

June 17, 2005

Brian K. Cherry Director Regulatory Relations 77 Beale Street, Room 1087 San Francisco, CA 94105 Mailing Address Mail Code B10C Pacific Gas and Electric Company P.O. Box 770000 San Francisco, CA 94177

415.973.4977 Internal: 223.4977 Fax: 415.973.7226 Internet: BKC7@pge.com

Advice 2643-G/2677-E

(Pacific Gas and Electric Company ID U39M)

Subject:

Revisions to Form 62-1198—California Alternate Rates for Energy Program Application for Qualified Agricultural Employee Housing Facilities

New Form 61-0535—California Alternate Rates for Energy Program Application for Office of Migrant Services/Non-profit Migrant Farm Worker Housing Centers

Public Utilities Commission of the State of California

Pacific Gas and Electric Company (PG&E) hereby submits for filing revisions to Form 62-1198— <u>California Alternate Rates for Energy Program Application for Qualified Agricultural Employee Housing Facilities</u> and a new Form 61-0535— <u>California Alternate Rates for Energy Program Application for Office of Migrant Services/Non-profit Migrant Farm Worker Housing Centers</u>, as authorized by Decision (D.)05-04-052. The affected tariff sheets are listed on the enclosed Attachment I.

Background

Form 62-1198 provides an application form for participation in the California Alternate Rates for Energy (CARE) Program. PG&E hereby proposes to modify Form 62-1198 to implement eligibility of migrant farm labor centers for CARE.

Assembly Bill (AB) 868, signed by the Governor on September 21, 2004, amended Sections 50710.1 and 50712.5 of the Health and Safety Code related to migrant farm labor centers to deem an entity operating a migrant farm labor center to be eligible for CARE. The assigned Administrative Law Judge (ALJ) in Rulemaking (R.) 04-01-006 issued two rulings on October 1, 2004, and November 22, 2004. The two rulings were designed to ensure utility compliance with the statute's obligations to serve all migrant farm labor centers deemed eligible and to address how to pass savings on to occupants of the centers. The ALJ also required the utilities (PG&E, Southern California Edison, San Diego Gas &

¹ The Commission most recently approved Form 62-1198 in Advice 2322-G/2126-E effective July 1, 2001.

Electric, SoCal Gas) to consult with the California Office of Migrant Services (OMS) which administers the migrant farm housing center program.

The utilities consulted with OMS and filed a plan to comply with AB 868 by automatically enrolling OMS and other qualifying non-profit-administered Migrant Farmworker Housing Centers (MFHC) into the CARE program. The utilities have served OMS centers since 1996, when the CARE program began serving agricultural employee housing centers (see D.95-10-047 and PG&E Tariff Rule 19.3, Cal PUC Sheet No. 13899-E, effective Jan. 23, 1996), and noted that they would need to revise their current applications to automatically enroll these deemed-eligible migrant centers.

Decision 05-04-052, Ordering Paragraphs 24, 25, and 26 ordered:

- the utilities to create a new application for migrant housing centers that did not include the previous requirement that 100% of OMS farmworker housing center residents be eligible for CARE;
- non-profit farmworker housing centers, even if not managed by OMS, shall receive the CARE discount; and
- the IOUs shall use their best efforts to enroll all residents of OMS and nonprofit migrant housing centers in the CARE program within 60 days.

PG&E has worked with the other utilities to revise the applications consistently and has already been in contact with its OMS centers to help them automatically enroll with this new application. The instant Advice Letter submits the revised and new applications for Commission approval.

Proposed Revisions to Form 62-1198 and Need for New Form 61-0535

PG&E proposes the following revisions to Form 62-1198:

- 1. Page 1, INSTRUCTIONS Section, point 2: Delete "Determine" and replace with "DETERMINE".
- 2. Page 2, ELIGIBILITY Section:
 - a. Change section heading from "ELIGIBILITY" to "ELIGIBLE FACILITIES"
 - b. Delete "MIGRANT FARMWORKER HOUSING CENTER" subsection in its entirety.
 - c. HOUSING FOR AGRICULTURAL EMPLOYEES, subsection: Delete "(operated by non-profit entities)" parenthetical and replace with "(non-migrant")
- 3. Page 3, 2. FACILITY INFORMATION Section:
 - a. Delete "MIGRANT FARMWORKER HOUSING CENTER" subsection in its entirety.

b. HOUSING FOR AGRICULTURAL EMPLOYEES, subsection:
Delete "(operated by non-profit entities)" parenthetical and replace
with "(non-migrant")

PG&E proposes to create New Form 61-0535 to address the new MIGRANT FARMWORKER HOUSING CENTERS enrollment criteria codified by AB 868 and mandated by D.05-04-052. These centers were removed from Form 62-1198.

Protests

Anyone wishing to protest this filing may do so by letter sent via U.S. mail, by facsimile or electronically, any of which must be received no later than 20 days after the date of this filing, which is **July 7**, **2005**. Protests should be mailed to:

CPUC Energy Division Attention: Tariff Unit, 4th Floor 505 Van Ness Avenue San Francisco, California 94102

Facsimile: (415) 703-2200

E-mail: jjr@cpuc.ca.gov and jnj@cpuc.ca.gov

Copies of protests also should be mailed to the attention of the Director, Energy Division, Room 4004, at the address shown above.

The protest also should be sent via U.S. mail (and by facsimile and electronically, if possible) to PG&E at the address shown below on the same date it is mailed or delivered to the Commission:

Pacific Gas and Electric Company Attention: Brian Cherry Director, Regulatory Relations 77 Beale Street, Mail Code B10C P.O. Box 770000 San Francisco, California 94177

Facsimile: (415) 973-7226 E-mail: <u>PGETariffs@pge.com</u>

Effective Date

PG&E requests that this advice filing become effective on regular notice, **July 18**, **2005**, which is 31 days after the date of filing.

