

Form No. 23

NOTICE AND APPLICATION FOR THE WATER RATE ASSISTANCE PROGRAM (WRAP)
(Continued)

**APPLICATION FOR SAN JOSE WATER COMPANY'S
WATER RATE ASSISTANCE PROGRAM
PRIMARY RESIDENTIAL CUSTOMER**

(Please type or print)

I am a primary residential customer of San Jose Water Company.

Your name as shown on your San Jose Water Company account

Address where you receive water service

San Jose Water Company Account Number

Telephone no. (home): _____ Telephone no. (work): _____

Number of persons living in your household: _____

Total gross annual income of household: _____

Please attach a copy of your PG&E bill or other proof of income for eligibility verification.

By signing below, I certify under penalty of perjury that this information is true and correct under the laws of the state of California. I will provide proof of income and I will notify San Jose Water Company of any changes that affect my eligibility.

Your signature Date

Please complete the application and submit to:
Customer Service
Water Rate Assistance Program
San Jose Water Company
374 W. Santa Clara Street
San Jose, CA 95196-0001