

DESERT WATER



REQUEST FOR REDUCED TURN ON FEE DUE TO FINANCIAL HARDSHIP (Health & Safety Code § 116914)

Customer Name: _____

Account Number: _____

Address: _____

City & ZIP Code: _____

Please use this form if your water service has been disconnected due to non-payment and you meet one of the conditions below in order to receive a reduced reconnection fee of \$50.00 for payments made between 8:00 am and 4:00 pm, Monday through Friday (closed holidays).

____ (1) Please mark here if your household's annual income is below 200 percent of the federal poverty level.

____ (2) Please mark here and attach proof if a current member of your household participates in one of the programs listed below*.

*Eligible programs are: CalWORKs, CalFresh, general assistance, Medi-Cal, Supplemental Security Income/State Supplementary Payment Program, and California Special Supplemental Nutrition Program for Women, Infants and Children.

CERTIFICATION

BY SIGNING BELOW, I DECLARE UNDER PENALTY OF PERJURY THAT THE FACTS CONTAINED WITHIN THIS REQUEST FORM ARE TRUE AND CORRECT. I UNDERSTAND THAT I MAY BE REQUIRED TO PROVIDE ADDITIONAL DOCUMENTATION NEEDED TO PROCESS THIS FORM.

Signed: _____ Date: _____

Printed Name: _____

Return completed request via fax, email or physical delivery.
Desert Water Agency's Operation Center, 1200 Gene Autry Trail South, Palm Springs, CA 92264
fieldservices@dwa.org • Fax (760) 325-6505

Questions: Please contact Field Services (760) 323-4971 ext. 129