Notice

In accordance with General Order 96-A, Section III, Paragraph G, a copy of this advice letter is being sent electronically and via U.S. mail to parties shown on the attached list. Address changes should be directed to Rose de la Torre at (415) 973-4716. Advice letter filings can also be accessed electronically at:

http://www.pge.com/tariffs

Brin K. Geny / R. Director, Regulatory Relations

Attachments

cc: Service Lists R.04-01-006

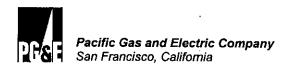
CALIFORNIA PUBLIC UTILITIES COMMISSION

ADVICE LETTER FILING SUMMARY ENERGY UTILITY

MUST BE COMPL	ETED BY UTILITY (A	Attach additional pages as needed)	
Company name/CPUC Utility No. Pa			
Utility type:	Contact Person: Bernard Lam		
☑ ELC ☑ GAS	Phone #: <u>(415)</u> 973-	·4878	
□ PLC □ HEAT □ WATER	E-mail: bxlc@pge.co	o <u>m</u>	
EXPLANATION OF UTILITY 1	TYPE	(Date Filed/ Received Stamp by CPUC)	
ELC = Electric GAS = Gas PLC = Pipeline HEAT = Heat	WATER = Water		
Advice Letter (AL) #: 2643-G/2677-E			
Subject of AL: Revisions to CARE For Centers	m 62-1198 and new	Form 61-0535 for Migrant Farm Worker Housing	
Keywords (choose from CPUC listing):	CARE, Compliance	e, Forms	
AL filing type: \square Monthly \square Quarterly	y □ Annual ☑ One	-Time Other	
If AL filed in compliance with a Comm	ission order, indicat	te relevant Decision/Resolution #:	
<u>D.05-04-052</u>			
Does AL replace a withdrawn or reject	•	<u> </u>	
Summarize differences between the A	L and the prior with	drawn or rejected AL1:	
Resolution Required? Yes No		·.	
Requested effective date: <u>07/18/2005</u>		No. of tariff sheets: 8	
Estimated system annual revenue effe	ect: (%): <u>N/A</u>		
Estimated system average rate effect ((%): <u>N/A</u>		
When rates are affected by AL, include (residential, small commercial, large C		showing average rate effects on customer classes ating).	
Tariff schedules affected: <u>CARE Form</u>	s 62-1198 and 61-05	<u>i35</u>	
Service affected and changes proposed	1: Automatic enrolln	aent of OMS centers in CARE	
Pending advice letters that revise the	same tariff sheets: <u>N</u>	<u>J/A</u>	
		s AL are due no later than 20 days after the le Commission, and shall be sent to:	
CPUC, Energy Division		Pacific Gas and Electric Company	
Attention: Tariff Unit		Attn: Brian K. Cherry Director, Regulatory Relations	
505 Van Ness Ave., San Francisco, CA 94102		77 Beale Street, Mail Code B10C	
jjr@cpuc.ca.gov and jnj@cpuc.ca.go)v	P.O. Box 770000	
m shariouis - ama inj-opacieais		San Francisco, CA 94177 E-mail: PGETariffs@pge.com	

¹ Discuss in AL if more space is needed.

		ATTACHMENT 1 2643-G
Cal P.U.C. Sheet No.	Title of Sheet	Cancelling Cal P.U.C. Sheet No.
23210-G	Sample Forms62-1198Application for Qualified Agricultural Employee Housing Facilities	20603-G
23211-G	Sample Forms61-0535Application for Migrant Farm Worker Housing Centers	New
23212-G	Table of ContentsSample Forms	23149-G
23213-G	Table of ContentsRate Schedules	23180-G
		ATTACHMENT 1 2677-E
Cal P.U.C. Sheet No.	Title of Sheet	
	Title of Sheet Sample Forms62-1198Application for Qualified Agricultural Employee Housing Facilities	2677-E Cancelling Cal
Sheet No.	Sample Forms62-1198Application for Qualified	2677-E Cancelling Cal P.U.C. Sheet No.
Sheet No. 23629-E	Sample Forms62-1198Application for Qualified Agricultural Employee Housing Facilities Sample Forms61-0535Application for Migrant	2677-E Cancelling Cal P.U.C. Sheet No. 18339-E



Revised Revised Cal. P.U.C. Sheet No. Cal. P.U.C. Sheet No.

23210-G 20603-G

PACIFIC GAS AND ELECTRIC COMPANY

CALIFORNIA ALTERNATE RATES FOR ENERGY PROGRAM APPLICATION FOR QUALIFIED AGRICULTURAL EMPLOYEE HOUSING FACILITIES FORM NO. 62-1198 (REV 6/05) (ATTACHED)

(T)

Advice Letter No. Decision No.

2643-G

05-04-052

Issued by Karen A. Tomcala Vice President Regulatory Relations Date Filed June 17, 2005 Effective_ July 18, 2005 Resolution No._



CARE Program Application for Qualified Agricultural Employee Housing Facilities

CARE

www.pge.com/care

Mail Completed Application to: 🖅 P.O. Box 7979, San Francisco, CA 94120-7979
For Questions Call: 🕾 1-866-PGE-CARE (743-2273) Fax: 🗸 415-973-6419

62-1198 Rev. 06/01/05

INSTRUCTIONS

- **1.** READ ALL information and instructions before you complete this application. If you have questions, call Pacific Gas and Electric Company's CARE Program toll-free at 1-866-743-2273 or the Hotline at 415-973-7288.
- 2. DETERMINE if the facility meets the definition of a qualified agricultural employee housing facility. The facility MUST meet ALL criteria to qualify for the 20% discount from the CARE Program.
- **3.** COMPLETE the entire application (please print or type). Complete a separate application for each qualified facility (including satellite facilities).
- 4. ATTACH all required documents. (Application is considered incomplete without documents.)
- 5. MAIL TO:

Pacific Gas and Electric Company CARE Program PO Box 7979 San Francisco, CA 94120-7979

DISCOUNT

The CARE Program provides a 20% discount on the utility bill for facilities that meet program criteria. The discount and eligibility criteria were established by the California Public Utilities Commission. The discounted rates are available only to qualified facilities. The facility will receive the discount after the utility receives and approves the application.

