



**Pacific Gas and
Electric Company®**

Brian K. Cherry
Director
Regulatory Relations

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San Francisco, CA 94105

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May 13, 2005

Advice 2631-G/2662-E
(Pacific Gas and Electric Company ID U39M)

Subject: Revised Household Income Requirements for CARE Program

Public Utilities Commission of the State of California

Pacific Gas and Electric Company (PG&E) hereby submits for filing revisions to its gas and electric tariffs. The affected tariff sheets are listed on the enclosed Attachment I.

Purpose

The purpose of this filing is to revise the household income requirements for PG&E's gas and electric California Alternate Rates for Energy (CARE) Program. This filing complies with Resolution (R.) E-3524, dated February 19, 1998, in which the Commission ordered the Energy Division Director to notify California utilities by letter each May 1st of annual revisions to CARE income levels effective June 1st. In accordance with the Energy Division's Notice to All Energy Utilities Providing Service Under CARE and LIEE (Notice) dated April 26, 2005, PG&E hereby submits tariffs with revised income limitations for the CARE program, **effective June 1, 2005.**

In addition to income limitation revisions to gas and electric Rules 19.1--*California Alternate Rates for Energy for Individual Customers and Submetered Tenants of Master-Metered Customers*, 19.2--*California Alternate Rates for Energy for Nonprofit Group-Living Facilities*, and 19.3--*California Alternate Rates for Energy for Qualified Agricultural Employee Housing Facilities*, proposed in this filing, PG&E is also updating the income levels shown on gas and electric Form No. 01-9077--*CARE Program Application for Residential Single-Family Customers*, Form No. 01-9285--*CARE Program Application for Tenants of Sub-Metered Facilities*, and Form No. 62-1477--*CARE Program Income Guidelines*, and Form No. 03-006--*Postage-Paid Application*.

Spanish, Chinese, and Vietnamese translations of the above forms are available. They are posted on PG&E's website at:

http://www.pge.com/res/financial_assistance/care

The revised income levels are as follows:

Number of Persons in Household	Total Combined Annual Income
1 or 2	\$24,200
3	\$28,400
4	\$34,200
5	\$40,000
6	\$45,800
Each Additional	\$5,800

PG&E is updating all pertinent printed or posted materials to reflect the revised income levels. This filing will not affect any other rates or charges, cause the withdrawal of service, or conflict with any other rate schedule or rule.

Protests

Anyone wishing to protest this filing may do so by letter sent via U.S. mail, by facsimile or electronically, any of which must be received no later than 20 days after the date of this filing, which is **June 2, 2005**. Protests should be mailed to:

CPUC Energy Division
 Attention: Tariff Unit, 4th Floor
 505 Van Ness Avenue
 San Francisco, California 94102

Facsimile: (415) 703-2200
 E-mail: jjr@cpuc.ca.gov and jnj@cpuc.ca.gov

Copies of protests also should be mailed to the attention of the Director, Energy Division, Room 4004, at the address shown above.

The protest also should be sent via U.S. mail (and by facsimile and electronically, if possible) to PG&E at the address shown below on the same date it is mailed or delivered to the Commission:

Pacific Gas and Electric Company
Attention: Brian Cherry
Director, Regulatory Relations
77 Beale Street, Mail Code B10C
P.O. Box 770000
San Francisco, California 94177

Facsimile: (415) 973-7226
E-mail: PGETariffs@pge.com

Effective Date

In accordance with R. E-3524 and the Commission's letter dated April 26, 2005, PG&E requests that this advice filing become effective **June 1, 2004**.

Notice

In accordance with General Order 96-A, Section III, Paragraph G, a copy of this advice letter is being sent electronically and via U.S. mail to parties shown on the attached list. Address changes should be directed to Rose de la Torre at (415) 973-4716. Advice letter filings can also be accessed electronically at:

<http://www.pge.com/tariffs>

Brian K. Cherry /ss

Director, Regulatory Relations

Attachments

CALIFORNIA PUBLIC UTILITIES COMMISSION

ADVICE LETTER FILING SUMMARY ENERGY UTILITY

MUST BE COMPLETED BY UTILITY (Attach additional pages as needed)

Company name/CPUC Utility No. **Pacific Gas and Electric Company (ID U39)**

Utility type:

ELC GAS
 PLC HEAT WATER

Contact Person: Susan Shaw

Phone #: (415) 973-7375

E-mail: sxs9@pge.com

EXPLANATION OF UTILITY TYPE

ELC = Electric GAS = Gas
PLC = Pipeline HEAT = Heat WATER = Water

(Date Filed/ Received Stamp by CPUC)

Advice Letter (AL) #: **2631-G/2662-E**

Subject of AL: California Alternate Rates for Energy (CARE) Revise Income Eligibility Limitations

Keywords (choose from CPUC listing): **CARE**

AL filing type: Monthly Quarterly Annual One-Time Other _____

If AL filed in compliance with a Commission order, indicate relevant Decision/Resolution #: **Resolution E-3524**

Does AL replace a withdrawn or rejected AL? If so, identify the prior AL: N/A

Summarize differences between the AL and the prior withdrawn or rejected AL¹: _____

Resolution Required? Yes No

Requested effective date: **June 1, 2005**

No. of tariff sheets: 20

Estimated system annual revenue effect (%): _____

Estimated system average rate effect (%): _____

When rates are affected by AL, include attachment in AL showing average rate effects on customer classes (residential, small commercial, large C/I, agricultural, lighting).

Tariff schedules affected: Gas and Electric Rules 19.1, 19.2 and 19.3; Forms 01-9077, 62-1477, 62-1477 and 03-006

Service affected and changes proposed¹: CARE Residential

Pending advice letters that revise the same tariff sheets: N/A

Protests and all other correspondence regarding this AL are due no later than 20 days after the date of this filing, unless otherwise authorized by the Commission, and shall be sent to:

**CPUC, Energy Division
Attention: Tariff Unit
505 Van Ness Ave.,
San Francisco, CA 94102
jjr@cpuc.ca.gov and jnj@cpuc.ca.gov**

**Pacific Gas and Electric Company
Attn: Brian K. Cherry
Director, Regulatory Relations
77 Beale Street, Mail Code B10C
P.O. Box 770000
San Francisco, CA 94177
E-mail: PGETariffs@pge.com**

¹ Discuss in AL if more space is needed.

**ATTACHMENT 1
Advice 2631-G**

Cal P.U.C. Sheet No.	Title of Sheet	Cancelling Cal P.U.C. Sheet No.
23142-G	Rule 19.1--California Alternate Rates for Energy for Individual Customers and Submetered Tenants of Master-Metered Customers	22426-G
23143-G	Rule 19.2--California Alternate Rates for Energy for Nonprofit Group-Living Facilities	22427-G
23144-G	Rule 19.3--California Alternate Rates for Energy for Qualified Agricultural Employee Housing Facilities	22428-G
23145-G	Form 01-9077—CARE Application for Residential Single-Family Customers	22429-G
23146-G	Form 01-9285—CARE Application for Tenants of Sub-Metered Facilities	22430-G
23147-G	Form 62-1477—CARE Income Guidelines	22431-G
23148-G	Form 03-006—CARE Postage-Paid Application	22432-G
23149-G	Table of Contents--Sample Forms	22999-G
23150-G	Table of Contents--Rules	23004-G
23151-G	Table of Contents--Rate Schedules	23135-G

Advice 2662-E

23421-E	Rule 19.1--California Alternate Rates for Energy for Individual Customers and Submetered Tenants of Master-Metered Customers	21620-E
23422-E	Rule 19.1 (Cont.)	21620-E
23423-E	Rule 19.2--California Alternate Rates for Energy for Nonprofit Group-Living Facilities	21621-E
23424-E	Rule 19.3--California Alternate Rates for Energy for Qualified Agricultural Employee Housing Facilities	21622-E
23425-E	Form 01-9077—CARE Application for Residential Single-Family Customers	21623-E
23426-E	Form 01-9285—CARE Application for Tenants of Sub-metered Facilities	21624-E
23427-E	Form 62-1477—CARE Income Guidelines	21625-E

Advice 2662-E

Cal P.U.C. Sheet No.	Title of Sheet	Cancelling Cal P.U.C. Sheet No.
23428-E	Form 03-006—CARE Postage Paid Application	21626-E
23429-E	Table of Contents--Sample Forms	22742-E
23431-E	Table of Contents--Rate Schedules	23420-E



RULE 19.1—CALIFORNIA ALTERNATE RATES FOR ENERGY FOR INDIVIDUAL CUSTOMERS AND SUBMETERED TENANTS OF MASTER-METERED CUSTOMERS

(Continued)

B. ELIGIBILITY (Cont'd.)

Total gross annual income for all persons in the applicants household may not exceed the following:

<u>Number of Persons in Household</u>	<u>Maximum Annual Household Income</u>
1-2	\$24,200 (I)
3	\$28,400
4	\$34,200
5	\$40,000
6	\$45,800
Each additional member, add:	\$ 5,800 (I)

C. CERTIFICATION

1. Individually metered PG&E Customers, submetered tenants of master-metered PG&E Customers, and other qualifying applicants in individually metered residential dwelling units:

All applicants for certification must fill out and provide to PG&E Application Form No. 01-9077.

2. Submetered tenants of master-metered PG&E Customers:

Submetered tenants of master-metered Customers will submit Application Form No. 01-9285 to PG&E, including their apartment/unit number and PG&E master metered account number. PG&E will notify the master-metered Customer of the tenant's certification. The master-metered Customer, not PG&E, is responsible for extending CARE discounts to tenants certified to receive them.

3. Self-certification:

Self-certification will be used to determine income eligibility for the CARE program. Customers must sign a statement upon application indicating that PG&E may verify the Customer's eligibility at any time. If verification establishes that the Customer is ineligible, the Customer will be removed from the program and PG&E may render corrective billings.

(Continued)



**RULE 19.2—CALIFORNIA ALTERNATE RATES FOR ENERGY
 FOR NONPROFIT GROUP-LIVING FACILITIES**

(Continued)

B. ELIGIBILITY (Cont'd.)

3. The facility must also be licensed, or otherwise prove to PG&E's satisfaction, by the appropriate state agency. A homeless shelter is required to provide a copy of its municipal or county conditional use permit.
4. The total gross income for all persons residing in each household at a Facility may not exceed the following:

<u>Number of Persons in Household</u>	<u>Maximum Annual Household Income</u>
1-2	\$24,200 (l)
3	\$28,400
4	\$34,200
5	\$40,000
6	\$45,800
Each additional member, add:	\$ 5,800 (l)

(Continued)



**RULE 19.3-CALIFORNIA ALTERNATE RATES FOR ENERGY
FOR QUALIFIED AGRICULTURAL EMPLOYEE HOUSING FACILITIES**
(Continued)

B. ELIGIBILITY (Cont'd.)

2. PRIVATE-OWNED EMPLOYEE HOUSING FACILITIES

- a. Privately-Owned Employee Housing Facilities must provide proof of current compliance with Part 1 of Division 13 of the Health and Safety Code. Compliance must take the form of having a permit issued by the State Department of Housing and Community Development pursuant to Health and Safety Code §17030.
- b. For Privately-Owned Employee Housing Facilities, 100 percent of the energy supplied to the facility's premises must be used for residential purposes.

