

## **RESOLUTION 2021-GG**

### **A RESOLUTION OF THE TOWN OF EATONVILLE, WASHINGTON, AUTHORIZING THE USE OF AMERICAN RESCUE PLAN ACT FUNDS TO IMPLEMENT A UTILITY ASSISTANCE PROGRAM**

**WHEREAS**, the Eatonville Town Council recognizes that one of its essential functions is to promote public health by continuing to mitigate the economic impacts of the COVID-19 pandemic on Town of Eatonville utility customers; and

**WHEREAS**, the Utility Assistance Program is necessary to further the Town's purposes of protecting public health, safety and welfare during the COVID-19 pandemic, preventing local economic collapse due to the loss of jobs and businesses within the Town by offering utility billing credits to those customers who have been impacted by COVID-19; and

**WHEREAS**, the US Department of the Treasury launched the Coronavirus State and Local Fiscal Recovery Funds established by the American Rescue Plan Act of 2021 ("ARPA"); and

**WHEREAS**, ARPA funds are designed to help bolster response to the COVID-19 emergency and its economic impacts; and

**WHEREAS**, the Town of Eatonville will receive a total of \$844,702 in ARPA Funds to help support immediate economic stabilization for households and businesses; and

**WHEREAS**, the Public Utilities Committee met, discussed and recommends the adoption of a utility assistance policy that would allow for customers, as well as owners of tenant-occupied properties, assistance; and

**WHEREAS**, the Eatonville Town Council authorizes the Mayor or designee to approve expenditures related to COVID-19 relief from the ARPA funds, including the creation of the Utility Assistance Program, attached hereto as exhibit A; now therefore

### **THE TOWN COUNCIL OF THE TOWN OF EATONVILLE, WASHINGTON, HEREBY RESOLVES AS FOLLOWS:**

**THAT:** The Utility Assistance Program Policy is approved, and the Town Council hereby authorizes the Mayor or designee to distribute utility credits to Town of Eatonville utility customers as described in Attachment A, Utility Assistance Program Policy.

**PASSED** by the Council of The Town of Eatonville at a regular meeting this 9<sup>th</sup> day of August.

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Mike Schaub, Mayor

ATTEST:

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Miranda Doll, Town Clerk



**TOWN OF EATONVILLE  
UTILITY ASSISTANCE PROGRAM POLICY**

**Background:**

The US Dept of the Treasury launched the Coronavirus State and Local Fiscal Recovery Funds, established by the American Rescue Plan Act of 2021 (ARPA), providing \$350 billion in emergency funding for eligible state, local, territorial and Tribal Governments. These ARPA funds are designed to help bolster response to the COVID-19 emergency and its economic impacts.

The Town of Eatonville will receive a total of \$844,702.00 in ARPA funds, \$422,351.00 in 2021 and the remaining in 2022. In order to help support immediate economic stabilization for households and businesses, the Town of Eatonville wishes to use a portion of these funds for a Utility Assistance Program.

**Funding:**

The Town Council is allocating \$150,000 for use in 2021 and \$60,000 for use in 2022 from the Town's portion of ARPA funding to implement a Utility Assistance Program.

**Purpose:**

To help citizens of the Town of Eatonville who have been impacted by COVID-19 with all or part of their Town of Eatonville Utility Bills in any of the billing periods from March 2020 through-December 2022. Qualifying customers are eligible for a one-time account credit, equal to the total account balance or up to \$2,000.00, whichever is less. Qualifying customers may also apply for monthly continued support up to \$250.00 per month, not to exceed account balance.

**Who can apply:**

- Owner or tenant of property with a Town of Eatonville utility account.
- Landlord or owner of property occupied by a tenant with a Town of Eatonville utility account (credit will be applied to tenants past due bill).
- Business owner with a Town of Eatonville utility account.

**Qualifications:**

- Account holder must have been negatively impacted by COVID-19 in one of the following ways:
  - Loss of work
  - Reduction of work hours
  - Loss of Childcare due to COVID-19
  - Illness or family member illness
  - Other impacts as determined (explain in detail on application)
  - Business only-Loss of revenue or staffing due to COVID-19

**Limit on use of funds:**

- The disbursement of funds is restricted to payment of utility bills only. The funds cannot be used to pay the following:
  - NSF Fees

- Reconnect Fees
- Utility Deposits
- Applications for the One-time account credit may only be submitted one time per account.
- There is no limit to the number of times an account holder or landlord may apply for the monthly continued support. Funds will be awarded as they remain available.
- Funds, whether one-time credit or monthly continued support, will only be issued one time per month, per account.