ELIGIBILITY CRITERIA FOR ORGANIZATIONS

Each facility MUST meet ALL of the following criteria:

- Applicant must be the utility customer of record.
- Applicant must verify that 100% of the residents and/or households meet the current CARE income
 guidelines, excluding any employee operating or managing the facility who resides on the facility. (See enclosed sheet for current CARE income guidelines.)
- Applicant is required to certify CARE eligibility annually by completing a new application, including how the discount will be used in the first year for the direct benefit of the residents.

1-866-743-2273

Assistance with the CARE Program in English Giúp xin chương trình CARE bằng tiếng Việt CARE 華語協助專線 Ayuda con el programa CARE en español



CARE Program Application for Qualified Agricultural Employee Housing Facilities

CARE

www.pge.com/care

62-1198

Rev. 06/01/05

ELIGIBLE FACILITIES

EMPLOYEE HOUSING (privately owned), as defined in section 17008 of the health and Safety Code, that is licensed and inspected by state and/or local agencies pursuant to Part I (commencing with Section 17000) of Division 13

- Supporting documentation required:
 - ✓ Provide copy of current permit issued by the Department of Housing and Community Development.
- Total energy used must be 100% residential.

HOUSING FOR AGRICULTURAL EMPLOYEES (non-migrant and operated by non-profit entities), as defined in Subdivision (b) of Section 1140.4 of the Labor Code, that has an exemption from local property taxes pursuant to subdivision (g) of Section 214 of the Revenue and Taxation Code.

- Supporting documentation required:
 - ✓ Provide current copy of federal 501(c)(3) tax exemption or copy of state tax exemption form, and current copy of local property tax exemption form.
- Total Energy used:
 - ✓ Master-metered facilities must be 70% residential use.
 - Individually metered units must be 100% residential use.

APPLICANT'S RESPONSIBILITIES

The applicant is required to:

- Provide proof of facility's eligibility (see Eligible Facilities) and submit required documentation with the application (see requirements on the application).
- Verify that all individuals residing in the facility meet the CARE income eligibility guidelines (see income guideline sheet) and make a certification to that effect, under the penalty of perjury, under the laws of the state of California.
- At annual re-certification, show how the past year's discount was used and how the next year's discount is
 expected to be used for direct benefit of the resident.
- Maintain records of residents' income eligibility, which should come from federal tax return, payroll stubs or similar records acceptable to the utility. These records must be retained for three (3) years from the date of initial application and/or re-certification.
- Maintain accounting entries and supporting documentation of how the discount was used for the direct benefit of the residents. These records must be retained for three (3) years from the date of initial application and/or recertification.
- Upon request from the utility, provide documentation of the residents' income eligibility and/or documentation of how the discount was used for the direct benefit of the residents.
- Provide all information requested by the utility. Failure to do so will result in denial or removal from the program.
 The applicant may be subject to rebilling for the period they were ineligible for the discount as determined by the utility.



CARE Program Application for





www.pge.com/care

Mail Completed Application to: FP.O. Box 7979, San Francisco, CA 94120-7979 For Questions Call: 2 1-866-PGE-CARE (743-2273) Fax: 8 415-973-6419

62-1198

Rev. 06/01/05

APPLICANT INFORMATION: (please printing in the		
Turno on Junty Bin		
Name of Facility		
Service Address	City	CA Zin Code
		· · · · · · · · · · · · · · · · · · ·
Mailing Address(if different)	City	CA Zip Code
Facility Contact	·	
(who to contact if utility needs more information E-mall Address	· ·	
(optional)		
Daytime Phone	Fax	
2 FACILITY INFORMATION:		
Please use a separate application for each	PE of facility	
 EMPLOYEE HOUSING (privately owned), inspected in state and/or local ager 	s defined in Section 17008 of the health a	and Safety Code, that is licensed and
☐ HOUSING FOR AGRICULTURAL EMPLO Subdivision (b) of Section 1140.4 o subdivision (g) of the Revenue and	he Labor Code, that has received exempti	profit entities), as defined in as defined in ions from local property taxes pursuant to
3 RE-CERTIFICATION (please print or type) If re-certifying the facility's eligibility for continuous used by your organization to benefit your organization.	I CARE discounts, please provide an explaents:	anation of how last year's discount saving
This year's discount will be used for:		
4 DECLARATION: (please read carefully and	sign below)	
 Documentation is available to substantia 	households meet CARE income guideline	
By signing below, I certify under penalty of perjunder large to the perjunder are to the perjunder and Electric Company reserves the ribill the Organization at the applicable rate if appropriately utilities, if applicable.	Gas and Electric Company of any change nt to request verification of records demon-	s that may affect eligibility for CARE. strating eligibility at any time and may re-
Authorized Representative's Signature		Date
Authorized Representative's Name		D-4-

5 FOR INDIVIDUAL FACILITIES OF THE SAME TYPE, ATTACH SEPARATE SHEET FOR MORE THAN FIVE (5) ADDRESSES: **PG&E Account Number:** Service ID# Electricity Service Address City__ ____ CA Zip Code Please check: ☐ Individually metered Type of Metering? ☐ Master metered Total Number of residents (excluding on-site manager) _ PG&E Account Number: Service ID # Electricity Service Address City_ _ CA Zip Code _ Please check: Type of Metering? ☐ Individually metered ■ Master metered Total Number of residents (excluding on-site manager) **PG&E Account Number:** Service ID # Electricity Service Address _ City CA Zip Code Please check: Type of Metering? ☐ Individually metered ☐ Master metered Total Number of residents (excluding on-site manager) _ PG&E Account Number: Service ID # Electricity City__ Service Address ____ CA Zip Code _____ Please check: Type of Metering? ☐ Individually metered ☐ Master metered Total Number of residents (excluding on-site manager) **PG&E Account Number:** Service ID # Electricity Service Address City CA ZIp Code Please check: Type of Metering? ☐ Individually metered ■ Master metered Total Number of residents (excluding on-site manager)

Original

Cal. P.U.C. Sheet No. Cal. P.U.C. Sheet No. 23211-G

PACIFIC GAS AND ELECTRIC COMPANY

(N)

CALIFORNIA ALTERNATE RATES FOR ENERGY PROGRAM APPLICATION FOR OFFICE OF MIGRANT SERVICES/NON-PROFIT MIGRANT FARM WORKER HOUSING CENTERS FORM NO. 61-0535 (ATTACHED)

(N)

Advice Letter No. Decision No.

