



**SouthWest
Water Company**



Water Assist[®]

WATER ASSISTANCE PROGRAM

Water Assist is a water assistance program designed to assist qualifying customers with paying their monthly water utility bill. Customers who qualify for the Water Assist program will receive a monthly \$20 credit for water and/or \$20 for sewer through the duration of their enrollment as long as they continue to pay their bill and remain current. The program is designed to assist customers whose total combined household income does not exceed 125% of the current Federal Poverty Guidelines (see table below).

Household Size	Gross Monthly Income	Household Size	Gross Monthly Income
1	\$1,329	5	\$3,196
2	\$1,796	6	\$3,663
3	\$2,263	7	\$4,129
4	\$2,729	8	\$4,596

How to Register:

For program consideration, the required documents listed below must be submitted with the signed application form and returned to us for processing. Please note to be considered, the application must be completed in its entirety. All applicants will start receiving credit(s) once all information is provided and approved.

- **REQUIRED:** Provide 2020 signed IRS Income Tax Statement and proof for all sources of income for all members in the household of 18 years of age or older.
 - Other acceptable forms of income include:
 - 2020 - W-2 form (must cover full year or gaps in time must be explained)
 - 2021 - Social Security or Disability Awards letter
 - Form 1099 - for self-employed or independent contractor (from client)
 - Proof of Enrollment - for full-time students with no income
 - Declaration of Income Statement - for those who have no income
- Current photo ID for account holder with address matching one on file. (Must be primary residence to qualify).
- Account must be three months active and in good standing with an established payment history of at least three months with no delinquencies or disconnects.
- Proof of residency for additional household members may be required.

Please submit your documents by either:

Mail:

SouthWest Water Company
Water Assist
12535 Reed Road
Sugar Land, TX 77478

Email:

waterassist@swwc.com



PLEASE CONTACT YOUR LOCAL AGENCY OR RETURN COMPLETED APPLICATION TO WaterAssist@swwc.com or FAX to 832-209-5395

NAME:* _____ **ACCOUNT#:*** _____

ADDRESS:* _____

EMAIL: _____ **TELEPHONE #:** _____

(INCLUDING YOU) NUMBER OF PEOPLE LIVING IN YOUR HOUSEHOLD:* _____

(INCLUDING YOU) NUMBER OF RESIDENTS OVER AGE 18:* _____

Required Information for processing. Failure to provide email address and/or phone number may delay our ability to contact you if a call is required to expedite processing of your request

In addition to providing you with safe and reliable water service, we are committed to providing support to customers who may need assistance with their water related costs. Please note, once qualified, the following requirements must be met by you in order to receive credits through the Help2Others (H2O) program (the "Program").

- You must pay the balance of your water bill **in full** on or before the due date each month. Random internal audits will be conducted throughout the year to ensure compliance; failure to maintain a current account may result in Program termination.
- Program credits will appear on your account **AFTER** payments are received from our partner agencies. For some of our agencies payments are made monthly and others are quarterly. Your credit will be applied as soon as it is received.
- As long as you remain a customer, your account remains current and the Program remains in effect, your credits will continue until December 31, 2021.

PLEASE NOTE - APPLICATIONS WILL NOT BE PROCESSED UNLESS RECEIVED IN ITS ENTIRETY. TO EXPEDITE PROCESSING OF YOUR REQUEST PLEASE CHECK OFF THAT YOU HAVE ATTACHED THE FOLLOWING:

- _____ Required Information Above Filled Out In Its Entirety.
- _____ Signature of Account Holder.
- _____ 2020 Signed Tax Return and Documents for Each Income Source.
- _____ Copy of Valid Driver's License With Address of Record Listed.

I hereby certify that I have read and understand the information provided to me regarding the requirements of the Water Assist Program. I also hereby certify that I have submitted the following information completely and accurately as failure to do so may delay the application process and/or cause me to be removed from the application process.

Name (Print) _____ Signature _____

Date _____