



Liberty Utilities Alternate Rates for Water and Wastewater (ARWW)

Applicability

Applicable to residential water and wastewater service for domestic use rendered to low-income households where the customer meets all the Program Qualifications and Special Conditions of this rate schedule.

Territory

Within all customer service areas served by Rio Rico Utilities dba Liberty Utilities.

Discount

Fifteen percent (15%) discount applied to the regular filed tariff. The discount will be applied to the customer's total bill before any adjustments and application of any other taxes, credit, penalties or fees.

Program Qualifications

- The Liberty Utilities account must be in your name and the address must be your primary residence in our service area or you must be a tenant receiving water service by a sub-metered system.
- You may not be claimed as a dependent on another person's tax return.
- You must reapply each time you move residences.
- You must renew your application once every two (2) years or sooner if requested.
- You must recertify each year by submitting a declaration attesting to your continuing eligibility, and provide one of the following items as proof of eligibility: 1) copy of tax return from prior year; or 2) copy of W2 form from prior year; or 3) copy of welfare/food stamp cards.
- You must notify Liberty Utilities within thirty (30) days if you become ineligible for ARWW.
- Your total gross annual income of all persons living in your household cannot exceed the income levels provided on the application.

Special Conditions

- You must fill out and sign the ARWW Application completely. Incomplete information will delay your discount. You must reapply every two (2) years.
- You must recertify your enrollment in the ARWW annually by submitting a Declaration of Eligibility and providing one of the following items as proof of eligibility: 1) copy of tax return from prior year; or 2) copy of W2 form from prior year; or 3) copy of welfare/food stamp cards.
- Customers shall be billed on this schedule commencing with the next regularly scheduled billing period that follows the receipt and approval of the application by Liberty Utilities.
- Documentation of your gross annual income must be provided to Liberty Utilities for verification of eligibility for ARWW. Refusal or failure to provide documentation of acceptable eligibility to Liberty Utilities shall result in removal from this rate schedule.
- It is the customer's responsibility to notify Liberty Utilities if there is a change in eligibility status.
- You may be re-billed for any periods of ineligibility under the applicable rate schedule.
- Master-metered customers who have sub-metered tenants will receive a reduction in the billing. Sub-metered tenants must qualify and meet the income eligibility criteria so an equivalent discount (15%) can be passed through to eligible customer(s).
- The ARWW program is limited to 2,200 water division customers and 725 wastewater division customers.

How to Submit Completed ARWW Application and/or Declaration of Eligibility

Mail, Fax or Email your ARWW Application and Declaration of Eligibility to:
Liberty Utilities (Rio Rico Utilities)
1225 W. Frontage Rd.
Rio Rico, AZ 85648
Fax: 520-281-7433
Email: customerserviceriorico@libertyutilities.com



Application for Alternate Rates for Water and Wastewater (ARWW)

To qualify for Liberty Utilities ARWW please check (✓) all that apply:

- I am a Liberty Utilities residential customer and the Liberty Utilities account is in my name.
- I am a sub-metered tenant within the Liberty Utilities service area.
- My household income is at or below the income level in the listing below.

Household Size	Total Gross Annual Income from All Sources
1	\$21,870
2	\$29,580
3	\$37,290
4	\$45,000
5	\$52,710
6	\$60,420

For each additional person residing in the household, add \$7,710.

The definition of "gross household income" (before taxes) is all money and non cash benefits available for living expenses from all sources, both taxable and non taxable, before deductions, including expenses, for all people who live in your home. **This includes, but is not limited to the following (please check (✓) all that apply):**

- | | |
|--|--|
| <input type="checkbox"/> Wages, salaries or profit from self-employment | <input type="checkbox"/> Social Security, SSI or SSP |
| <input type="checkbox"/> Disability and/or Workers' Compensation payments | <input type="checkbox"/> Food Stamps |
| <input type="checkbox"/> Insurance and/or legal settlements | <input type="checkbox"/> TANF (AFDC) |
| <input type="checkbox"/> Pensions | <input type="checkbox"/> Veterans Affairs benefits |
| <input type="checkbox"/> Spousal and/or child support | <input type="checkbox"/> Unemployment benefits |
| <input type="checkbox"/> Scholarships, grants, or other aid used for living expenses | <input type="checkbox"/> Rental and/or royalty income |
| <input type="checkbox"/> Interest/dividends from: savings, stocks, bonds, or retirement accounts | <input type="checkbox"/> Cash, gifts and/or other income |

Please print the following information. **Incomplete information will delay your discount.** The name used to apply for the discount **must** be the same as the name on the Liberty Utilities statement.

PLEASE PRINT LEGIBLY											
Liberty Utilities Account Number (As shown on statement)											
Total No. of persons living in household:			Household's Total Gross Annual Income \$				Contact Phone Number				
Name as shown on Liberty Utilities statement						Email Address					
Liberty Utilities Service Address											
City			State			Zip Code					

Please attach one of the items listed as proof of income for eligibility verification: Copy of tax return from prior year, or copy of W2 from prior year, or copy of welfare / food stamp cards.

By signing below, I certify under penalty of perjury that this information is true and correct under the laws of the State of Arizona. I will provide proof of income and I will notify Liberty Utilities of any changes that affect my eligibility. I understand that if I receive the discount without meeting the qualifications for it, I may be required to pay back the discount I received.