2643-G

05-04-052

Issued by Karen A. Tomcala Vice President Regulatory Relations Date Filed_ June 17, 2005 Effective_ July 18, 2005 Resolution No.



CARE

CARE Program

www.pge.com/care

Mail Completed Application to: ☐ P.O. Box 7979, San Francisco, CA 94120-7979
For Questions Call: ☐ 1-866-PGE-CARE (743-2273) Fax: ☐ 415-973-6419

61-0535 Created 06/01/05

INSTRUCTIONS

- 1. PLEASE READ ALL information and instructions before you complete, sign, and date this application. If you have questions, call 1-415-973-7288, Monday through Friday, 8:00 a.m. to 5:00 p.m.
- 2. DETERMINE if the facility can comply with section 50710.1 (e) of the California Health and Safety Code, or is a non-profit farm worker housing center.
- 3. REVIEW the service agreements in this application to confirm that they are residential end use and included in your facility.
- 4. COMPLETE, SIGN and DATE the application.
- 5. MAIL TO:

Pacific Gas and Electric Company CARE Program PO Box 7979 San Francisco, CA 94120-7979

DISCOUNT

The CARE Program provides a 20% discount on the utility bill for MFHC facilities that meet program criteria. The discount and eligibility criteria were established by the California Public Utilities Commission. The discounted rates, upon formal approval by the California Public Utilities Commission, are available to qualified facilities. The facility will receive the discount after the utility receives the completed and signed application.

ELIGIBILITY CRITERIA FOR ORGANIZATIONS

- MFHC must be the utility customer of record.
- MFHC must verify that the service agreements listed in this application have rates with residential end uses for CARE.
- MFHC must agree to use all CARE savings from a reduction in energy rates for the benefit of the occupants of the
 migrant farm worker center.

1-866-743-2273

Assistance with the CARE Program in English Giúp xin chương trình CARE bằng tiếng Việt CARE 華語協助專線 Ayuda con el programa CARE en español



CARE Program

www.pge.com/care

61-0535

Created 06/01/05

ELIGIBLE FACILITIES

- MIGRANT FARM WORKER HOUSING CENTERS, operated by Office of Migrant Services (OMS),
 Department of Housing and Community Development, provides pursuant to Section 50710 of the 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, that has an exemption from local property taxes pursuant to subdivision
 (g) of Section 214 of the Revenue and Taxation Code.

MIGRANT FARM WORKER HOUSING CENTERS (MFHC) RESPONSIBILITIES

MFHC is REQUIRED to:

- At the time of application for CARE discount, provide a copy of current contract with the Office of Migrant Services, Department of Housing and Community Development or a copy of Federal 501 (c) (3) tax exemption or copy of state tax exemption form and current copy of local property tax exemption form.
- Maintain supporting records and documentation of how savings from the reduction in energy rates benefited the occupants.
- Notify PG&E of any change that would remove or add to eligible service agreements in this application. MFHC
 may be subject to rebilling of any of the service agreements in this application are no longer eligible for the CARE
 discount.
- Update its application annually when notified by PG&E.

1-866-743-2273

Assistance with the CARE Program in English Giúp xin chương trình CARE bằng tiếng Việt CARE 華語協助專線 Ayuda con el programa CARE en españoi





CARE Program

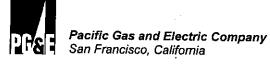
www.pge.com/care

Mail Completed Application to: ☐7 P.O. Box 7979, San Francisco, CA 94120-7979
For Questions Call: ☐71-866-PGE-CARE (743-2273) Fax: ☐8 415-973-6419

61-0535 Created 06/01/05

1 APPLICANT INFORMATION: (please print or type)		
Name on Utility Bill Name of Facility(If different than on bill)		
Service Address	Clty	CA Zip Code
Mailing Address(If different)	City	CA Zip Code
Facility Contact		·
E-mail Address(Optional)		
Daytime Phone	Fax	
2 FACILITY INFORMATION:		
Please use a separate application for each TYPE of facility		
MIGRANT FARM WORKER HOUSING CENTER, operated by O 50710 of the Health and Safety Code	ffice of Migrant S	ervices (OMS), provided pursuant to Section
MIGRANT FARM WORKER HOUSING CENTER, operated by No. 1140.4 of the Labor Code, that has an exemption from loca the Revenue and Taxation Code.	on-profit entities, Il property taxes p	as defined in Subdivision (b) of Section oursuant to subdivision (g) of Section 214 of
3 RE-CERTIFICATION (please print or type) If re-certifying the facility's eligibility for continued CARE discounts, ple was used by your organization to benefit your clients:	ase provide an e	xplanation of how last year's discount savings
This year's discount will be used for:		·
4 DECLARATION: (please read carefully and sign below) By signing this application I certify under penalty of perjury that the information comply with all the eligibility criteria and MFHC responsibilities contained	herein for all of t	he Service Agreements listed in this
application and I give my consent that the information herein may be sha	red with other en	ergy utility companies.
Authorized Representative's Signature		Date
Authorized Representative's Name(Please print or type)		Date

5 FOR INDIVIDUAL FACILITIES OF THE SAME TYPE, ATTACH SEPARATE SHEET FOR MORE THAN FIVE (5) ADDRESSES: PG&E Account Number: Service ID # Electricity Gas Service Address City ___ __ CA Zip Code __ Please check: Type of Metering? ☐ Individually metered ■ Master metered Total Number of residents (excluding on-site manager) _ **PG&E Account Number:** Service ID # Electricity Service Address _ _City_ ____ CA Zip Code Please check: Type of Metering? ☐ Individually metered ■ Master metered Total Number of residents (excluding on-site manager) PG&E Account Number: Service ID # Electricity Service Address City_ CA Zip Code Please check: Type of Metering? ☐ Individually metered ■ Master metered Total Number of residents (excluding on-site manager) **PG&E Account Number:** Service ID # Electricity Service Address City ____ ___ CA Zip Code ___ Please check: Type of Metering? ☐ Individually metered □ Master metered Total Number of residents (excluding on-site manager) PG&E Account Number: Service ID # Electricity Service Address City CA Zip Code ______ Please check: Type of Metering? ☐ Individually metered □ Master metered Total Number of residents (excluding on-site manager)



Revised Revised Cal. P.U.C. Sheet No. Cal. P.U.C. Sheet No.