3. AGRICULTURAL EMPLOYEE HOUSING FACILITIES

- a. Agricultural Employee Housing Facilities must provide a letter of determination by the Internal Revenue Service (IRS) that the corporation is tax-exempt due to its non-profit status under IRS Code §501(c)(3) or proof that it is tax-exempt due to its non-profit status from the State of California. Additionally, the Facility must provide a copy of letter from the Assessor in the county where the Facility is located stating that the housing is exempt from local property taxes.
- b. For Agricultural Employee Housing Facilities, 100 percent of the energy supplied to the facility's premises must be used for residential purposes, if each of the dwelling areas in the facility is individually metered. If a master meter serves the facility, not less than 70 percent of the energy supplied to the facility's premises must be used for residential purposes.

4. The total gross income for all persons residing in each household at a Facility may not exceed the following:

<u>Number of Persons in Household</u>	<u>Maximum Annual Household Income</u>
1-2	\$24,200 (I)
3	\$28,400
4	\$34,200
5	\$40,000
6	\$45,800
Each additional member, add:	\$ 5,800 (I)

(Continued)



Pacific Gas and Electric Company
San Francisco, California

Cancelling

Revised
Revised

Cal. P.U.C. Sheet No.
Cal. P.U.C. Sheet No.

21345-G
22429-G

PACIFIC GAS AND ELECTRIC COMPANY

CALIFORNIA ALTERNATE RATES FOR ENERGY PROGRAM
APPLICATION FOR RESIDENTIAL SINGLE-FAMILY CUSTOMERS
FORM NO. 01-9077 (REV 6/05)
(ATTACHED)

(T)

Advice Letter No. 2631-G
Decision No. 89-07-062,89-09-044

Issued by
Karen A. Tomcala
Vice President
Regulatory Relations

Date Filed May 13, 2005
Effective June 1, 2005
Resolution No. E-3524

100367



**Pacific Gas and
Electric Company®**

**CARE Program Application for
Residential Single-Family Customers**



CARE Program

www.pge.com/care

Mail Completed Application to: P.O. Box 7979, San Francisco, CA 94120-7979

01-9077

For Questions Call: 1-866-PGE-CARE (743-2273) Fax: 415-973-6419

Rev. 06/01/05

ABOUT THE CARE DISCOUNT PROGRAM

The CARE Program provides a 20% discount on the utility bill of qualifying households. (If you are a qualifying Time-of-Use customer, your discount will be equal to your monthly meter charge.) The discount and eligibility criteria were established by the California Public Utilities Commission and are updated each June. If you qualify, your discount will appear after your next Pacific Gas and Electric Company bill cycle once your completed application has been received and verified by Pacific Gas and Electric Company. Pacific Gas and Electric Company will contact you by mail at least every two years to verify your continued need for the program.

CARE PROGRAM RULES

- The Pacific Gas and Electric Company bill must be in your name.
- You must live at the address where the discount will be received more than half of the year (not for second homes).
- You may not qualify for a CARE discount if you share energy meter(s) with another home.
- You may not be claimed as a dependent on another person's tax return other than your spouse.
- Your household must meet the program definition of low-income as described in this application packet.
- You must notify Pacific Gas and Electric Company if your household no longer qualifies for the CARE discount.
- Tenants of sub-metered mobile home parks, apartments and marinas must use the "CARE Program Application for Tenants of Sub-Metered Facilities". (See Landlord / Manager for form 01-9285)

OTHER PROGRAMS AND SERVICES YOU MAY QUALIFY FOR

- **FERA** – Family Electric Rate Assistance Program. Provides a Tier 3 (131-200 percent of baseline) electric rate reduction for large households of 3 or more persons with low to middle income. Customer may be enrolled in either the FERA Program or the CARE Program, but not both. Call 1-800-PGE-5000 for more information.
- **LIHEAP** - Low Income Home Energy Assistance Program. Provides bill payment assistance, emergency bill assistance and weatherization services. Call the Department of Community Services and Development (CSD) at 1-866-675-6623 for more information.
- **REACH** – Contact the Salvation Army for one-time assistance in paying your bills. Call the Salvation Army at 1-800-933-9677 for more information.
- **Payment Arrangements** - Pacific Gas and Electric Company can work out a payment schedule for you if you need more time paying your bill. Call 1-800-PGE-5000 for more information.
- **Medical Baseline** - Provides services at the lowest rates to customers with documented needs. Call 1-800-PGE-5000 for more information.
- **Energy Partners** - Free energy education and weatherization to income-qualified customers. Call 1-800-989-9744 for more information.
- **Balanced Payment Plan** – Contact Pacific Gas and Electric Company Customer Services to see how your monthly payments can be evened out to allow you to budget your energy costs. Call 1-800-PGE-5000 for more information.
- **ULTS** – Universal Lifeline Telephone Service provides discounted telephone access for customers meeting similar income guidelines as CARE. Contact your local telephone service provider for more information.

1-866-743-2273

Assistance with the CARE Program in English

Giúp xin chương trình CARE bằng tiếng Việt

CARE 華語協助專線

Ayuda con el programa CARE en español



**Pacific Gas and
Electric Company®**

**Solicitudes del Programa CARE para
Clientes Residenciales de Familias Individuales**



CARE Program

www.pge.com/care

Devuelva la solicitud llena a: P.O. Box 7979, San Francisco, CA 94120-7979

01-9077

Si tiene preguntas llame al: 1-866-PGE-CARE (743-2273) Fax: 415-973-6419

Rev. 06/01/05

INFORMACIÓN SOBRE EL PROGRAMA DE DESCUENTO CARE

El programa CARE ofrece un descuento del 20% en la cuenta mensual de gas y electricidad a los hogares que califican. (Si usted es un cliente del plan "Tiempo de Uso" y llena los requisitos, su descuento será igual al cargo mensual de su medidor.) El descuento y las pautas de elegibilidad fueron establecidas por la Comisión de Servicios Públicos de California y las mismas se actualizan en junio de cada año. Si llena los requisitos, su descuento aparecerá en el siguiente ciclo del estado de cuenta de Pacific Gas and Electric Company, una vez que hayamos recibido su solicitud llena y la misma sea verificada por PG&E. Pacific Gas and Electric Company se pondrá en contacto con usted, por correo, por lo menos cada dos años para verificar que continúa necesitando este programa.

REGLAS DEL PROGRAMA CARE

- La cuenta de Pacific Gas and Electric Company debe estar a su nombre.
- Debe vivir en la dirección donde se recibirá el descuento por lo menos la mitad del año (no aplica a segundos hogares)
- Es posible que no califique para el programa CARE si comparte su medidor (electric meter) con otra casa.
- No debe aparecer como dependiente, en la declaración de impuestos, de ninguna otra persona que no sea su cónyuge.
- El hogar del solicitante debe llenar la definición de bajos ingresos, tal y como se describe en esta solicitud
- Debe informar a Pacific Gas and Electric Company si su hogar ya no reúne los requisitos para el descuento del programa de CARE
- Los inquilinos con medidores "sub-medidos" que pertenecen a parques de casas móviles, apartamentos o muelles de botes, deben llenar otro formulario llamado "Solicitud del Programa CARE para Inquilinos de Instalaciones Residenciales Sub-Medidas". (Vea al propietario/administrador de su instalación para obtener el formulario 01-9285).

OTROS PROGRAMAS Y SERVICIOS PARA LOS QUE USTED PODRÍA CALIFICAR

- **FERA** – Programa de Ayuda Familiar para los Cargos Eléctricos. Este programa proporciona una reducción del precio eléctrico en la "Hilera 3" (131-200 por ciento de la tarifa base), para casas grandes con más de 3 personas de bajos a medianos ingresos. Nuestros clientes se pueden inscribir en el programa CARE o en el programa FERA, pero no en ambos. Llame al 1-800-PGE-5000 para más información.
- **LIHEAP** – Programa de Ayuda para el Pago de la Energía en los Hogares de Bajos Ingresos (LIHEAP). Este es un programa que brinda asistencia con el pago de sus cuentas, asistencia de emergencia para el pago de sus cuentas, y servicio de protección en contra de las inclemencias del tiempo. Para más información, llame al Departamento de Servicios y Desarrollo de la Comunidad (CSD) al 1-866-675-6623.
- **REACH** – Póngase en contacto con el Ejército de Salvación (Salvation Army) para recibir ayuda, en una sola ocasión, para el pago de sus cuentas eléctricas. Llámelos al 1-800-933-9677.
- **Facilidades de Pago** – Pacific Gas and Electric Company puede elaborar un programa de pagos en caso de que requiera más tiempo para pagar su cuenta. Llame al 1-800-PGE-5000 para más información.
- **Medical Baseline** – Brinda servicios, por medio del pago de las tarifas más bajas, a los clientes que tengan necesidades comprobadas. Llame al 1-800-PGE-5000 para más información.
- **Socios en la Energía** – Ofrece servicios gratuitos de orientación sobre la energía y sobre protección en contra de las inclemencias del tiempo a los clientes que llenen los requisitos. Llame al 1-800-989-9744 para más información.
- **Plan de Pagos Balanceados** – Comuníquese con Pacific Gas and Electric Company para investigar como puede uniformizar sus pagos, de modo que pueda hacer un presupuesto para el pago de sus costos energéticos. Llame al 1-800-PGE-5000 para más información.
- **ULTS** – La Línea Universal de Servicio Telefónico le brinda acceso telefónico, a precios de descuento, a aquellos clientes que reúnan requisitos similares a los del Programa CARE. Llame a su compañía local de teléfonos para más información.

1-866-743-2273

Assistance with the CARE Program in English

Giúp xin chương trình CARE bằng tiếng Việt

CARE 華語協助專線

Ayuda con el programa CARE en español



www.pge.com/care

1 PACIFIC GAS AND ELECTRIC COMPANY CUSTOMER INFORMATION: (please type or print)

Customer Account Number:

(This number is located on the first page of your PG&E bill)

Grid for Customer Account Number with a dash in the 11th position.

Name _____

As it appears on your energy bill

Home Address _____

Do NOT use a P.O. Box

City _____

CA Zip Code _____

Mailing Address _____

If different from the above address

City _____

CA Zip Code _____

Daytime Telephone Number

Please Include Area Code

Grid for Daytime Telephone Number with area code shaded.