Customer Signature

Date

Note: An Application for ARWW must be submitted every two years. A Declaration of Eligibility must be submitted annually for verification. Please allow 30-45 days for processing.

Office Use Only: Date Verified _____

Verified By _____

Expires _____



Aplicacion para Tasas Alternativas de Aguas Residenciales y Aguas Residuales (ARWW)

Para calificar para el programa ARWW de Liberty Utilities, favor de marcar(✓) todo aplicable:

- Soy cliente residencial de Liberty Utilities, y la cuenta con Liberty Utilities esta en mi nombre.
- Soy inquilino con sub-medidor, y resido en la area de servicio de Liberty Utilities.
- Mis ingresos están en o por debajo del nivel de ingresos en la lista a continuación.

Tamaño de hogar	Ingreso anual total de todos orígenes
1	\$16,245
2	\$21,855
3	\$27,465
4	\$33,075
5	\$38,685
6	\$44,295

Para cada persona adicional, agregue \$5,610.

La definición de "ingreso del hogar" (antes de impuestos) es todo el dinero y los beneficios no en efectivo para gastos de manutención de todos orígenes, tanto gravables y no gravables, antes de las deducciones, incluyendo los gastos, para todas las personas que viven en su casa. Esto incluye, pero no se limita a lo siguiente (**Favor de marcar (✓) todo aplicable**):

- | | |
|---|---|
| <input type="checkbox"/> Sueldos, salarios o ganancias de trabajo por cuenta propia | <input type="checkbox"/> Seguro Social |
| <input type="checkbox"/> Discapacidad y / o pagos de remuneración de Worker's Compensation | <input type="checkbox"/> Estampillas de Alimento |
| <input type="checkbox"/> De seguros y / o acuerdos legales | <input type="checkbox"/> TANF (AFDC) |
| <input type="checkbox"/> Pensiones | <input type="checkbox"/> Beneficios de Veteranos Retirados/Jubilados |
| <input type="checkbox"/> Manutención de menores y/o cónyuge | <input type="checkbox"/> Las prestaciones por desempleo |
| <input type="checkbox"/> Becas, subvenciones o ayudas de otros medios utilizados para gastos de manutención | <input type="checkbox"/> Los ingresos por alquiler y / o regalías |
| <input type="checkbox"/> Intereses / dividendos de: ahorro, acciones, bonos, o cuentas de jubilación | <input type="checkbox"/> Dinero en efectivo, regalos y / u otros ingresos |

Por favor escriba la siguiente información. **La información incompleta retrasará su descuento.** El nombre utilizado para solicitar el descuento **debe ser el mismo** que el nombre en el estado de cuenta con Liberty Utilities.

IMPRESA LEGIBLE												
Numero de Cuenta de Liberty Utilities (Como se muestra en la declaración)												
Numero de personas viviendo en el hogar:			Total de ingresos anuales del hogar \$				Numero de telefono					
Nombre en cuenta de Liberty Utilities							Correo Electronico					
Direccion de Servicio con Liberty Utilities												
Ciudad				Estado				Codigo Postal				

Por favor, incluye uno de los temas que figuran como prueba de ingresos para la verificación de elegibilidad: Copia de la declaración de impuestos de el año anterior, o copia de W2 de el año anterior, o copia de tarjetas o cupones para alimentos.

Al firmar, certifico bajo pena de perjurio que esta información es verdadera y correcta bajo las leyes del Estado de Arizona. Voy a presentar pruebas de ingresos y notificaré a Liberty Utilities de cualquier cambio que afecte mi elegibilidad. Entiendo que si recibo el descuento sin reunir los requisitos para ello, se me puede exigir la devolución del descuento que recibí.

Firma

Fecha

Nota: Una aplicación para ARWW deben presentarse cada dos años. Una declaración de elegibilidad deben ser presentados anualmente para su verificación. Por favor, espere 30-45 días para su procesamiento.

Office Use Only: Date Verified _____ Verified By _____ Expires _____



RIO RICO UTILITIES, INC.

WATER DIVISION & WASTEWATER DIVISION

ALTERNATE RATES FOR WATER AND WASTEWATER
LOW INCOME TARIFF

In the Decision the Commission approved an Alternate Rates for Water and Wastewater (“ARWW”) Tariff (“Low Income Tariff”), which is designed to provide relief to RRUI’s lower income ratepayers. The Low Income Tariff applies to residential, single family accommodations and provides for a 15 percent discount applied to the regular tariffed rate for those customers who meet the program qualifications. Initial qualifying annual incomes are set at 150 percent of the 2009 federal poverty levels as follows and will be updated annually:

<u>No. of Person in Household</u>	<u>Total Gross Annual Income</u>
1	\$16,245
2	\$21,855
3	\$27,465
4	\$33,075
5	\$38,685
6	\$44,295
For each additional person residing in the household, add \$5,610	

Customers eligible for the ARWW program must complete an Application and Declaration form, and supply proof of income. Customers enrolled in the ARWW program are required to reapply every two (2) years, or sooner, if requested, and annually recertify by submitting a declaration attesting to continuing eligibility. The ARWW program is limited to 2,200 water division customers and 725 wastewater division customers. A waiting list will be available in the event the participation cap is met.