



Gas Sample Form No. 61-0535
CARE Program Application for Migrant Farm Worker Housing Centers

Sheet 1

**Please Refer to Attached
Sample Form**



CARE PROGRAM APPLICATION

Migrant Farm Worker Housing Centers

Choose the
best rate
plan for you.
Learn more†.

Save on your monthly PG&E bill

California Alternate Rates for Energy (CARE)

pge.com/care

The CARE program offers a monthly discount on PG&E bills for qualifying migrant farm worker housing centers (MFHC) based on criteria established by the California Public Utilities Commission. Please review this application carefully to see if your facility qualifies. If you have questions, email CAREandFERA@pge.com or call the Hotline at 415-973-7288, 8 a.m. to 4 p.m., Monday–Friday, excluding holidays.

How You Can Apply

Read all the information, including the eligibility criteria for both organizations and facilities, before you complete this application.

Determine if your facility meets the definition of a qualified migrant farm worker housing center. The facility must meet all criteria to qualify for a monthly CARE discount.

Complete the entire application, making sure to fill out a separate application for each type of qualified facility.

Attach all required documents; otherwise your application will be considered incomplete. Required documents include:

- A copy of your current contract with the Office of Migrant Services **OR** your Federal 501(c)(3) tax exemption **OR** your state tax exemption form along with your local property tax exemption form
- A complete list of your facility's PG&E accounts (See Section 5 of the application.)

Return your completed application using **one** of the following methods:

- **Online:** Apply online for faster enrollment at pge.com/care.
- **Email:** Take clear pictures of your completed application and required documentation or scan these materials; convert these images into a PDF (portable document file) and email it to CAREandFERA@pge.com.
- **Fax:** Send completed application and required documentation to **1-877-302-7563**.
- **Mail to:** Pacific Gas and Electric Company
CARE Program
P.O. Box 7979
San Francisco, CA 94120-7979

Eligible Facilities

- **Migrant Farm Worker Housing Centers, operated by the Office of Migrant Services through the Department of Housing and Community Development,** provide housing pursuant to Section 50710 of the California Health and Safety Code.
- **Migrant Farm Worker Housing Centers, operated by non-profit entities,** as defined in Subdivision (b) of Section 1140.4 of the Labor Code, is exempt from local property taxes pursuant to Subdivision (g) of Section 214 of the Revenue and Taxation Code.

Eligibility Criteria for Organizations

Each facility **MUST** meet ALL of the following:

- The migrant farm worker housing center (MFHC) must be the PG&E customer of record.
- MFHC must verify that the energy supplied to each account listed in this application is used for residential purposes.
- MFHC must agree to use all CARE savings (from reduced energy rates) for the direct benefit of its housing center residents.
- MFHC is required to renew its CARE eligibility by completing a new application, attaching all required documentation (updated as necessary) and providing an explanation as to how the previous year's CARE discount was used to directly benefit its residents.

Migrant Farm Worker Housing Centers' (MFHC) Responsibilities

As the applicant, you are required to:

- Provide a copy of your current contract with the Office of Migrant Services or a copy of your Federal 501(c)(3) tax exemption or a copy of your state tax exemption form, along with a current copy of your local property tax exemption form.
- Maintain supporting records and documentation that demonstrate how the previous year's CARE discount directly benefited your residents.
- Notify PG&E of any changes in the eligible service agreements listed in this application. Your organization may be subject to rebilling for any of the service agreements in this application that are no longer eligible for the CARE discount.

†Learn more and get a personalized rate analysis at pge.com/findrates

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Your PG&E Facility Account(s)

For individual facilities of the same type, please attach a separate sheet for more than eight addresses.

PG&E Account Number (Find yours on page 1 of your PG&E bill.)

Electric Service ID#

Gas Service ID#

Service Address

City/State/Zip Code

Type of metering at this facility: Individually metered Master metered

Total number of residents: _____ (Excluding on-site manager)

PG&E Account Number (Find yours on page 1 of your PG&E bill.)

Electric Service ID#

Gas Service ID#

Service Address

City/State/Zip Code

Type of metering at this facility: Individually metered Master metered

Total number of residents: _____ (Excluding on-site manager)

PG&E Account Number (Find yours on page 1 of your PG&E bill.)

Electric Service ID#

Gas Service ID#

Service Address

City/State/Zip Code

Type of metering at this facility: Individually metered Master metered

Total number of residents: _____ (Excluding on-site manager)

PG&E Account Number (Find yours on page 1 of your PG&E bill.)

Electric Service ID#

Gas Service ID#

Service Address

City/State/Zip Code

Type of metering at this facility: Individually metered Master metered

Total number of residents: _____ (Excluding on-site manager)