Number of people living in your household

Grid for household members: Adults + Children = Total

2 HOUSEHOLD INCOME WORKSHEET: (please fill in circle next to all sources of your household's annual income)

- Wages or Salaries
Interest and/or Dividends from:
Savings Accounts, Stocks or Bonds, Retirement Accounts, Unemployment Benefits, Rental or Royalty Income
School Grants, Scholarships or other aid used for living expenses
Profit from self-employment (IRS form Schedule C, Line 29)
Disability payments, Workers compensation, Social Security, SSI, SSP, Pensions
Insurance Settlements, Legal Settlements, TANF (AFDC), Food stamps, Child support, Spousal support, Cash and/or other income

MAXIMUM HOUSEHOLD INCOME: (effective June 1, 2005 to May 31, 2006)

Your household's gross annual income may not exceed these CARE income guidelines:

Table with 6 columns: Number of Persons in Household (1 or 2, 3, 4, 5, 6) and Total Combined Annual Income (\$24,200, \$28,400, \$34,200, \$40,000, \$45,800). Note: Add \$5,800 for each additional household member.

Total Annual Household Income: \$ [] [] [] , [] [] [] []

3 DECLARATION: (please read carefully and sign below)

I state that the information I have provided in this application is true and correct. I agree to provide proof of income if asked. I agree to inform Pacific Gas and Electric Company if I no longer qualify to receive the discount. I understand that if I receive the discount without qualifying for it, I may be required to pay back the discount I received. I understand that Pacific Gas and Electric Company can share my information with other utilities or their agents to enroll me in their assistance programs.

X

Pacific Gas and Electric Company Customer Signature

fill in circle if guardian or power of attorney

Date



1 INFORMACIÓN DEL CLIENTE DE PACIFIC GAS AND ELECTRIC COMPANY: (por favor escriba a máquina o con letras de molde)

Número de cuenta del cliente:

(Su número de cuenta aparece en la primera página de la factura de PG&E)

Grid for account number with a dash in the last box.

Nombre

Tal y como aparece en la factura

Dirección del Hogar _____ Ciudad _____ CA Código Postal _____

No use P.O. Box

Dirección Postal, si tiene _____ Ciudad _____ CA Código Postal _____

Llene solo si su dirección postal es diferente a la que aparece arriba

Número telefónico durante el día

Por favor incluya el código de área

Grid for phone number with area code and main number boxes.

Número de Personas que viven en su hogar

Grid for number of adults, plus sign, grid for number of children, equals sign, grid for total.

Adultos

Niños

Total

2 HOJA DE TRABAJO SOBRE LOS INGRESOS DEL HOGAR: (Por favor rellene los círculos junto a todas las fuentes de ingresos anuales de su hogar)

- Sueldos y/o Salarios, Jornales Intereses y/o Dividendos de:
○ Cuentas de Ahorros,
○ Acciones y Bonos, o
○ Cuentas de Jubilación
○ Pagos por Desempleo
○ Ingresos provenientes de Rentas o Regalías
○ Donaciones Escolares, Becas u Otros
○ Tipos de Ayuda para Gastos de Subsistencia del hogar
○ Ganancias de su Propio Negocio (Formulario de IRS, Schedule C, Línea 29)
○ Pagos por Incapacidad
○ Pagos por Compensación al Trabajador
○ Pagos del Seguro Social, SSI, SSP
○ Pagos de Pensiones
○ Pagos de Reclamaciones del Seguro
○ Pagos de Reclamaciones Legales
○ Pagos de TANF (AFDC)
○ Pagos por medio de Estampillas de Alimentos
○ Pagos por Pensión Alimenticia a Hijos
○ Pagos por Pensión Conyugal
○ Pagos en Efectivo y/u Otros Ingresos

INGRESOS MÁXIMOS DEL HOGAR: (efectivo Junio 1, 2005 hasta Mayo 31, 2006)

Los ingresos anuales brutos de su hogar no deben exceder las Pautas de Ingresos de CARE especificadas a continuación:

Table with 6 columns for household size (1-6) and a 7th column for additional income. Values range from \$24,200 to \$45,800.

Ingresos Totales Anuales del Hogar: \$ [] [] , [] [] []

3 DECLARACIÓN: (Por favor lea detenidamente y firme abajo)

Declaro que la información proporcionada en esta solicitud es correcta y verdadera. Estoy de acuerdo en proveer pruebas de mis ingresos, de ser necesario. Estoy de acuerdo en informar a Pacific Gas and Electric Company si mi situación financiera cambia y ya no califico para recibir dicho descuento. Comprendo que, si recibo el descuento sin calificar para el mismo, se me podría pedir que devuelva el monto total del descuento recibido. Comprendo que Pacific Gas and Electric Company podría compartir esta información con otras compañías de suministro de energía o sus agentes, para suscribirme en sus programas de ayuda.

X

Firma del Cliente de Pacific Gas and Electric Company

○ Marque aquí si es tutor o tiene carta de poder

Fecha



Pacific Gas and Electric Company
San Francisco, California

Cancelling

Revised
Revised

Cal. P.U.C. Sheet No.
Cal. P.U.C. Sheet No.

23146-G
22430-G

PACIFIC GAS AND ELECTRIC COMPANY
CALIFORNIA ALTERNATE RATES FOR ENERGY PROGRAM
APPLICATION FOR TENANTS OF SUB-METERED FACILITIES
FORM NO. 01-9285 (REV 6/05)
(ATTACHED)

(T)

Advice Letter No. 2631-G
Decision No. 89-07-062,89-09-044

Issued by
Karen A. Tomcala
Vice President
Regulatory Relations

Date Filed May 13, 2005
Effective June 1, 2005
Resolution No. E-3524

100368



**Pacific Gas and
Electric Company®**

**CARE Program Application for
Tenants of Sub-Metered Residential Facilities**



CARE Program

01-9285

Rev. 06/01/05

www.pge.com/care

Mail Completed Application to: P.O. Box 7979, San Francisco, CA 94120-7979

For Questions Call: 1-866-PGE-CARE (743-2273) Fax: 415-973-6419

ABOUT THE CARE DISCOUNT PROGRAM

The CARE program provides a 20% discount on the utility bill of qualifying households. The discount and eligibility criteria were established by the California Public Utilities Commission. If you qualify, Pacific Gas and Electric Company will notify your manager or landlord of your eligibility after your completed application has been received and verified. Pacific Gas and Electric Company will contact you at least every year to verify your continued need for the program.

CARE PROGRAM RULES

- The energy bill from your landlord must be in your name.
- You must live at the address where the discount will be received more than half of the year (not for second homes).
- You may not qualify for a CARE discount if you share energy meter(s) with another home.
- You may not be claimed as a dependent on another person's tax return other than your spouse.
- Your household must meet the program definition of low-income as described in this application packet.
- You must notify Pacific Gas and Electric Company if your household no longer qualifies for the CARE discount.

OTHER PROGRAMS AND SERVICES YOU MAY QUALIFY FOR

- **FERA** – Family Electric Rate Assistance Program. Provides a Tier 3 (131-200 percent of baseline) electric rate reduction for large households of 3 or more persons with low to middle income. Customer may be enrolled in either the FERA Program or the CARE Program, but not both. Call 1-800-PGE-5000 for more information.
- **LIHEAP** - Low Income Home Energy Assistance Program. Provides bill payment assistance, emergency bill assistance and weatherization services. Call the Department of Community Services and Development (CSD) at 1-866-675-6623 for more information.
- **Medical Baseline** - Provides services at the lowest rates to customers with documented needs. Call 1-800-PGE-5000 for more information.
- **Energy Partners** - Free energy education and weatherization to income-qualified customers. Call 1-800-989-9744 for more information.
- **ULTS** – Universal Lifeline Telephone Service provides discounted telephone access for customers meeting similar income guidelines as CARE. Contact your local telephone service provider for more information.

1-866-743-2273

Assistance with the CARE Program in English

Giúp xin chương trình CARE bằng tiếng Việt

CARE 華語協助專線

Ayuda con el programa CARE en español



**Pacific Gas and
Electric Company®**

Solicitudes del Programa CARE para

Inquilinos de Instalaciones Residenciales "Sub-medidas"



Devuelva la solicitud llena a: P.O. Box 7979, San Francisco, CA 94120-7979

Si tiene preguntas llame al: 1-866-PGE-CARE (743-2273) Fax: 415-973-6419

01-9285

Rev. 06/01/05

www.pge.com/care

INFORMACIÓN SOBRE EL PROGRAMA DE DESCUENTO CARE

El programa CARE ofrece un descuento del 20% en la cuenta mensual de gas y electricidad a los hogares que califican. El descuento y las pautas de elegibilidad fueron establecidas por la Comisión de Servicios Públicos de California. Si llena los requisitos, Pacific Gas and Electric Company le avisará a su administrador o propietario que ha sido certificado, una vez que hayamos recibido su solicitud llena y la misma sea verificada por PG&E. Pacific Gas and Electric Company se pondrá en contacto con usted, por correo, por lo menos cada año para verificar que continúa necesitando este programa.

REGLAS DEL PROGRAMA CARE

- La cuenta de energía del administrador de su parque debe estar a su nombre.
- Debe vivir en la dirección donde se recibirá el descuento por lo menos la mitad del año (no aplica a segundos hogares)
- Es posible que no califique para el programa CARE si comparte su medidor (electric meter) con otra casa.
- No debe aparecer como dependiente, en la declaración de impuestos, de ninguna otra persona que no sea su cónyuge.
- El hogar del solicitante debe llenar la definición de bajos ingresos, tal y como se describe en esta solicitud.
- Debe informar a Pacific Gas and Electric Company si su hogar ya no reúne los requisitos para el descuento del programa de CARE

OTROS PROGRAMAS Y SERVICIOS PARA LOS QUE USTED PODRÍA CALIFICAR

- **FERA** – Programa de Ayuda Familiar para los Cargos Eléctricos. Este programa proporciona una reducción del precio eléctrico en la "Hilera 3" (131-200 por ciento de la tarifa base), para casas grandes con más de 3 personas de bajos a medianos ingresos. Nuestros clientes se pueden inscribir en el programa CARE o en el programa FERA, pero no en ambos. Llame al 1-800-PGE-5000 para más información.
- **LIHEAP** – Programa de Ayuda para el Pago de la Energía en los Hogares de Bajos Ingresos (LIHEAP). Este es un programa que brinda asistencia con el pago de sus cuentas, asistencia de emergencia para el pago de sus cuentas, y servicio de protección en contra de las inclemencias del tiempo. Para más información, llame al Departamento de Servicios y Desarrollo de la Comunidad (CSD) al 1-866-675-6623.
- **Medical Baseline** – Brinda servicios, por medio del pago de las tarifas más bajas, a los clientes que tengan necesidades comprobadas. Llame al 1-800-PGE-5000 para más información.
- **Socios en la Energía** – Ofrece servicios gratuitos de orientación sobre la energía y sobre protección en contra de las inclemencias del tiempo a los clientes que llenen los requisitos. Llame al 1-800-989-9744 para más información.
- **ULTS** – La Línea Universal de Servicio Telefónico le brinda acceso telefónico, a precios de descuento, a aquellos clientes que reúnan requisitos similares a los del Programa CARE. Llame a su compañía local de teléfonos para más información.

