

This application may also be completed online at:
www.swgas.com/assistance/ca/care

For more information visit www.swgas.com or call:

Customer Assistance (877) 860-6020
Hearing Impaired 711

Other programs and services you may qualify for:

LIEE (Low-Income Energy Efficiency Program) offers energy-saving home improvements at no cost. For more information, please call:

Southern California -
Community Action Partnership of San Bernardino County,
English and Spanish-speaking customers, **1-800-635-4618**

Northern California -
Project Go, Inc., **1-800-655-7705**;
Spanish-speaking customers, **1-866-812-5766**

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 at **1-866-675-6623** for more information.

TENANTS:

To qualify for a rate discount through your facility landlord or manager, submetered tenants must meet these qualifications:

- Submetered tenants do not receive a gas bill from Southwest Gas.
- Submetered tenants receive gas service and a gas bill from their facility landlord or manager.
- The submetered tenant's total combined annual household income cannot exceed the income guidelines (see chart on reverse side).

I CERTIFY:

- I understand the energy bill from my landlord must be in my name.
- I understand I must notify Southwest Gas within 30 days if I move or exceed the income requirements.
- I am not claimed on another person's income tax return.
- I understand Southwest Gas has the right to verify my household income.
- I will renew my application every two years or when requested by Southwest Gas.
- I understand that I will receive the discount from my landlord or manager beginning with the first regular billing after Southwest Gas notifies my landlord or manager that my completed application has been processed and approved.

Seal and mail the completed application to Southwest Gas.
No postage is necessary.

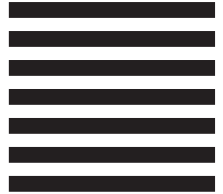


NO POSTAGE
NECESSARY
IF MAILED
IN THE
UNITED STATES

BUSINESS REPLY MAIL

FIRST-CLASS MAIL PERMIT NO. 478 LAS VEGAS NV

POSTAGE WILL BE PAID BY ADDRESSEE:



ATTN CARE
SOUTHWEST GAS CORPORATION
PO BOX 1498
VICTORVILLE CA 92393-9969



CARE
Application for California
Alternate Rates for Energy

Program Application for
**Tenants of Submetered
Residential Facilities**

- > Get a **DISCOUNT** on your gas bill
and **SAVE MONEY!**
- > Check inside to see if you qualify.
Enrolling is easy!
- > ¡Reciba un **DESCUENTO** en su
factura de gas y **AHORRE DINERO!**
- > Pida una solicitud del programa
CARE en español.

Form 902.16 / 7500 (2010-2011)

