

INFORMATION

The California Alternate Rates for Energy (CARE) program provides a discount of up to 30 percent on monthly utility bills for eligible customers.

Family Electric Rate Assistance (FERA) program provides a discount of 18 percent on monthly electric bills for qualified households of 3 or more.

If you have any questions, please call:
1-800-798-5723

Spanish (Español): 877-226-6011

Chinese (中文): 800-843-8343

Korean (한국어): 800-628-3061

Vietnamese (Việt): 800-327-3031

Hearing Impaired (TDD/TTY): 800-352-8580

Please tear off this panel, seal and mail the completed application to Southern California Edison. No postage is necessary.

We offer many programs, tools, incentives, and rebates designed to help you reduce your energy usage and control your energy costs at home and work. Visit sce.com/billhelp to learn more about all of our helpful programs and services including:

- The **Energy Savings Assistance (ESA)** initiative aims to aid in energy conservation efforts and facilitate cost savings.
- The **Medical Baseline Program** offers supplementary kilowatt hours to eligible customers with specific medical conditions.
- The **Low Income Home Energy Assistance Program (LIHEAP)** extends support for bill payments to qualifying individuals.
- The **Arrearage Management Plan (AMP)** offers a debt forgiveness payment plan alternative to eligible participants.
- **California Lifeline**, a state program providing discounted home or cellular phone services to eligible households.
- Plus, much more...

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NECESSARY
IF MAILED
IN THE
UNITED STATES



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**SOUTHERN CALIFORNIA EDISON
CARE / FERA PROGRAM
PO BOX 9527
AZUSA CA 91702-9954**



CARE/FERA

Our California Alternate Rates for Energy (CARE) and Family Electric Rate Assistance (FERA) financial assistance programs.

CARE/FERA Program Income Guidelines

For New Enrollment



RATE DISCOUNT APPLICATION

New Enrollees: Please complete the entire application, sign and return. Existing participants: no action is required to continue your participation.

HOUSEHOLD INFORMATION

Service Account No. 8 Customer Account No. 7

Account Holder Name _____

Service Address _____

Mailing Address (if different) _____

Phone No. _____ Mobile Landline Email _____

No. Household Members Adults: _____ Children: _____ Total: _____

ELIGIBILITY If you check one or more programs listed below, you may skip the household income portion. However, if you complete the household income portion, you may qualify for additional discounts as new programs become available.

Does anyone in your household actively participate in one of the following Public Assistance Programs? Check all that apply: (CARE Program Only)

- Medi-Cal/Medicaid Medi-Cal for Families (A & B) Supplemental Security Income (SSI) Bureau of Indian Affairs
- CalFresh/SNAP WIC National School Lunch Tribal Head Start
- CalWorks/TANF LIHEAP Tribal TANF

You may enroll in either CARE or FERA utilizing your household income.

GROSS annual income includes all income from all sources before taxes and deductions.

Total Gross annual household income \$ _____ .00

Please check the source(s) for all household income. Check all that apply:

- Pension Wages/Self-Employment Profits Interest or Dividends Scholarships, Grants or Other Aid
- Social Security Disability/Workers' Comp Rental or Royalty Income Insurance or Legal Settlements
- SSP or SSDI Unemployment Benefits Spousal or Child Support Cash or Other Income

By completing this application, you affirm the accuracy of the information provided, agree to provide proof of income or eligibility upon request, and authorize SCE to share your information with other utilities, SCE contractors, state and federal agencies, and entities designated by the CPUC about other residential assistance programs. Additionally, you consent to receiving promotional messages via phone, text, and email regarding voluntary participation in other programs and services, and you can later opt out of these messages. Your participation is subject to the terms and conditions at sce.com/carefera.

Customer Signature _____

Date _____

Source Code (SCE Use Only):

sce.com/privacy

PP 14-782



Two ways to qualify...

You can qualify for CARE, if someone in your household participates in one of the approved Public Assistance Programs

or

You can qualify for CARE or FERA if your household meets the Income Requirements listed below:

Household Size	Total Combined Gross Annual Income*	
	Max. Income CARE	Max. Income FERA
1-2	up to \$40,880	Not eligible
3	up to \$51,640	\$51,641-\$64,550
4	up to \$62,400	\$62,401-\$78,000
5	up to \$73,160	\$73,161-\$91,450
Each add'l person	up to \$10,280	\$10,760-\$13,450

*GROSS annual income includes all income from all sources before taxes and deductions

Income Guidelines valid from June 1, 2024 to May 31, 2025

For faster enrollment visit us online at sce.com/carefera

or scan the QR Code below.



Or you can enroll via Interactive Voice Line at 800-798-5723.

Input your Electric Service Account number when prompted for account information.

Residents of Catalina Island:

Applicants for the CARE program for Electric Service (30% discount), will be automatically registered for CARE for Gas Service (20% discount) and CARE for Water Service (30% discount). To qualify for these discounts, it is essential to have active account(s) for the respective service(s).

FERA is applicable to electric service only.

To learn how SCE protects your privacy, visit us at sce.com/privacy

NO STAPLES

Please Moisten and Seal

NO TAPE