California Alternate Rates for Energy (CARE) and Family Electric Rate Assistance (FERA)

AFFIDAVIT OF ZERO INCOME

SECTION 1: Account holder/household member information

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PG&E account number

PG&E account name

Address/City/Zip code

SECTION 2: Declaration

I, the account holder, _____, hereby certify that:

All members of the household do not receive any supplemental income from any public or private sources and do not receive any ongoing payments from rent, royalties, recurring gifts, hobby income, insurance payments, disability or unemployment benefits, retirement income, or investment, AND

I will report to PG&E any changes in my status within the calendar year that would affect the accuracy of the statement.

SECTION 3: Signature

By signing below, I certify (or declare) under penalty of perjury under the laws of the State of California that the previous is true and correct.

Print customer's full name as on the PG&E bill

Signature Date

Information collected on this application is handled in accordance with PG&E's Privacy Policy. The Privacy Policy is available at **pge.com/privacy**.

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