23212-G 23149-G

	DATE CHONAN	TABLE OF CONTENTS—SAMPLE FORMS (Continued)		
FORM NO.	DATE SHOWN ON FORM	AGREEMENT/CONTRACT TITLE	CPUC SHEET NO.	_
		RULE 2 DESCRIPTION OF SERVICE		
79-255	4/82	Agreement for Installation or Allocation of		
		Special Facilities	11041-G	
01-8670	DE) / 42/05	RULES 3 APPLICATION FOR SERVICE		
02-2590	REV 12/95 REV 10/00	Credit Application	17658-G	
52-25 5 0 52-0683		Interim Service Agreement	20147-G	
	08/02	Application for Service—Residential Service	21168-G	
32-0684	08/02	Application for Service—Residential		
20.000	00/00	Subdivision/Development	21169-G	
32-0685	08/02	Application for Service—Commercial/Industrial		
30 0000		Development	21170-G	
32-0686	08/02	Application for Service—Agricultural Service	21171-G	
52-0687	08/02	Application for Relocation/Rearrangement	21172-G	
		RULE 13 TEMPORARY SERVICE	•	
79-875		Rule 13 Temporary Service Agreement	20657-G	
		RULES 15 AND 16		
		GAS MAIN AND SERVICE EXTENSIONS		
32-0980	REV 6/01	Distribution Service and Extension Agreement	20525-G	
32-0981	REV 5/98	Distribution Service and Extension Agreement	20020 0	
		Option 1—Shared Construction	18829-G	
32-0982	REV 7/04	Distribution Service and Extension Agreement	10023-0	
	7.27 7.07	Option 2—Competitive Bidding	21593-G	
79-716	REV 7/04	General Terms and Conditions for Gas and	21080-G	
0.10	112 7704	Electric Extension and Service Construction		
		by Applicant	20526 0	
79-1003	7/04	Applicant's Cost Verification Form—Statement of Costs	20526-G	
9-1003	7704	for Applicant Installation of PG&E's Distribution and		
70.4004	710.4	Service Facilities	21595-G	
⁷⁹ -1004	7/04	Distribution and Service Extension Agreement Exhibit A		
		Cost Summary	21596-G	
31-3481	REV 7/02	RULE 19 MEDICAL BASELINE QUANTITIES	04400 0	
31-3481 32-3481	REV 7/02 REV 7/02	Medical Baseline Allowance Self-Certification	21123-G	
2-3401	REV //UZ	Medical Baseline Allowance Application	21122-G	
		RULES 19.1, 19.2, AND 19.3		
1-9077	DEV 6/05	CALIFORNIA ALTERNATE RATES FOR ENERGY	00445-0	
	REV 6/05	Application for Residential Single-Family Customers	23145-G	
11-9285	REV 6/05	Application for Tenants of Sub-Metered Facilities	23146-G	
2-0156	REV 7/01	Application for Qualified Nonprofit Group-Living		
2-1198	REV 6/05	Facilities	20602-G	/1
2-1190	מטוס אבא		00040 0	(1
1 0525	RIDE	Facilities	23210-G	Ü.
61-0535 62-1477	6/05 DEV 6/05	Application for Migrant Farm Worker Housing Centers	23211-G	(1)
	REV 6/05	Income Guidelines	23147-G	
3-006	REV 6/05	Postage-Paid Application	23148-G	

Revised Revised Cal. P.U.C. Sheet No. Cal. P.U.C. Sheet No.

23213-G 23181-G

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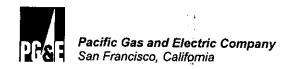
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Revised Revised Cal. P.U.C. Sheet No. Cal. P.U.C. Sheet No. 23629-E 18339-E

PACIFIC GAS AND ELECTRIC COMPANY

CALIFORNIA ALTERNATE RATES FOR ENERGY PROGRAM APPLICATION FOR QUALIFIED AGRICULTURAL EMPLOYEE HOUSING FACILITIES FORM NO. 62-1198 (REV 6/05) (ATTACHED)

(T)

Advice Letter No. Decision No.

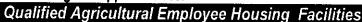
2677-E

05-04-052

Issued by Karen A. Tomcala Vice President Regulatory Relations Date Filed_ June 17, 2005 Effective_ July 18, 2005 Resolution No.



CARE Program Application for



Mail Completed Application to: 3 P.O. Box 7979, San Francisco, CA 94120-7979 For Questions Call: 曾1-866-PGE-CARE (743-2273) Fax: 過415-973-6419

62-1198 Rev. 06/01/05

www.pge.com/care

INSTRUCTIONS

- 1. READ ALL information and instructions before you complete this application. If you have questions, call Pacific Gas and Electric Company's CARE Program toll-free at 1-866-743-2273 or the Hotline at 415-973-7288.
- 2. DETERMINE if the facility meets the definition of a qualified agricultural employee housing facility. The facility MUST meet ALL criteria to qualify for the 20% discount from the CARE Program.
- 3. COMPLETE the entire application (please print or type). Complete a separate application for each qualified facility (including satellite facilities).
- 4. ATTACH all required documents. (Application is considered incomplete without documents.)
- 5. MAIL TO:

Pacific Gas and Electric Company CARE Program PO Box 7979 San Francisco, CA 94120-7979

DISCOUNT

The CARE Program provides a 20% discount on the utility bill for facilities that meet program criteria. The discount and eligibility criteria were established by the California Public Utilities Commission. The discounted rates are available only to qualified facilities. The facility will receive the discount after the utility receives and approves the application.