1-866-743-2273

Assistance with the CARE Program in English

Giúp xin chương trình CARE bằng tiếng Việt

CARE 華語協助專線

Ayuda con el programa CARE en español



www.pge.com/care

Devuelva la solicitud llena a: P.O. Box 7979, San Francisco, CA 94120-7979

01-9285

Si tiene preguntas llame al: 1-866-PGE-CARE (743-2273) Fax: 415-973-6419

Rev. 06/01/05

1 INFORMACIÓN DEL ADMINISTRADOR O PROPIETARIO: (por favor escriba a máquina o con letras de molde)

Nombre del Administrador o Propietario _____ Teléfono

Dirección postal _____ Ciudad _____ CA Código Postal _____

Nombre que aparece en la cuenta de energía _____

Número de Cuenta Electricidad Gas

Dirección donde se da el servicio _____ Ciudad _____ CA Código postal _____

Situación del solicitante NUEVO CANCELÓ EL PROGRAMA SE RECERTIFICÓ SE MUDÓ A OTRO ESPACIO

2 INFORMACIÓN DEL INQUILINO: (por favor escriba a máquina o con letras de molde)

Nombre _____
Tal y como aparece en la factura

Dirección del hogar _____ Ciudad _____ CA Código postal _____
No use P.O. Box

Dirección Postal, si tiene _____ Ciudad _____ CA Código postal _____
Llene solo si su dirección postal es diferente a la que aparece arriba

Número telefónico durante el día Número de personas que viven en el hogar + =
Por favor incluya el código de área Adultos Niños Total

3 HOJA DE TRABAJO SOBRE LOS INGRESOS DEL HOGAR: (Por favor llene los círculos junto a todas las fuentes de ingresos anuales de su hogar)

- Sueldos y/o Salarios, Jornales Intereses y/o Dividendos de:
 - Cuentas de Ahorros,
 - Acciones y Bonos, o
 - Cuentas de Jubilación
- Pagos por Desempleo
- Ingresos provenientes de Rentas o Regalías
- Donaciones Escolares, Becas u Otros Tipos de Ayuda para Gastos de Subsistencia del hogar
- Ganancias de su Propio Negocio (Formulario de IRS, Schedule C, Línea 29)
- Pagos por Incapacidad
- Pagos por Compensación al Trabajador
- Pagos del Seguro Social, SSI, SSP
- Pagos de Pensiones
- Pagos de Reclamaciones del Seguro
- Pagos de Reclamaciones Legales
- Pagos de TANF (AFDC)
- Pagos por medio de Estampillas de Alimentos
- Pagos por Pensión Alimenticia a Hijos
- Pagos por Pensión Conyugal
- Pagos en Efectivo y/u Otros Ingresos

INGRESOS MÁXIMOS DEL HOGAR: (efectivo Junio 1, 2005 hasta Mayo 31, 2006)

Los ingresos anuales brutos de su hogar no deben exceder las Pautas de Ingresos de CARE especificadas a continuación:

Número de Personas en el Hogar	1 o 2	3	4	5	6	Agregue \$5,800 anual por cada personal adicional en el hogar
Ingresos Anuales	\$24,200	\$28,400	\$34,200	\$40,000	\$45,800	

Ingresos Totales Anuales del Hogar: \$

4 DECLARACIÓN: (Por favor lea detenidamente y firme abajo)

Declaro que la información proporcionada en esta solicitud es correcta y verdadera. Estoy de acuerdo en proveer pruebas de mis ingresos, de ser necesario. Estoy de acuerdo en informar a Pacific Gas and Electric Company si mi situación financiera cambia y ya no califico para recibir dicho descuento. Comprendo que, si recibo el descuento sin calificar para el mismo, se me podría pedir que devuelva el monto total del descuento recibido. Comprendo que Pacific Gas and Electric Company podría compartir esta información con otras compañías de suministro de energía o sus agentes, para suscribirme en sus programas de ayuda.

X _____
Firma del Cliente de Pacific Gas and Electric Company Marque aquí si es tutor o tiene carta poder _____ Fecha _____



Pacific Gas and Electric Company
San Francisco, California

Cancelling

Revised
Revised

Cal. P.U.C. Sheet No.
Cal. P.U.C. Sheet No.

23147-G
22431-G

PACIFIC GAS AND ELECTRIC COMPANY
CALIFORNIA ALTERNATE RATES FOR ENERGY PROGRAM
INCOME GUIDELINES
FORM NO. 62-1477 (REV 6/05)
(ATTACHED)

(T)

Advice Letter No. 2631-G
Decision No. 89-07-062,89-09-044

Issued by
Karen A. Tomcala
Vice President
Regulatory Relations

Date Filed May 13, 2005
Effective June 1, 2005
Resolution No. E-3524

100369



CALIFORNIA ALTERNATE RATES FOR ENERGY

TARIFAS ALTERNAS DE ENERGÍA DE CALIFORNIA

INCOME GUIDELINES (effective June 1, 2005 to May 31, 2006)

PAUTAS DE INGRESOS (efectivo Junio 1, 2005 hasta Mayo 31, 2006)

Your household's gross income must not exceed the CARE Income Guidelines

Los ingresos brutos de su hogar no deben exceder las Pautas de Ingresos de CARE.

Size of Household	Yearly
1 or 2	\$24,200
3	\$28,400
4	\$34,200
5	\$40,000
6	\$45,800

Add **\$5,800** for each additional household member

Número de Personas en el Hogar	Anual
1 or 2	\$24,200
3	\$28,400
4	\$34,200
5	\$40,000
6	\$45,800

Agregue **\$5,800** anual por cada personal adicional en el hogar

Definition of Income:

Definición de Ingresos:

All revenues, from all household members, from whatever source derived, whether taxable or non-taxable, including, but not limited to:

Todos los ingresos de todas las personas que viven en su hogar, derivadas de todas las fuentes, tanto si se pagan impuestos sobre las mismas o no, y que incluyen, pero no se limitan a:

- Wages or Salaries
- Interest and/or Dividends from:
 - Savings Accounts,
 - Stocks or Bonds, or
 - Retirement Accounts
- Unemployment Benefits
- Rental or Royalty Income
- School Grants, Scholarships or other aid used for living expenses
- Profit from self-employment (IRS from Schedule C, Line 29)
- Disability payments
- Workers compensation
- Social security, SSI, SSP
- Pensions
- Insurance settlements
- Legal Settlements
- TANF (AFDC)
- Food stamps
- Child support
- Spousal support
- Cash and/or other income

- Sueldos y/o Salarios, Jornales
- Intereses y/o Dividendos de:
 - Cuentas de Ahorros,
 - Acciones o Bonos, o
 - Cuentas de Jubilación
- Pagos por Desempleo
- Ingresos provenientes de Rentas o Regalías
- Donaciones Escolares, Becas u Otros Tipos de Ayuda para Gastos de Subsistencia del hogar
- Ganancias de su Propio Negocio (Formulario de IRS, Schedule C, Línea 29)
- Pagos por Incapacidad
- Pagos por Compensación al Trabajador
- Pagos del Seguro Social, SSI, SSP
- Pagos de Pensiones
- Pagos de Reclamaciones del Seguro
- Pagos de Reclamaciones Legales
- Pagos de TANF (AFDC)
- Pagos por medio de Estampillas de Alimentos
- Pagos por Pensión Alimenticia a Hijos
- Pagos por Pensión Conyugal
- Pagos en Efectivo y/u Otros Ingresos

1-866-743-2273

Assistance with the CARE Program in English
Giúp xin chŭÖng trình CARE bŕng ti%ng ViĒt

CARE 華語協助專線

Ayuda con el programa CARE en español



收入標準(有效期由 2005 年 6 月 1 日至 2006 年 5 月 31 日)

您家庭的總收入不可超過 CARE 計劃的收入標準

家庭人數	每年收入
1 或 2	\$24,200
3	\$28,400
4	\$34,200
5	\$40,000
6	\$45,800

每增加一人, 增加 \$5,800

收入定義:

居住在您家中所有人、來自所有途徑, 無論是要繳稅或不需要繳稅全部收入, 其中包括, 但不局限於:

- 工資
- 利息/或股息, 來源于:
 - 儲蓄戶口、
 - 股票或債券, 或
 - 退休帳戶
- 失業福利
- 租金或版權收入
- 學校助學金、獎學金或其他生活開支補助
- 自僱者的總收入 (IRS 表格 C 第 29 行)
- 傷病補助金
- 勞工賠償
- 安全保險補助金、SSI、SSP
- 退休金
- 保險訴訟所得的金錢
- 法律訴訟所得的金錢
- 對需協助的家庭之臨時補助 TANF (AFDC)
- 食物券
- 給孩童的資助

- 給配偶的資助
- 現金和 / 或其他收入



Cấp mức thu nhập (Có hiệu lực từ ngày 1 tháng Sáu, 2005 tới ngày 31 tháng Năm, 2006)

Mức thu nhập CARE dưới đây:

SỐ NGƯỜI trong Gia đình	Hàng Năm
1 hay 2	\$24,200
3	\$28,400
4	\$34,200
5	\$40,000
6	\$45,800

Cộng \$5,800 cho mỗi người thêm sau đó

Định Nghĩa Thu Nhập:

“Tổng Thu Nhập Toàn Gia đình” có nghĩa là tất cả mọi thu nhập của mọi người trong nhà, có thể bất cứ nguồn nào, dù phải đóng thuế hay không đóng thuế, bao gồm những không phải chi phí hân vào:

- Tiền Lương
- Tiền lãi từ:
 - Các Trúồng Mọc Tiết Kiệm,
 - Các Chúồng Khoản hay Trái Phiếu, hay
 - Trúồng Mọc Hữu Trí
- Tiền Thắt Nghịch
- Thu nhập do Cho Thuê Nhà hay Tiền Bán Quyển
- Tiền Hết Bông hay các thủ Tiền Trú Giúp cho người Sống hằng ngày
- Thu nhập từ việc Làm Riêng (IRS mẫu Schedule C, Dòng 29)
- Tiền cho Người Có Khuyết Tật
- Tiền Bồi Thúống Tai Nạn Lao động
- Tiền An Sinh Xã Hội (SSI, SSP)
- Tiền Hữu Bông
- Tiền Bảo Hiểm Bồi Thúống
- Tiền Bồi Thúống Thử Kiệm
- TANF (AFDC) (trú cấp gia đình nghèo có con nhỏ)
- Tiền Phiếu Thực Phẩm
- Tiền Cấp Dúống Con Cái
- Tiền Cấp Dúống Vú/Chúống
- Tiền Mút và/hay Thu Nhập Khác



Pacific Gas and Electric Company
San Francisco, California

Cancelling

Revised
Revised

Cal. P.U.C. Sheet No.
Cal. P.U.C. Sheet No.

