

Customer Crisis Fund (CCF) Application

Please complete this form to apply for the Customer Crisis Fund. Please ensure the information below is complete and accurate. The CCF grant is available between May 1, 2018 and May 31, 2021 and you may receive a maximum of one CCF grant every 12 months.

If your application for a grant is approved, BC Hydro will apply a credit to your account in an amount equal to your arrears (amount overdue) to a maximum of \$500 for non-electrically heated homes (e.g., if your home is heated with natural gas) or \$600 if your home is electrically heated.

Please be sure to read the eligibility criteria in Part 3 – Terms and Conditions to determine if you should apply.

Please check here to confirm that you have read the terms and conditions in Part 3.

Part 1 – Applicant Information

Name of applicant: _____

Name on BC Hydro account (if different): _____

Primary daytime phone number: _____

Email address: _____

BC Hydro account number: _____

Address of the account: _____

Please answer each of the following questions

Yes No

1. Is this address your primary residence?

2. Do you live at the address with other individuals age 18 and over?

If yes, please indicate how many: _____

3. Is electricity the primary energy source used for heating at this address?

4. Have you experienced any of the life events below within the last 12 months that has caused a temporary financial crisis for you? If an event not listed below has caused a temporary financial crisis, please indicate the event in "Other."

- Loss of employment or other income source (e.g., loss of income assistance or employment insurance)
- Fleeing from or left an abusive situation
- Relationship breakdown (separation or divorce)
- Critical illness or medical emergency for you or an individual in your family
- Death of an individual in your family
- Rehabilitation (e.g., injury, drug or alcohol)
- Incarceration
- Significant and unexpected living expenses (e.g., hot water tank replacement or roof replacement)

Other (please indicate): _____

5. Have you or any individual age 18 and over living at the address participated in any of the programs below in the past 12 months?

If the answer to question 5 is no, please complete Part 2.

If the answer is yes, please skip Part 2 and proceed to Part 3.

Income Assistance Programs (Welfare) through BC Ministry of Social Development and Poverty Reduction (MSDPR) or through the Federal Government

- Income assistance for persons with persistent multiple barriers to employment (PPMB)
- Disability assistance (PWD)
- Income assistance
- Hardship assistance
- Senior’s supplement

Housing Assistance Programs through the BC Housing Management Commission (BC Housing)

- Rental assistance program
- Homeless prevention program
- Shelter Aid for Elderly Renters (SAFER)

Other Income Assistance Programs

- Municipal or regional rent bank or rent bank assistance programs (please indicate): _____

Federal Seniors Programs

- Guaranteed Income Supplement (GIS)
- Allowance for persons aged 60 to 64 with spouses or common-law partners who receive a pension under the Old Age Security Act and are eligible for the Guaranteed Income Supplement
- Survivor’s allowance

Other income assistance programs you are currently participating in:

(please indicate) _____

Part 2 – Applicant’s Financial Information

Please complete either option 1 or option 2.

OPTION 1 NOTICE OF ASSESSMENT

Provide the total annual income of all individuals age 18 and over living at the address as shown on line 150 of the Notice of Assessment from the Canada Revenue Agency: \$ _____.

Provide the total taxes payable of all individuals age 18 and over as shown on line 435 (of the Notice of Assessment) \$ _____.

Calculate total after-tax income at the address \$ _____
(total annual income minus total taxes payable).

OPTION 2 COMPLETE THE INCOME TABLE

If using the table below, please list the amount of the average monthly combined income of all the individuals age 18 and over at the address based on the past 12 months. Any recent changes in income should be reflected here.

Income source	Average monthly income (\$)
Wages or self employment (net)	
Employment Insurance (net)	
Pension(s)	
Other retirement income	
Income from interest on investments	
GST payments	
Spousal support	
Other income (e.g., boarder, rental income) Please indicate: _____ _____	
Total average monthly income	

Please list the amount of the average monthly combined expenses of all individuals age 18 and over at the address based on the past 12 months.

Expense items	Average monthly expenses (\$)
Mortgage	
Rent/Strata Fees/Pad Rent	
Property taxes	
Utilities	
Home insurance	
Vehicle expenses (including car insurance)	
Medical expenses	
Child and/or spousal support	
Child care/day care	
Food and groceries	
Transportation	
Other expenses (please indicate): _____ _____	
Total average monthly expenses	

Please calculate your cash flow (on an average basis) as follows:

Note: If you're using the Notice of Assessment, divide your total after-tax income by 12 to get the monthly amount.

Total Average Monthly Income: _____

(-) Minus

Total Average Monthly Expenses: _____

(=) Equals

Total Monthly Cash Flow: _____

Please list the applicant's current assets and liabilities below but exclude the applicant's primary residence and primary vehicle.

