

Attachment B

ARPA Past Due Utility Bill Assistance



AMERICAN RESCUE PLAN ACT PAST DUE UTILITY BILL ASSISTANCE

The following form is to be used to provide the City of Victorville with notice of your inability to pay the water, sanitation/trash, sewer, storm drain or household hazardous waste bill (City's "Utility Bill") due to circumstances related to COVID-19. The City of Victorville is working to utilize funds from the American Rescue Plan Act (ARPA) and/or other similar funding sources that may become available to assist residents with settling their Utility Bill arrearages that accrued due to the COVID-19 pandemic. Applicants can apply for debt relief assistance for their outstanding Utility Bill(s) for the period of April 2020 through July 2021. The City's Utility Bill Assistance program will be available through August 23, 2021 or until all funds are exhausted.

Eligible applicants may qualify regardless of immigration status and will not be required to show proof of citizenship.

Qualifications

1. Must be a residential and/or business customer enrolled in the City of Victorville utility billing service for water, sanitation/trash, sewer, storm drain or household hazards waste.
2. Must be a household and/or business in the City of Victorville.
3. Must have an active service account with the City of Victorville.

This application is to inform you that I am unable to pay my Utility Bill during the pandemic period of April 1, 2020 to July 31, 2021 due to financial impacts related to COVID-19. By submitting this application, I understand that the City reserves the right to request documentation to verify eligibility and that I will remain responsible to pay my Utility Bill outside any time period not covered under this program.

I attest or certify that the following information is true: (Check all that apply)

- ☐ Suspected or confirmed diagnosis of COVID-19 or caring for myself or someone else such as a household member suspected or confirmed with COVID-19.
- ☐ Lay-off, loss of hours, revenue loss, or other income reduction resulting from business closure or other economic or employer impacts of COVID-19
- ☐ Compliance with a recommendation from the California Department of Health to stay home, self-quarantine, or avoid congregation with others during the state of emergency.
- ☐ Extraordinary out-of-pocket medical expenses related to diagnosis and testing for and/or treatment of COVID-19.

☐ Childcare needs arising from school closures related to COVID-19.

☐ Other COVID-19 related issues (specify): _____

PRIVACY ACT STATEMENT

To determine an individual's eligibility to receive forgiveness under this program, personal information, and in some cases, health information about you and/or other household members require disclosure. The information collected in relation to this application for assistance is collected for the sole purposes of determining eligibility. This information is called "personal identifiable information" and "protected health information."

The City does not use or disclose this information unless it is permitted or required by law. The City is required by law to maintain the privacy of protected information, to provide individuals with notice of its legal duties and privacy practices concerning this protected information and to notify affected individuals in the case of a breach of protected personal identifiable and/or personal health information. The City and its contractors must follow applicable laws to protect the privacy of your protected information.