23148-G
22432-G

PACIFIC GAS AND ELECTRIC COMPANY

**CALIFORNIA ALTERNATE RATES FOR ENERGY PROGRAM
POSTAGE-PAID APPLICATION
FORM NO. 03-006 (6/05)
(ATTACHED)**

(T)

Advice Letter No. 2631-G
Decision No. 89-07-062,89-09-044

Issued by
Karen A. Tomcala
Vice President
Regulatory Relations

Date Filed May 13, 2005
Effective June 1, 2005
Resolution No. E-3524

100370



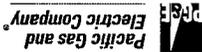
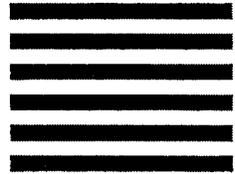
NO POSTAGE
NECESSARY
IF MAILED
IN THE
UNITED STATES

BUSINESS REPLY MAIL

FIRST-CLASS MAIL PERMIT NO. 27109 SAN FRANCISCO, CA

POSTAGE WILL BE PAID BY ADDRESSEE

**PACIFIC GAS AND ELECTRIC COMPANY
CARE PROGRAM
PO BOX 7979
SAN FRANCISCO, CA 94120-9445**



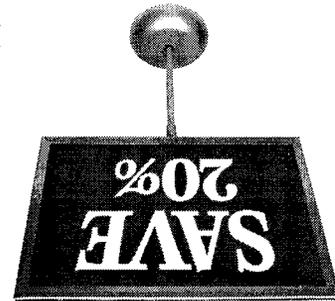
Bạn có thể là một trong hàng
ngàn gia đình
tiết kiệm được 20% trên hóa
đơn hàng tháng của PG&E
Hãy điền vào tờ đơn giản dị của
Chương Trình CARE ngay.

您可能就是幸運家庭之一
每月節省
太平洋煤電費 20%
請立刻填妥
CARE 計劃申請表格

El suyo puede ser uno de
los miles de hogares que
ahorran 20% todos los meses
en su cuenta de PG&E
Complete hoy mismo esta simple
solicitud del Programa CARE

Fill out this easy CARE Program application today.

You could be one of the thousands
of households to
**Save 20% Every Month
on Your PG&E Bill**



You could be one of the thousands
of households to
**Save 20% Every Month
on Your PG&E Bill**
Fill out this easy CARE Program application today.

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Hãy điền vào tờ đơn giản dị của
Chương Trình CARE ngay.





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Advice Letter No. 2631-G
Decision No.

Issued by
Karen A. Tomcala
Vice President
Regulatory Relations

Date Filed May 13, 2005
Effective June 1, 2005
Resolution No. _____



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RULE 19.1—CALIFORNIA ALTERNATE RATES FOR ENERGY FOR INDIVIDUAL CUSTOMERS AND SUBMETERED TENANTS OF MASTER-METERED CUSTOMERS

(Continued)

B. ELIGIBILITY (Cont'd.)

Total gross annual income for all persons in the applicants household may not exceed the following:

<u>Number of Persons in Household</u>	<u>Maximum Annual Household Income</u>
1-2	\$24,200 (I)
3	\$28,400
4	\$34,200
5	\$40,000
6	\$45,800
Each additional member, add:	\$ 5,800 (I)

C. CERTIFICATION

1. Individually metered PG&E customers, submetered tenants of master-metered PG&E customers, and other qualifying applicants in individually metered residential dwelling units:

All applicants for certification must fill out and provide to PG&E Application Form No. 01-9077.

2. Submetered tenants of master-metered PG&E Customers:

Submetered tenants of master-metered Customers will submit Application Form No. 01-9285 to PG&E, including their tenant's apartment/unit number and PG&E account number. PG&E will notify the master-metered Customer of the tenant's certification. The master-metered Customer, not PG&E, is responsible for extending CARE discounts to tenants certified to receive them.

3. Self-certification:

Self-certification will be used to determine income eligibility for the CARE program. Customers must sign a statement upon application indicating that PG&E may verify the Customer's eligibility at any time. If verification establishes that the Customer is ineligible, the Customer will be removed from the program and PG&E may render corrective billings.

(Continued)



**RULE 19.2—CALIFORNIA ALTERNATE RATES FOR ENERGY
FOR NONPROFIT GROUP-LIVING FACILITIES**

(Continued)

B. ELIGIBILITY (Cont'd.)

3. The facility must also be licensed, or otherwise prove to PG&E's satisfaction, by the appropriate state agency. A homeless shelter is required to provide a copy of its municipal or county conditional use permit.
4. The total gross income for all persons residing in each household at a Facility may not exceed the following:

<u>Number of Persons in Household</u>	<u>Maximum Annual Household Income</u>
---------------------------------------	--

1-2	\$24,200 (I)
3	\$28,400
4	\$34,200
5	\$40,000
6	\$45,800
Each additional member, add:	\$ 5,800 (I)

(Continued)



**RULE 19.3—CALIFORNIA ALTERNATE RATES FOR ENERGY
FOR QUALIFIED AGRICULTURAL EMPLOYEE HOUSING FACILITIES**

(Continued)

B. ELIGIBILITY (Cont'd.)

2. PRIVATELY-OWNED EMPLOYEE HOUSING FACILITIES

- a. Privately-Owned Employee Housing Facilities must provide proof of current compliance with Part 1 of Division 13 of the Health and Safety Code. Compliance must take the form of having a permit issued by the State Department of Housing and Community Development pursuant to Health and Safety Code §17030.
- b. For Privately-Owned Employee Housing Facilities, 100 percent of the energy supplied to the facility's premises must be used for residential purposes.

3. AGRICULTURAL EMPLOYEE HOUSING FACILITIES

- a. Agricultural Employee Housing Facilities must provide a letter of determination by the Internal Revenue Service (IRS) that the corporation is tax-exempt due to its non-profit status under IRS Code §501(c)(3) or proof that it is tax-exempt due to its non-profit status from the State of California. Additionally, the Facility must provide a copy of letter from the Assessor in the county where the Facility is located stating that the housing is exempt from local property taxes.
 - b. For Agricultural Employee Housing Facilities, 100 percent of the energy supplied to the facility's premises must be used for residential purposes, if each of the dwelling areas in the facility is individually metered. If a master meter serves the facility, not less than 70 percent of the energy supplied to the facility's premises must be used for residential purposes.
4. The total gross income for all persons residing in each household at a Facility may not exceed the following:

<u>Number of Persons in Household</u>	<u>Maximum Annual Household Income</u>
1-2	\$24,200 (I)
3	\$28,400
4	\$34,200
5	\$40,000
6	\$45,800
Each additional member, add:	\$ 5,800 (I)

(Continued)



Pacific Gas and Electric Company
San Francisco, California

Canceling

Revised
Revised

Cal. P.U.C. Sheet No.
Cal. P.U.C. Sheet No.

23425-E
21623-E

PACIFIC GAS AND ELECTRIC COMPANY

**CALIFORNIA ALTERNATE RATES FOR ENERGY PROGRAM
APPLICATION FOR RESIDENTIAL SINGLE-FAMILY CUSTOMERS
FORM NO. 01-9077 (REV 6/05)
(ATTACHED)**

(T)

Advice Letter No. 2662-G
Decision No. 89-07-062,89-09-044

Issued by
Karen A. Tomcala
Vice President
Regulatory Relations

Date Filed May 13, 2005
Effective June 1, 2005
Resolution No. E-3524

100377



**Pacific Gas and
Electric Company®**

**CARE Program Application for
Residential Single-Family Customers**



CARE Program

www.pge.com/care

Mail Completed Application to: P.O. Box 7979, San Francisco, CA 94120-7979

01-9077

For Questions Call: 1-866-PGE-CARE (743-2273) Fax: 415-973-6419

Rev. 06/01/05

ABOUT THE CARE DISCOUNT PROGRAM

The CARE Program provides a 20% discount on the utility bill of qualifying households. (If you are a qualifying Time-of-Use customer, your discount will be equal to your monthly meter charge.) The discount and eligibility criteria were established by the California Public Utilities Commission and are updated each June. If you qualify, your discount will appear after your next Pacific Gas and Electric Company bill cycle once your completed application has been received and verified by Pacific Gas and Electric Company. Pacific Gas and Electric Company will contact you by mail at least every two years to verify your continued need for the program.

CARE PROGRAM RULES

- The Pacific Gas and Electric Company bill must be in your name.
- You must live at the address where the discount will be received more than half of the year (not for second homes).
- You may not qualify for a CARE discount if you share energy meter(s) with another home.
- You may not be claimed as a dependent on another person's tax return other than your spouse.
- Your household must meet the program definition of low-income as described in this application packet.
- You must notify Pacific Gas and Electric Company if your household no longer qualifies for the CARE discount.
- Tenants of sub-metered mobile home parks, apartments and marinas must use the "CARE Program Application for Tenants of Sub-Metered Facilities". (See Landlord / Manager for form 01-9285)

OTHER PROGRAMS AND SERVICES YOU MAY QUALIFY FOR

- **FERA** – Family Electric Rate Assistance Program. Provides a Tier 3 (131-200 percent of baseline) electric rate reduction for large households of 3 or more persons with low to middle income. Customer may be enrolled in either the FERA Program or the CARE Program, but not both. Call 1-800-PGE-5000 for more information.
- **LIHEAP** - Low Income Home Energy Assistance Program. Provides bill payment assistance, emergency bill assistance and weatherization services. Call the Department of Community Services and Development (CSD) at 1-866-675-6623 for more information.
- **REACH** – Contact the Salvation Army for one-time assistance in paying your bills. Call the Salvation Army at 1-800-933-9677 for more information.
- **Payment Arrangements** - Pacific Gas and Electric Company can work out a payment schedule for you if you need more time paying your bill. Call 1-800-PGE-5000 for more information.
- **Medical Baseline** - Provides services at the lowest rates to customers with documented needs. Call 1-800-PGE-5000 for more information.
- **Energy Partners** - Free energy education and weatherization to income-qualified customers. Call 1-800-989-9744 for more information.
- **Balanced Payment Plan** – Contact Pacific Gas and Electric Company Customer Services to see how your monthly payments can be evened out to allow you to budget your energy costs. Call 1-800-PGE-5000 for more information.
- **ULTS** – Universal Lifeline Telephone Service provides discounted telephone access for customers meeting similar income guidelines as CARE. Contact your local telephone service provider for more information.