Assets	
Items	Value (\$)
Cash	
Savings account	
Stocks and bonds	
Other assets (e.g., recreational vehicle or home) please indicate: _____ _____	
Total value	

Liabilities/debt	
Items	Value (\$)
Loans	
Credit card debt	
Mortgage	
Unpaid taxes	
Other liabilities (please indicate): _____ _____	
Total value	

Please calculate the net value as follows:

Total Assets: _____

(-) Minus

Total Liabilities: _____

(=) Equals

Total Net Value: _____

Part 3 – Terms and Conditions

1. To be eligible for the CCF grant, the applicant must meet all of the following criteria:
 - a. receiving electricity service at the address from BC Hydro;
 - b. being the BC Hydro account holder for the address or listed on the BC Hydro account;
 - c. using the address as the primary residence;
 - d. having a balance in arrears (amount owing) of less than \$1,000 on the BC Hydro account for the address;
 - e. having demonstrated prior attempt to pay the bill;
 - f. having experienced in the past 12 months or is experiencing a life event that results in a temporary financial crisis;
 - g. having utilized and exhausted all other financial resources, such as income, liquid assets, and other financial assistance programs; and
 - h. not having received a CCF grant during the past 12 months.
2. The applicant must notify BC Hydro by emailing to **CCF@bchydro.com** if any information provided herein changes at any time after the submission of the application.
3. BC Hydro may, in its sole discretion, at any time, verify and audit the accuracy and completeness of any and all information provided in this application, and may refuse or deny an application which it determines, in its sole discretion, is incomplete, inaccurate or otherwise does not meet the CCF grant criteria.
4. BC Hydro, without liability of any kind and in its sole discretion, decides the amount of the CCF grant an applicant will receive.
5. The applicant must retain, for audit purposes, any documentation that substantiates all the information in the application (“Documentation”) for at least 36 months, must cooperate with the audit, and must be willing and able to provide, upon request, in BC Hydro’s sole discretion, any documentation. BC Hydro may request documentation related to the individual(s) age 18 and over at the address during the audit. If such a request is made by BC Hydro, necessary consent by that individual must be given to BC Hydro to collect, use and disclose any personal information for the purposes of administrating and evaluating the CCF program. Failure to provide the necessary consent may result in the denial or reversal of the CCF grant.
6. Providing false, misleading, or inaccurate information that affects the applicant’s eligibility for the CCF grant, or failing to cooperate with an audit or provide any requested documentation within the timeframe as directed by BC Hydro, may result in the denial or reversal of the CCF grant.
7. For the purposes of deciding the applicant’s eligibility for a CCF grant and administering the CCF program, including for program evaluation purposes, BC Hydro collects, uses, and discloses the applicant’s personal information in accordance with its mandate under the Hydro and Power Authority Act. BC Hydro may use the applicant’s information, including any personal information, as disclosed, as well as any data respecting billing, bill payments, energy use and consumption at the address, for the purposes of administrating and evaluating the CCF program. If you have questions about how your personal information is handled, please contact BC Hydro’s Customer Service representative at **1 800 BCHYDRO (1 800 224 9376)**.
8. BC Hydro may, in its sole discretion, at any time, modify any terms or conditions or any of its eligibility requirements for the CCF grant.

Part 4 – Declaration and Consent

I am a BC Hydro customer (or an authorized representative of the customer) and the applicant for the CCF grant. By signing below, I declare that:

- I have read, understand, and agree to all of the above terms and conditions.
- The information I have provided in this application is true, correct and complete to the best of my knowledge, and I am willing and able, upon request, to provide documents to verify the information provided in the application.
- I understand that BC Hydro may require the individual(s) age 18 and over at the address to provide Documentation (such as proof of income) for the purposes of administrating and evaluating the CCF program. I have informed the individual(s) that failure to provide the necessary consent for the collection, use, and disclosure of the requested Documentation or information may result in the denial or reversal of the CCF grant.
- I agree to participate in a survey or interview conducted by BC Hydro or its authorized representative to evaluate the CCF program.
- I agree to be contacted regarding BC Hydro's energy conservation and low income programs. To opt out of receiving such program information, please check here: →

Date: _____

Signed: _____

Name: _____

If this application was completed for you by an authorized representative, please indicate the name and contact information of the representative and the associated organization here.

Name of Representative: _____

Representative Organization: _____

Contact Number or Email: _____

Contact preference:

BC Hydro can contact me directly

BC Hydro can contact my representative

Notes

If you need help completing your application please call **BC211** by dialing **2-1-1** if you are located in the Lower Mainland or Vancouver Island or **1 844 708 3208** for all other areas.

For ways to submit your application please visit **bchydro.com/ccf** or mail your application to PO Box 8910, Vancouver, BC, V6B 4X3.