ELIGIBILITY CRITERIA FOR ORGANIZATIONS

Each facility MUST meet ALL of the following criteria:

- Applicant must be the utility customer of record.
- Applicant must verify that 100% of the residents and/or households meet the current CARE income guidelines, excluding any employee operating or managing the facility who resides on the facility. (See enclosed sheet for current CARE income guidelines.)
- Applicant is required to certify CARE eligibility annually by completing a new application, including how the discount will be used in the first year for the direct benefit of the residents.

1-866-743-2273

Assistance with the CARE Program in English Giúp xin chương trình CARE bằng tiếng Việt CARE 華語協助專線 Ayuda con el programa CARE en español



CARE Program Application for Qualified Agricultural Employee Housing Facilities

CARE

www.pge.com/care

Mail Completed Application to: ☐ P.O. Box 7979, San Francisco, CA 94120-7979
For Questions Call: ☐ 1-866-PGE-CARE (743-2273) Fax: ☐ 415-973-6419

Rev. 06/01/05

ELIGIBLE FACILITIES

EMPLOYEE HOUSING (privately owned), as defined in section 17008 of the health and Safety Code, that is licensed and inspected by state and/or local agencies pursuant to Part I (commencing with Section 17000) of Division 13

- Supporting documentation required:
 - ✓ Provide copy of current permit issued by the Department of Housing and Community Development.
- Total energy used must be 100% residential.

HOUSING FOR AGRICULTURAL EMPLOYEES (non-migrant and operated by non-profit entities), as defined in Subdivision (b) of Section 1140.4 of the Labor Code, that has an exemption from local property taxes pursuant to subdivision (g) of Section 214 of the Revenue and Taxation Code.

- Supporting documentation required:
 - Provide current copy of federal 501(c)(3) tax exemption or copy of state tax exemption form, and current copy of local property tax exemption form.
- Total Energy used:
 - ✓ Master-metered facilities must be 70% residential use.
 - ✓ Individually metered units must be 100% residential use.

APPLICANT'S RESPONSIBILITIES

The applicant is required to:

- Provide proof of facility's eligibility (see Eligible Facilities) and submit required documentation with the application (see requirements on the application).
- Verify that all individuals residing in the facility meet the CARE income eligibility guidelines (see income guideline sheet) and make a certification to that effect, under the penalty of perjury, under the laws of the state of California.
- At annual re-certification, show how the past year's discount was used and how the next year's discount is
 expected to be used for direct benefit of the resident.
- Maintain records of residents' income eligibility, which should come from federal tax return, payroll stubs or similar records acceptable to the utility. These records must be retained for three (3) years from the date of initial application and/or re-certification.
- Maintain accounting entries and supporting documentation of how the discount was used for the direct benefit of
 the residents. These records must be retained for three (3) years from the date of initial application and/or recertification.
- Upon request from the utility, provide documentation of the residents' income eligibility and/or documentation of how the discount was used for the direct benefit of the residents.
- Provide all information requested by the utility. Failure to do so will result in denial or removal from the program.
 The applicant may be subject to rebilling for the period they were ineligible for the discount as determined by the utility.



Authorized Representative's Signature ___

Authorized Representative's Name_

(Please print or type)

www.pge.com/care

CARE Program Application for

Qualified Agricultural Employee Housing Facilities

CARE Program

Mail Completed Application to: @ P.O. Box 7979, San Francisco, CA 94120-7979 For Questions Call: 2 1-866-PGE-CARE (743-2273) Fax: 惠 415-973-6419

62-1198

Rev. 06/01/05

APPLICANT INFORMATION: (please print or	type)	
Name on Utility Bill		
Name of Facility		
Service Address	City	CA Zip Code
Name of Facility (if different than on bill) Service Address City CA Zip Code Mailing Address (if different) Facility Contact (who to contact if utility needs more information) E-mail Address (optional) Daytime Phone FACILITY INFORMATION: Please use a separate application for each TYPE of facility EMPLOYEE HOUSING (privately owned), as defined in Section 17008 of the health and Safety Code, that is licensed and inspected in state and/or local agencies pursuant to part 1 of Division 13. HOUSING FOR AGRICULTURAL EMPLOYEES (non-migrant and operated by non-profit entities), as defined in as define Subdivision (b) of Section 1140.4 of the Labor Code, that has received exemptions from local property taxes pursua subdivision (g) of the Revenue and Taxation Code. RE-CERTIFICATION (please print or type) If re-certifying the facility's eligibility for continued CARE discounts, please provide an explanation of how last year's discount swas used by your organization to benefit your clients:		
Facility Contact (who to contact if utility needs more information)		· · · · · · · · · · · · · · · · · · ·
E-mail Address		
(optional) Daytime Phone		
2 FACILITY INFORMATION:		
	of facility	
EMPLOYEE HOUSING (privately owned), as de inspected in state and/or local agencies p	efined in Section 17008 of the healti pursuant to part 1 of Division 13.	h and Safety Code, that is licensed and
Subdivision (b) of Section 1140.4 of the L	abor Code, that has received exem	
3 RE-CERTIFICATION (please print or type)		
		xplanation of how last year's discount savings
This year's discount will be used for:		
4 DECLARATION: (please read carefully and sign	n below)	
	seholds meet CARE income guideli e above.	
By signing below, I certify under penalty of perjury that declaration is valid for one year, I will notify Pacific Gas Pacific Gas and Electric Company reserves the right to bill the Organization at the applicable rate if appropriate energy utilities, if applicable.	s and Electric Company of any chan request verification of records dem	nges that may affect eligibility for CARE. nonstrating eligibility at any time and may re-

