

CARE/FERA PROGRAM APPLICATION Residential Customers

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 1-866-743-2273

The CARE program offers a monthly discount on PG&E bills for qualifying households. To enroll:

- Check all the qualifying public assistance programs in Section 2A from which you, or someone in your household, receive benefits OR
- Complete Section 2B which includes your household's total gross annual income.*

Other qualifications include:

- Your monthly electric usage does not exceed six times the Tier 1 allowance.
- You are not claimed as a dependent on another person's income tax return other than your spouse.
- You do not share an energy meter with another home.
- You will renew your eligibility at least every two years.

CARE Income Guidelines (good until May 31, 2024)

Number of people in household	Total gross annual household income*					
1–2	\$39,440 or less					
3	\$49,720 or less					
4	\$60,000 or less					
5	\$70,280 or less					
6	\$80,560 or less					
7	\$90,840 or less					
8	\$101,120 or less					
Each additional person, add	\$10,280					

Family Electric Rate Assistance (FERA)

pge.com/fera 1-800-743-5000

If you do not qualify for the CARE program, you may still qualify for the FERA program, which offers a monthly discount on electric bills for households of three or more people with FERA Income Guidelines (good until May 31, 2024)

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Number of people in household	Total gross annual household income*					
1–2	Not eligible					
3	\$49,721-\$62,150					
4	\$60,001-\$75,000					
5	\$70,281-\$87,850					
6	\$80,561-\$100,700					
7	\$90,841-\$113,550					
8	\$101,121-\$126,400					
Each additional person, add	\$10,280-\$12,850					

a slightly higher income than required for CARE.

See the FERA Income Guidelines listed above to find out if you qualify, and enroll by completing the included application.

How you can apply

Online: Apply online for faster enrollment at **pge.com/care**

Phone: Apply by calling **1-866-743-2273**

Email:

Take a picture or scan completed application and email this image to

CAREandFERA@pge.com

Mail:

Send completed application to CARE/FERA Program P.O. Box 7979 San Francisco, CA 94120–7979 Fax:

Send completed application to 1-877-302-7563

Other helpful programs and services

Energy Savings Assistance Program pge.com/energysavings 1-800-933-9555

This program provides energy-efficient home

Energy Savings
Assistance Program

improvements and appliances at no cost to customers who are income qualified. Property owners and renters are eliqible to participate.

Your Account pge.com/youraccount

Log in to Your Account to sign up for billing and payment alerts, analyze your household's energy usage, pay your bills and learn more about your rate plan options.

Budget Billing pge.com/budgetbilling 1-800-743-5000

Your monthly bill will be averaged out to allow you to budget your energy costs and eliminate big payment swings.

Medical Baseline pge.com/medicalbaseline

If you depend on life-support or other equipment due to medical needs, you may be eligible for additional energy at the lowest price through the Medical Baseline program.

Low Income Home Energy Assistance Program (LIHEAP)

1-866-675-6623

If you spend a high percentage of your income on energy bills, you may be eligible to receive financial assistance and weatherproofing services through this program administered by the California Department of Community Services and Development.

Universal Lifeline Telephone Service (ULTS)

Get discounted telephone access when you meet similar income guidelines as the CARE program. To learn more, contact your local phone service provider.

^{*}Total gross annual household income includes all taxable and non-taxable revenues from all people living in the home, from whatever sources derived, including, but not limited to, wages, salaries, interest, dividends, spousal and child support payments, public assistance payments, Social Security and pensions, housing and military subsidies, rental income, income from self-employment and all employment-related, non-cash income.

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

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- 1. Fill out Section 1.
- 2. Fill out Section 2A OR Section 2B.
- 3. Sign and date this form and mail to PG&E.

If you qualify, your CARE or FERA discount will appear on the first page of your next PG\&E bill.

You and your house	hold						11		
			Your PG	&E accour	nt number (F	ind yours or	n page 1	of your PO	3&E bill.
Account holder's name (Use the na	eme as it annears on your	PG&F bill, whi	ch must be ir	vour name	7]				
Account notaer 5 mans (555 m.)	The as it appears on year	FUGE DIG	CITTINGS: S.C.	Tyour na	=.,				
Your home address (Address must l	he vour primary residence	no NOT use a	a P.O. Box.)				Unit #		
	БС Уба. р ,	7.0011							
City/State/Zip Code									
Email address			Preferre	ed phone r	number	☐ Home	☐ Wor	-k □ M	lobile
(By entering your email address, you are authorizin regarding your PG&E utility service and PG&E prog	g PG&E to send you information fr grams and services that may be av	rom time to time railable to you.)							
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What is your preferred method of			74		(under 18)]	
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