1-866-743-2273

Assistance with the CARE Program in English

Giúp xin chương trình CARE bằng tiếng Việt

CARE 華語協助專線

Ayuda con el programa CARE en español



**Pacific Gas and
Electric Company®**

**Solicitudes del Programa CARE para
Clientes Residenciales de Familias Individuales**



CARE Program

www.pge.com/care

Devuelva la solicitud llena a: P.O. Box 7979, San Francisco, CA 94120-7979

01-9077

Si tiene preguntas llame al: 1-866-PGE-CARE (743-2273) Fax: 415-973-6419

Rev. 06/01/05

INFORMACIÓN SOBRE EL PROGRAMA DE DESCUENTO CARE

El programa CARE ofrece un descuento del 20% en la cuenta mensual de gas y electricidad a los hogares que califican. (Si usted es un cliente del plan "Tiempo de Uso" y llena los requisitos, su descuento será igual al cargo mensual de su medidor.) El descuento y las pautas de elegibilidad fueron establecidas por la Comisión de Servicios Públicos de California y las mismas se actualizan en junio de cada año. Si llena los requisitos, su descuento aparecerá en el siguiente ciclo del estado de cuenta de Pacific Gas and Electric Company, una vez que hayamos recibido su solicitud llena y la misma sea verificada por PG&E. Pacific Gas and Electric Company se pondrá en contacto con usted, por correo, por lo menos cada dos años para verificar que continúa necesitando este programa.

REGLAS DEL PROGRAMA CARE

- La cuenta de Pacific Gas and Electric Company debe estar a su nombre.
- Debe vivir en la dirección donde se recibirá el descuento por lo menos la mitad del año (no aplica a segundos hogares)
- Es posible que no califique para el programa CARE si comparte su medidor (electric meter) con otra casa.
- No debe aparecer como dependiente, en la declaración de impuestos, de ninguna otra persona que no sea su cónyuge.
- El hogar del solicitante debe llenar la definición de bajos ingresos, tal y como se describe en esta solicitud
- Debe informar a Pacific Gas and Electric Company si su hogar ya no reúne los requisitos para el descuento del programa de CARE
- Los inquilinos con medidores "sub-medidos" que pertenecen a parques de casas móviles, apartamentos o muelles de botes, deben llenar otro formulario llamado "Solicitud del Programa CARE para Inquilinos de Instalaciones Residenciales Sub-Medidas". (Vea al propietario/administrador de su instalación para obtener el formulario 01-9285).

OTROS PROGRAMAS Y SERVICIOS PARA LOS QUE USTED PODRÍA CALIFICAR

- **FERA** – Programa de Ayuda Familiar para los Cargos Eléctricos. Este programa proporciona una reducción del precio eléctrico en la "Hilera 3" (131-200 por ciento de la tarifa base), para casas grandes con mas de 3 personas de bajos a medianos ingresos. Nuestros clientes se pueden inscribir en el programa CARE o en el programa FERA, pero no en ambos. Llame al 1-800-PGE-5000 para mas información.
- **LIHEAP** – Programa de Ayuda para el Pago de la Energía en los Hogares de Bajos Ingresos (LIHEAP). Este es un programa que brinda asistencia con el pago de sus cuentas, asistencia de emergencia para el pago de sus cuentas, y servicio de protección en contra de las inclemencias del tiempo. Para mas información, llame al Departamento de Servicios y Desarrollo de la Comunidad (CSD) al 1-866-675-6623.
- **REACH** – Póngase en contacto con el Ejército de Salvación (Salvation Army) para recibir ayuda, en una sola ocasión, para el pago de sus cuentas eléctricas. Llámelos al 1-800-933-9677.
- **Facilidades de Pago** – Pacific Gas and Electric Company puede elaborar un programa de pagos en caso de que requiera mas tiempo para pagar su cuenta. Llame al 1-800-PGE-5000 para mas información.
- **Medical Baseline** – Brinda servicios, por medio del pago de las tarifas mas bajas, a los clientes que tengan necesidades comprobadas. Llame al 1-800-PGE-5000 para mas información.
- **Socios en la Energía** – Ofrece servicios gratuitos de orientación sobre la energía y sobre protección en contra de las inclemencias del tiempo a los clientes que llenen los requisitos. Llame al 1-800-989-9744 para mas información.
- **Plan de Pagos Balanceados** – Comuníquese con Pacific Gas and Electric Company para investigar como puede uniformizar sus pagos, de modo que pueda hacer un presupuesto para el pago de sus costos energéticos. Llame al 1-800-PGE-5000 para mas información.
- **ULTS** – La Línea Universal de Servicio Telefónico le brinda acceso telefónico, a precios de descuento, a aquellos clientes que reúnan requisitos similares a los del Programa CARE. Llame a su compañía local de teléfonos para mas información.

1-866-743-2273

Assistance with the CARE Program in English

Giúp xin chương trình CARE bằng tiếng Việt

CARE 華語協助專線

Ayuda con el programa CARE en español



1 PACIFIC GAS AND ELECTRIC COMPANY CUSTOMER INFORMATION: (please type or print)

Customer Account Number:

Grid for Customer Account Number with a dash separator

(This number is located on the first page of your PG&E bill)

Name

As it appears on your energy bill

Home Address

City

CA Zip Code

Do NOT use a P.O. Box

Mailing Address

City

CA Zip Code

If different from the above address

Daytime Telephone Number

Please Include Area Code

Grid for Daytime Telephone Number with area code separator

Number of people living in your household

Grid for Number of people living in your household: Adults + Children = Total

Adults

Children

Total

2 HOUSEHOLD INCOME WORKSHEET: (please fill in circle next to all sources of your household's annual income)

- Wages or Salaries
- Interest and/or Dividends from:
 - Savings Accounts,
 - Stocks or Bonds, or
 - Retirement Accounts
- Unemployment Benefits
- Rental or Royalty Income
- School Grants, Scholarships or other aid used for living expenses
- Profit from self-employment (IRS form Schedule C, Line 29)
- Disability payments
- Workers compensation
- Social Security, SSI, SSP
- Pensions
- Insurance Settlements
- Legal Settlements
- TANF (AFDC)
- Food stamps
- Child support
- Spousal support
- Cash and/or other income

MAXIMUM HOUSEHOLD INCOME: (effective June 1, 2005 to May 31, 2006)

Your household's gross annual income may not exceed these CARE income guidelines:

Number of Persons in Household	1 or 2	3	4	5	6	Add \$5,800 for each additional household member
Total Combined Annual Income	\$24,200	\$28,400	\$34,200	\$40,000	\$45,800	

Total Annual Household Income: \$ [Grid]

3 DECLARATION: (please read carefully and sign below)

I state that the information I have provided in this application is true and correct. I agree to provide proof of income if asked. I agree to inform Pacific Gas and Electric Company if I no longer qualify to receive the discount. I understand that if I receive the discount without qualifying for it, I may be required to pay back the discount I received. I understand that Pacific Gas and Electric Company can share my information with other utilities or their agents to enroll me in their assistance programs.

X

Pacific Gas and Electric Company Customer Signature

fill in circle if guardian or power of attorney

Date



Pacific Gas and Electric Company
San Francisco, California

Cancelling

Revised
Revised

Cal. P.U.C. Sheet No.
Cal. P.U.C. Sheet No.

23426-E
21624-E

PACIFIC GAS AND ELECTRIC COMPANY

CALIFORNIA ALTERNATE RATES FOR ENERGY PROGRAM
APPLICATION FOR TENANTS OF SUB-METERED FACILITIES
FORM NO. 01-9285 (REV 6/05)
(ATTACHED)

(T)

Advice Letter No. 2662-G
Decision No. 89-07-062,89-09-044

Issued by
Karen A. Tomcala
Vice President
Regulatory Relations

Date Filed May 13, 2005
Effective June 1, 2005
Resolution No. E-3524

100378



**Pacific Gas and
Electric Company[®]**

**CARE Program Application for
Tenants of Sub-Metered Residential Facilities**



CARE Program

01-9285

Rev. 06/01/05

www.pge.com/care

Mail Completed Application to: P.O. Box 7979, San Francisco, CA 94120-7979

For Questions Call: 1-866-PGE-CARE (743-2273) Fax: 415-973-6419

ABOUT THE CARE DISCOUNT PROGRAM

The CARE program provides a 20% discount on the utility bill of qualifying households. The discount and eligibility criteria were established by the California Public Utilities Commission. If you qualify, Pacific Gas and Electric Company will notify your manager or landlord of your eligibility after your completed application has been received and verified. Pacific Gas and Electric Company will contact you at least every year to verify your continued need for the program.

CARE PROGRAM RULES

- The energy bill from your landlord must be in your name.
- You must live at the address where the discount will be received more than half of the year (not for second homes).
- You may not qualify for a CARE discount if you share energy meter(s) with another home.
- You may not be claimed as a dependent on another person's tax return other than your spouse.
- Your household must meet the program definition of low-income as described in this application packet.
- You must notify Pacific Gas and Electric Company if your household no longer qualifies for the CARE discount.

OTHER PROGRAMS AND SERVICES YOU MAY QUALIFY FOR

- **FERA** – Family Electric Rate Assistance Program. Provides a Tier 3 (131-200 percent of baseline) electric rate reduction for large households of 3 or more persons with low to middle income. Customer may be enrolled in either the FERA Program or the CARE Program, but not both. Call 1-800-PGE-5000 for more information.
- **LIHEAP** - Low Income Home Energy Assistance Program. Provides bill payment assistance, emergency bill assistance and weatherization services. Call the Department of Community Services and Development (CSD) at 1-866-675-6623 for more information.
- **Medical Baseline** - Provides services at the lowest rates to customers with documented needs. Call 1-800-PGE-5000 for more information.
- **Energy Partners** - Free energy education and weatherization to income-qualified customers. Call 1-800-989-9744 for more information.
- **ULTS** – Universal Lifeline Telephone Service provides discounted telephone access for customers meeting similar income guidelines as CARE. Contact your local telephone service provider for more information.

1-866-743-2273

Assistance with the CARE Program in English

Giúp xin chương trình CARE bằng tiếng Việt

CARE 華語協助專線

Ayuda con el programa CARE en español



**Pacific Gas and
Electric Company®**

Solicitudes del Programa CARE para

Inquilinos de Instalaciones Residenciales "Sub-medidas"



Devuelva la solicitud llena a: ☐ P.O. Box 7979, San Francisco, CA 94120-7979

01-9285

Si tiene preguntas llame al: ☎ 1-866-PGE-CARE (743-2273) Fax: ☎ 415-973-6419

Rev. 06/01/05

www.pge.com/care

INFORMACIÓN SOBRE EL PROGRAMA DE DESCUENTO CARE

El programa CARE ofrece un descuento del 20% en la cuenta mensual de gas y electricidad a los hogares que califican. El descuento y las pautas de elegibilidad fueron establecidas por la Comisión de Servicios Públicos de California. Si llena los requisitos, Pacific Gas and Electric Company le avisará a su administrador o propietario que ha sido certificado, una vez que hayamos recibido su solicitud llena y la misma sea verificada por PG&E. Pacific Gas and Electric Company se pondrá en contacto con usted, por correo, por lo menos cada año para verificar que continúa necesitando este programa.