Date

_ Date

5 FOR INDIVIDUAL FACILITIES OF THE SAME TYPE, ATTACH SEPARATE SHEET FOR MORE THAN FIVE (5) ADDRESSES: **PG&E Account Number:** Service ID# Electricity Service Address CA Zip Code City Please check: Type of Metering? ☐ Individually metered □ Master metered Total Number of residents (excluding on-site manager) **PG&E Account Number:** Service ID# Electricity City Service Address CA Zip Code Please check: Type of Metering? ☐ Individually metered ☐ Master metered Total Number of residents (excluding on-site manager) PG&E Account Number: Service ID #. Electricity **Service Address** City CA Zip Code Please check: Type of Metering? ☐ Individually metered ☐ Master metered Total Number of residents (excluding on-site manager) **PG&E Account Number:** Service ID # Electricity Gas Service Address CA Zip Code City Please check: Type of Metering? ☐ Individually metered ☐ Master metered **Total Number of residents** (excluding on-site manager) **PG&E Account Number:** Service ID# Electricity Gas Service Address City CA Zip Code ___ Please check: Type of Metering? □ Individually metered □ Master metered Total Number of residents (excluding on-site manager) _

Original

Cal. P.U.C. Sheet No. Cal. P.U.C. Sheet No.

23630-E

PACIFIC GAS AND ELECTRIC COMPANY

(N)

CALIFORNIA ALTERNATE RATES FOR ENERGY PROGRAM APPLICATION FOR OFFICE OF MIGRANT SERVICES/NON-PROFIT MIGRANT FARM WORKER HOUSING CENTERS FORM NO. 61-0535 (ATTACHED)

(N)

Advice Letter No. Decision No.

2677-E 05-04-052 Issued by
Karen A. Tomcala
Vice President
Regulatory Relations



CARE Program

www.pge.com/care

Mail Completed Application to: ☑ P.O. Box 7979, San Francisco, CA 94120-7979
For Questions Call: ☎ 1-866-PGE-CARE (743-2273) Fax: № 415-973-6419

61-0535

Created 06/01/05

INSTRUCTIONS

- 1. PLEASE READ ALL information and instructions before you complete, sign, and date this application. If you have questions, call 1-415-973-7288, Monday through Friday, 8:00 a.m. to 5:00 p.m.
- 2. DETERMINE if the facility can comply with section 50710.1 (e) of the California Health and Safety Code, or is a non-profit farm worker housing center.
- **3.** REVIEW the service agreements in this application to confirm that they are residential end use and included in your facility.
- 4. COMPLETE, SIGN and DATE the application.
- 5. MAIL TO:

Pacific Gas and Electric Company CARE Program PO Box 7979 San Francisco, CA 94120-7979

DISCOUNT

The CARE Program provides a 20% discount on the utility bill for MFHC facilities that meet program criteria. The discount and eligibility criteria were established by the California Public Utilities Commission. The discounted rates, upon formal approval by the California Public Utilities Commission, are available to qualified facilities. The facility will receive the discount after the utility receives the completed and signed application.

ELIGIBILITY CRITERIA FOR ORGANIZATIONS

- MFHC must be the utility customer of record.
- MFHC must verify that the service agreements listed in this application have rates with residential end uses for CARE.
- MFHC must agree to use all CARE savings from a reduction in energy rates for the benefit of the occupants of the migrant farm worker center.

1-866-743-2273

Assistance with the CARE Program in English Giúp xin chương trình CARE bằng tiếng Việt CARE 華語協助專線 Ayuda con el programa CARE en español



CARE Program

www.pge.com/care

Mail Completed Application to: ☐ P.O. Box 7979, San Francisco, CA 94120-7979
For Questions Call: 25 1-866-PGE-CARE (743-2273) Fax: 25 415-973-6419

61-0535 Created 06/01/05

ELIGIBLE FACILITIES

- MIGRANT FARM WORKER HOUSING CENTERS, operated by Office of Migrant Services (OMS),
 Department of Housing and Community Development, provides pursuant to Section 50710 of the health and Safety Code.
- MIGRANT FARM WORKER HOUSING CENTERS, operated by non-profit entitles, as defined in Subdivision (b) of Section 1140.4 of the Labor Code, that has an exemption from local property taxes pursuant to subdivision (g) of Section 214 of the Revenue and Taxation Code.

MIGRANT FARM WORKER HOUSING CENTERS (MFHC) RESPONSIBILITIES

MFHC is REQUIRED to:

- At the time of application for CARE discount, provide a copy of current contract with the Office of Migrant Services,
 Department of Housing and Community Development or a copy of Federal 501 (c) (3) tax exemption or copy of
 state tax exemption form and current copy of local property tax exemption form.
- Maintain supporting records and documentation of how savings from the reduction in energy rates benefited the
 occupants.
- Notify PG&E of any change that would remove or add to eligible service agreements in this application. MFHC
 may be subject to rebilling of any of the service agreements in this application are no longer eligible for the CARE
 discount.
- Update its application annually when notified by PG&E.

1-866-743-2273

Assistance with the CARE Program in English Giúp xin chương trình CARE bằng tiếng Việt CARE 華語協助專線 Ayuda con el programa CARE en español



CARE

CARE Program

www.pge.com/care

Mail Completed Application to: ☐ P.O. Box 7979, San Francisco, CA 94120-7979
For Questions Call: 25 1-866-PGE-CARE (743-2273) Fax: 25 415-973-6419

61-0535 Created 06/01/05

1 APPLICANT INFORMATION: (please print or type)		
Name on Utility Bill Name of Facility(If different than on bill)		
City CA Zip Code		
Mailing Address(If different)	City	CA Zip Code
Daytime Phone	Fax	
2 FACILITY INFORMATION:		
Please use a separate application for each TYPE of facility		
MIGRANT FARM WORKER HOUSING CENTER, operated by 50710 of the Health and Safety Code	Office of Migrant Sen	vices (OMS), provided pursuant to Section
1140.4 of the Labor Code, that has an exemption from lo		
If re-certifying the facility's eligibility for continued CARE discounts,	olease provide an exp	elanation of how last year's discount savings
·		
4 DECLARATION: (please read carefully and sign below) By signing this application I certify under penalty of perjury that the info comply with all the eligibility criteria and MFHC responsibilities contains	ormation contained he	erein is true and accurate and agree to
Authorized Representative's Signature		Date
Authorized Representative's Name (Please print or type)		Date

