership of Riverside County, 2038 Iowa Ave., Ste. B-102, Riverside, CA 92507. They must bring a copy of their current utility bill, proof of all household income, birth certificate, and social security card. For more information, customers can call (951) 955-6478, Monday through Friday, 8 a.m. to 5 p.m.
- All **General Program Guidelines** apply.



Intake Application



I. Basic Information	Applicant's Last Name _____ First Name _____ M.I. _____		Social Security Number _____ - _____ - _____		(____) _____ (Area Code) Phone #		
	Applicant's Address: _____			City: _____ Riverside		State: _____ CA	Zip Code: _____
	Utility Account Number: _____		Total number of persons living in household including applicant: <input type="checkbox"/>	1. Ages 2 – or younger _____ 2. Ages 3 – 5 years _____ 3. Ages 6 – 18 years _____ 4. Ages 19 – 59 (adult) _____ 5. Ages 60 or older (elderly) _____ 6. Disabled _____			
	Utility Service in Name of: _____						
II. Income Verification	NOTE: REFER TO INSTRUCTIONS FOR INFORMATION ON INCOME THAT WILL NOT BE CONSIDERED IN DETERMINING TOTAL ONE (1) MONTH INCOME:						
	Type of Income (Please circle the one that applies)					Income	
	1. Paychecks (Gross salary, wages, training allowance and net income from self-employed)					\$ _____	
	2. Public Assistance – Cal Works - TANF (AFDC)					\$ _____	
	3. SSI/SSP or SSA (Please add, if both benefits are granted)					\$ _____	
	4. Pensions (Retirement Benefits, Insurance Benefits, Disability Insurance, Workers Compensation)					\$ _____	
5. All other income, specify (Child Support or Alimony, Savings, Investment, Interests, Foster Care Grant, Unemployment Insurance)					\$ _____		
TOTAL:					\$ _____		
III. Applicant's Signature	1. I hereby authorize the Community Action Partnership of Riverside County to: a. Examine all employment, income, utility, fuel, and other records pertinent to my application for energy assistance. b. Make direct payment to my energy supplier, if applicable. 2. I hereby authorize utility fuel supplier to release information regarding my bills past and future, to the agencies named in item 1 of this section. 3. I certify that I am temporarily unable to pay my energy bill(s) I certify under penalty of perjury that all information herein is true and correct to the best of my knowledge and that I have read the Privacy Notification						
	_____		_____		_____		
Applicant's Signature		Date		Witness Signature if Applicable			
Please do not write below this line							
IV. Energy Needs Verification	AGENCY USE ONLY						
	Deposit Notice: _____		Delinquent Bills: _____		Water Bill: _____		
Current Payment: _____		Current Payment: _____		Current Payment: _____			
V. Agency Approval	_____			_____			
	Intake Worker's Signature			Intake Worker's (spell name please)			

Please return completed application and copies of required documents to:

Community Action Partnership of Riverside County
 P.O. Box 5760
 Riverside, CA 92517-5760
 Attn: SHARE Program



Sharing Households Assist Riverside Energy

S.H.A.R.E.

PRIVACY NOTIFICATION

In Accordance with the Information Practices Act of 1977 and the Federal Privacy Act of 1974, the following notification is provided to an applicant for energy assistance benefits through the local agency named on the reverse side of the application.

The City of Riverside Public Utilities and the SHARE Program (Sharing Households Assist Riverside Energy), require the applicant to provide his/her name, home address, social security number, proof of citizenship and monthly or annual income to the local agency for determination of applicant's eligibility to receive energy assistance benefits. Failure to provide all or part of the required information will prevent processing of the application.

The information provided by the applicant will be used only for the determination of eligibility for energy assistance benefits provided by the local agency pursuant to grants issued by Riverside Public Utilities.

All personal information provided by the applicant on the reverse side of this application shall be maintained by the local agency. The local agency may share the applicant's information with other agencies administering Liheap programs, the Department of Community Services and Development (CSD), or the U.S. Department of Energy.

The applicant has a right of access to records, containing his/her personal information that are maintained by the local agency. If the applicant requires additional information pertaining to the maintenance of his/her personal information, he/she may contact the agency at:

Community Action Partnership of Riverside County
2038 Iowa Avenue, Suite B-102
P.O. Box 5760
Riverside, CA 92517-5760
(951) 955-6478 or (800)511-1110
(951) 955-5126 – TTY
(951) 955-0944 – Fax