REGLAS DEL PROGRAMA CARE

- La cuenta de energía del administrador de su parque debe estar a su nombre.
- Debe vivir en la dirección donde se recibirá el descuento por lo menos la mitad del año (no aplica a segundos hogares)
- Es posible que no califique para el programa CARE si comparte su medidor (electric meter) con otra casa.
- No debe aparecer como dependiente, en la declaración de impuestos, de ninguna otra persona que no sea su cónyuge.
- El hogar del solicitante debe llenar la definición de bajos ingresos, tal y como se describe en esta solicitud.
- Debe informar a Pacific Gas and Electric Company si su hogar ya no reúne los requisitos para el descuento del programa de CARE

OTROS PROGRAMAS Y SERVICIOS PARA LOS QUE USTED PODRÍA CALIFICAR

- **FERA** – Programa de Ayuda Familiar para los Cargos Eléctricos. Este programa proporciona una reducción del precio eléctrico en la "Hilera 3" (131-200 por ciento de la tarifa base), para casas grandes con más de 3 personas de bajos a medianos ingresos. Nuestros clientes se pueden inscribir en el programa CARE o en el programa FERA, pero no en ambos. Llame al 1-800-PGE-5000 para más información.
- **LIHEAP** – Programa de Ayuda para el Pago de la Energía en los Hogares de Bajos Ingresos (LIHEAP). Este es un programa que brinda asistencia con el pago de sus cuentas, asistencia de emergencia para el pago de sus cuentas, y servicio de protección en contra de las inclemencias del tiempo. Para más información, llame al Departamento de Servicios y Desarrollo de la Comunidad (CSD) al 1-866-675-6623.
- **Medical Baseline** – Brinda servicios, por medio del pago de las tarifas más bajas, a los clientes que tengan necesidades comprobadas. Llame al 1-800-PGE-5000 para más información.
- **Socios en la Energía** – Ofrece servicios gratuitos de orientación sobre la energía y sobre protección en contra de las inclemencias del tiempo a los clientes que llenen los requisitos. Llame al 1-800-989-9744 para más información.
- **ULTS** – La Línea Universal de Servicio Telefónico le brinda acceso telefónico, a precios de descuento, a aquellos clientes que reúnan requisitos similares a los del Programa CARE. Llame a su compañía local de teléfonos para más información.

1-866-743-2273

Assistance with the CARE Program in English

Giúp xin chương trình CARE bằng tiếng Việt

CARE 華語協助專線

Ayuda con el programa CARE en español



1 INFORMACIÓN DEL ADMINISTRADOR O PROPIETARIO: (por favor escriba a máquina o con letras de molde)

Nombre del Administrador o Propietario _____ Teléfono

Dirección postal _____ Ciudad _____ CA Código Postal _____

Nombre que aparece en la cuenta de energía _____

Número de Cuenta Electricidad - Gas -

Dirección donde se da el servicio _____ Ciudad _____ CA Código postal _____

Situación del solicitante NUEVO CANCELÓ EL PROGRAMA SE RECERTIFICÓ SE MUDÓ A OTRO ESPACIO

2 INFORMACIÓN DEL INQUILINO: (por favor escriba a máquina o con letras de molde)

Nombre _____
Tal y como aparece en la factura

Dirección del hogar _____ Ciudad _____ CA Código postal _____
No use P.O. Box

Dirección Postal, si tiene _____ Ciudad _____ CA Código postal _____
Llene solo si su dirección postal es diferente a la que aparece arriba

Número telefónico durante el día Número de personas que viven en el hogar + =
Por favor incluya el código de área Adultos Niños Total

3 HOJA DE TRABAJO SOBRE LOS INGRESOS DEL HOGAR: (Por favor llene los círculos junto a todas las fuentes de ingresos anuales de su hogar)

- Sueldos y/o Salarios, Jornales Intereses y/o Dividendos de:
 - Cuentas de Ahorros,
 - Acciones y Bonos, o
 - Cuentas de Jubilación
- Pagos por Desempleo
- Ingresos provenientes de Rentas o Regalías
- Donaciones Escolares, Becas u Otros Tipos de Ayuda para Gastos de Subsistencia del hogar
- Ganancias de su Propio Negocio (Formulario de IRS, Schedule C, Línea 29)
- Pagos por Incapacidad
- Pagos por Compensación al Trabajador
- Pagos del Seguro Social, SSI, SSP
- Pagos de Pensiones
- Pagos de Reclamaciones del Seguro
- Pagos de Reclamaciones Legales
- Pagos de TANF (AFDC)
- Pagos por medio de Estampillas de Alimentos
- Pagos por Pensión Alimenticia a Hijos
- Pagos por Pensión Conyugal
- Pagos en Efectivo y/u Otros Ingresos

INGRESOS MÁXIMOS DEL HOGAR: (efectivo Junio 1, 2005 hasta Mayo 31, 2006)

Los ingresos anuales brutos de su hogar no deben exceder las Pautas de Ingresos de CARE especificadas a continuación:

Número de Personas en el Hogar	1 o 2	3	4	5	6	Agregue \$5,800 anual por cada persona adicional en el hogar
Ingresos Anuales	\$24,200	\$28,400	\$34,200	\$40,000	\$45,800	

Ingresos Totales Anuales del Hogar: \$

4 DECLARACIÓN: (Por favor lea detenidamente y firme abajo)

Declaro que la información proporcionada en esta solicitud es correcta y verdadera. Estoy de acuerdo en proveer pruebas de mis ingresos, de ser necesario. Estoy de acuerdo en informar a Pacific Gas and Electric Company si mi situación financiera cambia y ya no califico para recibir dicho descuento. Comprendo que, si recibo el descuento sin calificar para el mismo, se me podría pedir que devuelva el monto total del descuento recibido. Comprendo que Pacific Gas and Electric Company podría compartir esta información con otras compañías de suministro de energía o sus agentes, para suscribirme en sus programas de ayuda.

X _____
Firma del Cliente de Pacific Gas and Electric Company Marque aquí si es tutor o tiene carta poder Fecha _____



Pacific Gas and Electric Company
San Francisco, California

Cancelling

Revised
Revised

Cal. P.U.C. Sheet No.
Cal. P.U.C. Sheet No.

23427-E
21625-E

PACIFIC GAS AND ELECTRIC COMPANY
CALIFORNIA ALTERNATE RATES FOR ENERGY PROGRAM
INCOME GUIDELINES
FORM NO. 62-1477 (REV 6/05)
(ATTACHED)

(T)

Advice Letter No. 2662-E
Decision No. 89-07-062,89-09-044

100385

Issued by
Karen A. Tomcala
Vice President
Regulatory Relations

Date Filed May 13, 2005
Effective June 1, 2005
Resolution No. E-3524



www.pge.com/care

CALIFORNIA ALTERNATE RATES FOR ENERGY

INCOME GUIDELINES (effective June 1, 2005 to May 31, 2006)

Your household's gross income must not exceed the CARE Income Guidelines

Size of Household	Yearly
1 or 2	\$24,200
3	\$28,400
4	\$34,200
5	\$40,000
6	\$45,800

Add **\$5,800** for each additional household member

TARIFAS ALTERNAS DE ENERGÍA DE CALIFORNIA

PAUTAS DE INGRESOS (efectivo Junio 1, 2005 hasta Mayo 31, 2006)

Los ingresos brutos de su hogar no deben exceder las Pautas de Ingresos de CARE.

Número de Personas en el Hogar	Anual
1 or 2	\$24,200
3	\$28,400
4	\$34,200
5	\$40,000
6	\$45,800

Agregue **\$5,800** anual por cada personal adicional en el hogar

Definition of Income:

All revenues, from all household members, from whatever source derived, whether taxable or non-taxable, including, but not limited to:

- Wages or Salaries
- Interest and/or Dividends from:
 - Savings Accounts,
 - Stocks or Bonds, or
 - Retirement Accounts
- Unemployment Benefits
- Rental or Royalty Income
- School Grants, Scholarships or other aid used for living expenses
- Profit from self-employment (IRS from Schedule C, Line 29)
- Disability payments
- Workers compensation
- Social security, SSI, SSP
- Pensions
- Insurance settlements
- Legal Settlements
- TANF (AFDC)
- Food stamps
- Child support
- Spousal support
- Cash and/or other income

Definición de Ingresos:

Todos los ingresos de todas las personas que viven en su hogar, derivadas de todas las fuentes, tanto si se pagan impuestos sobre las mismas o no, y que incluyen, pero no se limitan a:

- Sueldos y/o Salarios, Jornales
- Intereses y/o Dividendos de:
 - Cuentas de Ahorros,
 - Acciones o Bonos, o
 - Cuentas de Jubilación
- Pagos por Desempleo
- Ingresos provenientes de Rentas o Regalías
- Donaciones Escolares, Becas u Otros Tipos de Ayuda para Gastos de Subsistencia del hogar
- Ganancias de su Propio Negocio (Formulario de IRS, Schedule C, Línea 29)
- Pagos por Incapacidad
- Pagos por Compensación al Trabajador
- Pagos del Seguro Social, SSI, SSP
- Pagos de Pensiones
- Pagos de Reclamaciones del Seguro
- Pagos de Reclamaciones Legales
- Pagos de TANF (AFDC)
- Pagos por medio de Estampillas de Alimentos
- Pagos por Pensión Alimenticia a Hijos
- Pagos por Pensión Conyugal
- Pagos en Efectivo y/u Otros Ingresos

1-866-743-2273

Assistance with the CARE Program in English
Giúp xin chŭng trính CARE bŕng ti%ng Vi&t

CARE 華語協助專線

Ayuda con el programa CARE en español



www.pge.com/care

Mail Completed Application to: P.O. Box 7979, San Francisco, CA 94120-7979

62-1477

For Questions Call: 1-866-PGE-CARE (743-2273) Fax: 415-973-6419

Rev. 06/01/05

收入標準(有效期由 2005 年 6 月 1 日至 2006 年 5 月 31 日)

您家庭的總收入不可超過 CARE 計劃的收入標準

家庭人數	每年收入
1 或 2	\$24,200
3	\$28,400
4	\$34,200
5	\$40,000
6	\$45,800

每增加一人, 增加 \$5,800

- 給配偶的資助
- 現金和 / 或其他收入

收入定義:

居住在您家中所有人、來自所有途徑, 無論是要繳稅或不需繳稅全部收入, 其中包括, 但不局限於:

- 工資
- 利息/或股息, 來源于:
 - 儲蓄戶口、
 - 股票或債券, 或
 - 退休帳戶
- 失業福利
- 租金或版權收入
- 學校助學金、獎學金或其他生活開支補助
- 自僱者的總收入 (IRS 表格 C 第 29 行)
- 傷病補助金
- 勞工賠償
- 安全保險補助金、SSI、SSP
- 退休金
- 保險訴訟所得的金錢
- 法律訴訟所得的金錢
- 對需協助的家庭之臨時補助 TANF (AFDC)
- 食物券
- 給孩童的資助

Chỉnh mức l@i tÙc (Có hiĐu l@c t@ ngày 1 tháng Sáu, 2005 t@i ngày 31 tháng Năm, 2006)

Mức L@i TÙc CARE dũĐi Cây:

SỐ NgŨi trong Gia ãnh	Hàng Năm
1 hay 2	\$24,200
3	\$28,400
4	\$34,200
5	\$40,000
6	\$45,800

Cĩng \$5,800 cho m@i ngŨi thêm sau C@

ñĩnh Nghĩa L@i TÙc:

“T@ng S@ L@i TÙc Toãn Gia ãnh” có nghĩa là t@ĩ cả m@i l@i tÙc, của m@i ngŨi trong nhà, có t@ b@ĩt c@ũ ngu@n nào, dù phải C@ng thu% hay không C@ng thu%, bao g@ũm nhũng không phải chỉ giĐi h@ĩn vào:

- TiĐĩn LŨĐng
- TiĐĩn L@i t@:
 - Các TrŨĐng M@c Ti%ot KiEm,
 - Các ChŨng Khoán hay Trái Phi%ou, hay
 - TrŨĐng M@c HŨu Trĩ
- TiĐĩn Th@ĩt NghiEp
- L@i TÙc do Cho Thuê Nhà hay TiĐĩn B@ĩn QuyĐĩn
- TiĐĩn H@c B@ng hay các thŨ TiĐĩn Tr@ Giúph cho ãi S@ng h@ng ngày
- L@i TÙc t@ viEc Làm ĩn Riêng (IRS m@ũ Schedule C, D@ng 29)
- TiĐĩn cho NgŨi Có Khuy%ot T@Et
- TiĐĩn B@ĩ ThŨĐng Tai N@ĩn Lao ãĩng
- TiĐĩn An Sinh X@ H@ĩ (SSI, SSP)
- TiĐĩn HŨu B@ng
- TiĐĩn B@ĩ Hi@m B@ĩ ThŨĐng
- TiĐĩn B@ĩ ThŨĐng ThŨa KiEm
- TANF (AFDC) (tr@ c@ĩp gia Cĩnh nghèo có con nh@ũ)
- TiĐĩn Phi%ou Th@c Ph@ĩm
- TiĐĩn C@ĩp DũĐng Con C@ĩ
- TiĐĩn C@ĩp DũĐng V@/Ch@ng
- TiĐĩn M@ĩt và/hay L@i TÙc Kh@ĩc



Pacific Gas and Electric Company
San Francisco, California

Cancelling

Revised
Revised

Cal. P.U.C. Sheet No.
Cal. P.U.C. Sheet No.

23428-E
21626-E

PACIFIC GAS AND ELECTRIC COMPANY
CALIFORNIA ALTERNATE RATES FOR ENERGY PROGRAM
POSTAGE-PAID APPLICATION
FORM NO. 03-006 (6/05)
(ATTACHED)

(T)

Advice Letter No. 2662-E
Decision No. 89-07-062,89-09-044

Issued by
Karen A. Tomcala
Vice President
Regulatory Relations

Date Filed May 13, 2005
Effective June 1, 2005
Resolution No. E-3524

100386



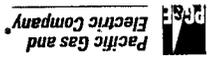
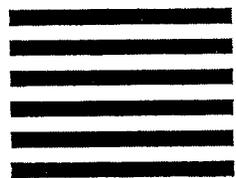
NO POSTAGE
NECESSARY
IF MAILED
IN THE
UNITED STATES

BUSINESS REPLY MAIL

FIRST-CLASS MAIL PERMIT NO. 27109 SAN FRANCISCO, CA

POSTAGE WILL BE PAID BY ADDRESSEE

PACIFIC GAS AND ELECTRIC COMPANY
CARE PROGRAM
PO BOX 7979
SAN FRANCISCO, CA 94120-9445



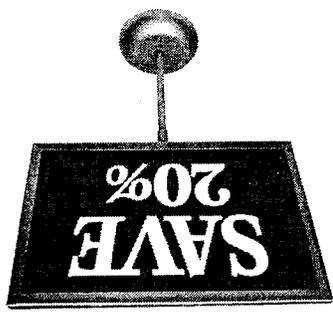
Bạn có thể là một trong hàng ngàn gia đình tiết kiệm được 20% trên hóa đơn hàng tháng của PG&E. Hãy điền vào tờ đơn giản dị của Chương Trình CARE ngay.

您可能就是幸運家庭之一。每月節省太平洋煤電費20%。請立刻填妥 CARE 計劃申請表格。

El suyo puede ser uno de los miles de hogares que ahorran 20% todos los meses en su cuenta de PG&E. Complete hoy mismo esta simple solicitud del Programa CARE.

Fill out this easy CARE Program application today.

You could be one of the thousands of households to **Save 20% Every Month on Your PG&E Bill**



You could be one of the thousands of households to **Save 20% Every Month on Your PG&E Bill**. Fill out this easy CARE Program application today.

El suyo puede ser uno de los miles de hogares que ahorran 20% todos los meses en su cuenta de PG&E. Complete hoy mismo esta simple solicitud del Programa CARE.

您可能就是幸運家庭之一。每月節省太平洋煤電費20%。請立刻填妥 CARE 計劃申請表格。

Bạn có thể là một trong hàng ngàn gia đình tiết kiệm được 20% trên hóa đơn hàng tháng của PG&E. Hãy điền vào tờ đơn giản dị của Chương Trình CARE ngay.





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(Continued)

Advice Letter No. 2662-E
Decision No.

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Karen A. Tomcala
Vice President
Regulatory Relations

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Effective June 1, 2005
Resolution No. E-3524



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Advice Letter No. 2662-E
Decision No.

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Vice President
Regulatory Relations

Date Filed May 13, 2005
Effective June 1, 2005
Resolution No. _____



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(Continued)

Advice Letter No. 2662-E
Decision No.

Issued by
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Vice President
Regulatory Relations

Date Filed May 13, 2005
Effective June 1, 2005
Resolution No. _____

**PG&E Gas and Electric Advice
Filing List
General Order 96-A, Section III(G)**

ABAG Power Pool	DGS Natural Gas Services	Office of Energy Assessments
Accent Energy	DMM Customer Services	Palo Alto Muni Utilities
Aglet Consumer Alliance	Douglass & Liddell	PG&E National Energy Group
Agnews Developmental Center	Downey, Brand, Seymour & Rohwer	Pinnacle CNG Company
Ahmed, Ali	Duke Energy	PITCO
Alcantar & Elsesser	Duke Energy North America	Plurimi, Inc.
Anderson Donovan & Poole P.C.	Duncan, Virgil E.	PPL EnergyPlus, LLC
Applied Power Technologies	Dutcher, John	Praxair, Inc.
APS Energy Services Co Inc	Dynegy Inc.	Price, Roy
Arter & Hadden LLP	Ellison Schneider	Product Development Dept
Avista Corp	Energy Law Group LLP	R. M. Hairston & Company
Barkovich & Yap, Inc.	Energy Management Services, LLC	R. W. Beck & Associates
BART	Enron Energy Services	Recon Research
Bartle Wells Associates	Exelon Energy Ohio, Inc	Regional Cogeneration Service
Blue Ridge Gas	Exeter Associates	RMC Lonestar
Bohannon Development Co	Foster Farms	Sacramento Municipal Utility District
BP Energy Company	Foster, Wheeler, Martinez	SCD Energy Solutions
Braun & Associates	Franciscan Mobilehome	Seattle City Light
C & H Sugar Co.	Future Resources Associates, Inc	Sempra
CA Bldg Industry Association	G. A. Krause & Assoc	Sempra Energy
CA Cotton Ginners & Growers Assoc.	Gas Transmission Northwest Corporation	Sequoia Union HS Dist
CA League of Food Processors	GLJ Energy Publications	SESCO
CA Water Service Group	Goodin, MacBride, Squeri, Schlotz &	Sierra Pacific Power Company
California Energy Commission	Hanna & Morton	Silicon Valley Power
California Farm Bureau Federation	Heeg, Peggy A.	Simpson Paper Company
California Gas Acquisition Svcs	Hitachi Global Storage Technologies	Smurfit Stone Container Corp
California ISO	Hogan Manufacturing, Inc	Southern California Edison
Calpine	House, Lon	SPURR
Calpine Corp	Imperial Irrigation District	St. Paul Assoc
Calpine Gilroy Cogen	Integrated Utility Consulting Group	Stanford University
Cambridge Energy Research Assoc	International Power Technology	Sutherland, Asbill & Brennan
Cameron McKenna	Interstate Gas Services, Inc.	Tabors Caramanis & Associates
Cardinal Cogen	J. R. Wood, Inc	Tansev and Associates
Cellnet Data Systems	JTM, Inc	Tecogen, Inc
Chevron USA Production Co.	Kaiser Cement Corp	TFS Energy
Childress, David A.	Korea Elec Power Corp	Transwestern Pipeline Co
City of Glendale	Luce, Forward, Hamilton & Scripps	Turlock Irrigation District
City of Healdsburg	Marcus, David	U S Borax, Inc
City of Palo Alto	Masonite Corporation	United Cogen Inc.
City of Redding	Matthew V. Brady & Associates	URM Groups
CLECA Law Office	Maynor, Donald H.	Utility Cost Management LLC
Constellation New Energy	McKenzie & Assoc	Utility Resource Network
Cooperative Community Energy	McKenzie & Associates	Wellhead Electric Company
CPUC	Meek, Daniel W.	Western Hub Properties, LLC
Creative Technology	Mirant California, LLC	White & Case
Cross Border Inc	Modesto Irrigation Dist	WMA
Crossborder Inc	Morrison & Foerster	
CSC Energy Services	Morse Richard Weisenmiller & Assoc.	
Davis, Wright Tremaine LLP	Navigant Consulting	
Davis, Wright, Tremaine, LLP	New United Motor Mfg, Inc	
Defense Fuel Support Center	Norris & Wong Associates	
Department of the Army	North Coast Solar Resources	
Department of Water & Power City	Northern California Power Agency	