5 FOR INDIVIDUAL FACILITIES OF THE SAME TYPE, ATTACH SEPARATE SHEET FOR MORE THAN FIVE (5) ADDRESSES: PG&E Account Number: Service ID # Electricity Gas Service Address City CA Zip Code _ Please check: ☐ Individually metered Type of Metering? ■ Master metered Total Number of residents (excluding on-site manager) **PG&E Account Number:** Service ID # Electricity Gas Service Address _ City CA Zip Code Please check: Type of Metering? ☐ Individually metered ■ Master metered Total Number of residents (excluding on-site manager) **PG&E Account Number:** Service ID # Electricity Service Address_ City CA Zip Code Please check: Type of Metering? □ Individually metered □ Master metered Total Number of residents (excluding on-site manager) **PG&E Account Number:** Service ID # Electricity Service Address_ City_ CA Zip Code Please check: Type of Metering? ☐ Individually metered □ Master metered Total Number of residents (excluding on-site manager) **PG&E Account Number:** Service ID # Electricity Service Address City ___ ___ CA Zip Code _ Please check: Type of Metering? ☐ Individually metered □ Master metered Total Number of residents (excluding on-site manager)

Revised Revised Cal. P.U.C. Sheet No. Cal. P.U.C. Sheet No.

23631-E 23429-E

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Advice Letter No. 2677-E Decision No. 05-04-052 Issued by
Karen A. Tomcala
Vice President
Regulatory Relations

Revised Revised Cal. P.U.C. Sheet No. Cal. P.U.C. Sheet No.

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Advice Letter No. Decision No.

2677-E 05-04-052 Issued by
Karen A. Tomcala
Vice President
Regulatory Relations

PG&E Gas and Electric Advice Filing List General Order 96-A, Section III(G)

ABAG Power Pool

Accent Energy

Aglet Consumer Alliance

Agnews Developmental Center

Ahmed, Ali

Alcantar & Elsesser

Anderson Donovan & Poole P.C.

Applied Power Technologies

APS Energy Services Co Inc.

Arter & Hadden LLP

Avista Corp

Barkovich & Yap, Inc.

BART

Bartle Wells Associates .

Blue Ridge Gas

Bohannon Development Co

BP Energy Company

Braun & Associates

C & H Sugar Co.

CA Bldg Industry Association

CA Cotton Ginners & Growers Assoc.

CA League of Food Processors

CA Water Service Group

California Energy Commission

California Farm Bureau Federation

California Gas Acquisition Svcs

California ISO

Calpina

Calpine Corp

Calpine Gilroy Cogen

Cambridge Energy Research Assoc

Cameron McKenna

Cardinal Cogen

Celinet Data Systems

Chevron USA Production Co.

Childress, David A.

City of Glendale

City of Healdsburg

City of Palo Alto

City of Redding

CLECA Law Office

Constellation New Energy

Cooperative Community Energy

CPUC

Creative Technology

Cross Border Inc.

Crossborder Inc.

CSC Energy Services

Davis, Wright Tremaine LLP

Davis, Wright, Tremaine, LLP

Defense Fuel Support Center

Department of the Army

Department of Water & Power City

DGS Natural Gas Services

DMM Customer Services

Douglass & Liddeil

Downey, Brand, Seymour & Rohwer

Duke Energy

Duke Energy North America

Duncan, Virgii E.

Dutcher, John

Dynegy Inc.

Ellison Schneider

Energy Law Group LLP

Energy Management Services, LLC

Enron Energy Services

Exelon Energy Ohlo, Inc.

Exeter Associates

Foster Farms

Foster, Wheeler, Martinez

Franciscan Mobilehome

Future Resources Associates, Inc.

G. A. Krause & Assoc

Gas Transmission Northwest Corporation

GLJ Energy Publications

. Goodin, MacBride, Squeri, Schlotz &

Hanna & Morton

Heeg, Peggy A.

Hitachi Global Storage Technologies

Hogan Manufacturing, Inc.

House, Lon

Imperial Irrigation District

Integrated Utility Consulting Group

International Power Technology

Interstate Gas Services, Inc.

J. R. Wood, Inc.

JTM, Inc

Kaiser Cement Corp

Korea Elec Power Corp

Luce, Forward, Hamilton & Scripps

Marcus, David

Masonite Corporation

Matthew V. Brady & Associates

Maynor, Donald H.

McKenzie & Assoc

McKenzie & Associates

Meek, Daniel W.

Mirant California, LLC

Modesto Irrigation Dist

Morrison & Foerster

Morse Richard Weisenmiller & Assoc.

Navigant Consulting

New United Motor Mfg, Inc.

Norris & Wong Associates

North Coast Solar Resources

Northern California Power Agency

Office of Energy Assessments

Palo Alto Muni Utilities

PG&E National Energy Group

Pinnacle CNG Company

PITCO

Pturimi, Inc.

PPL EnergyPlus, LLC

Praxair, Inc.

Price, Roy

Product Development Dept

R. M. Hairston & Company

R. W. Beck & Associates

Recon Research

Regional Cogeneration Service

RMC Lonestar

Sacramento Municipal Utility District

SCD Energy Solutions

Seattle City Light

Sempra

Sempra Energy

Sequola Union HS Dist

SESCO

Sierra Pacific Power Company

Silicon Valley Power

Simpson Paper Company

Smurfit Stone Container Corp

Southern California Edison

SPURR

St. Paul Assoc

Stanford University

Sutherland, Asbill & Brennan

Tabors Caramanis & Associates

Tansev and Associates

Tecogen, inc

TFS Energy

Transwestern Pipeline Co

Turlock Irrigation District

U S Borax, Inc

United Cogen Inc.

URM Groups

Utility Cost Management LLC

Utility Resource Network
Wellhead Electric Company

Western Hub Properties, LLC

White & Case

WMA