**To Apply:**

- Complete the Assistance Program application\*
- Attach documentation of household income (a paystub, W2, or other verification)\*\*
- Attach a copy of identification (Driver's License, Passport, etc.). Address on identification must match service address.

\*Required for consideration

\*\*Strongly encouraged, however, consideration will not be denied based on failure to produce documentation of household income.

Please note: Funds are credited directly to your Town of Eatonville Utility Bill and will not be issued to customer as a payment.

Limited funds are available and will be awarded on a first come first served basis, determined by completed applications and proper documentation.

**Duration:**

This program will be in effect for the billing periods March 2020 through December 2022.



**TOWN OF EATONVILLE  
UTILITY ASSISTANCE PROGRAM APPLICATION**

Application for utility assistance as funded by and allowed under the  
American Rescue Plan Act of 2021 (ARPA)

**PLEASE PROVIDE ANY SUPPORTING DOCUMENTS WITH THIS APPLICATION.** Complete front and back of the application.

**Support Type:** \_\_\_\_\_ *One-time account credit* \_\_\_\_\_ *Monthly continued support*

\_\_\_\_\_  
Applicant name

\_\_\_\_\_  
Date

\_\_\_\_\_  
Physical Address

\_\_\_\_\_  
Phone Number

\_\_\_\_\_  
Email Address

\_\_\_\_\_  
Utility Account #

**LANDLORD OR OWNER OF OCCUPIED PROPERTY – USE SECTION C**

**SECTION A: DECLARATION OF HOUSEHOLD INCOME AND DESCRIPTION**

Please select all that apply for the last three months and provide appropriate documentation:

1. Income/Benefits from the following sources:  
\_\_\_\_ Wages/Earned Income      \_\_\_\_ Unemployment Compensation  
\_\_\_\_ Social Security Income      \_\_\_\_ Other Income  
\_\_\_\_ Veteran's Assistance
2. TOTAL MONTHLY INCOME \_\_\_\_\_

**SECTION B: CIRCUMSTANCES**

3. \_\_\_\_ Death of immediate family member due to COVID-19  
\_\_\_\_ Loss of job or income due to COVID-19  
\_\_\_\_ Loss of childcare due to COVID-19  
\_\_\_\_ Sudden illness or injury due to COVID-19  
\_\_\_\_ Substantial loss of funds due to COVID-19  
\_\_\_\_ Severely disabled or ill household member due to COVID-19  
\_\_\_\_ Other (Please describe in detail on next page)

**EXTENUATING CIRCUMSTANCES:** Please use the back of this application to provide an explanation for any checked items. Attach additional pages if needed.

Please give a complete account of the circumstances and provide supporting documentation (pay stub, letter from employer, unemployment, etc.)

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I certify that I have provided and reviewed the information on this application. This information is accurate to the best of my knowledge. I also give my permission for the Town of Eatonville's Utility Assistance Program Representative to request/release necessary information that may result in my receiving benefits. I hereby authorize the Town of Eatonville to release billing information to the Town's Utility Assistance Program Representative in order to process my application.

I understand that I may or may not receive assistance under this program and, if assistance is provided, it will be in the form of payment directly to my Utility Account.

Applicant Signature \_\_\_\_\_ Date \_\_\_\_\_

**SECTION C: LANDLORD OR OWNER OF TENANT OCCUPIED PROPERTY**

I certify that I am the landlord or owner of the property listed above and am facing a financial hardship due to the State of Emergency's eviction moratorium and the Ratepayer Assistance and Preservation of Essential Services Proclamation. I am requesting utility assistance for my tenants past due utility account.

Signature \_\_\_\_\_ Date \_\_\_\_\_

Submit Completed form to:  
Town of Eatonville  
Utility Assistance Program  
PO Box 309  
Eatonville, WA 98328

Or drop off in the Utility Drop Box  
201 Center St W, Eatonville WA

**SECTION D: UTILITY ASSISTANCE REVIEWER-FOR OFFICIAL USE ONLY**

\_\_\_ Approved \$ \_\_\_\_\_  
\_\_\_ Disapproved

Reviewed by: \_\_\_\_\_ Date: \_\_\_\_\_

Authorized by: \_\_\_\_\_ Date: \_\_\_\_\_