



19601 NE Halsey Street  
Portland, OR 97230-7430  
503-665-4179 - Phone  
503-667-5108 - Fax  
[www.rwpud.org](http://www.rwpud.org)

## Customer Assistance Application

### Applicant information:

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Account No.: \_\_\_\_\_

**Assistance Requested:** One Time Crisis Assistance \_\_\_\_\_ Bill Discount \_\_\_\_\_

Is this a single family household? \_\_\_\_\_ How many people live in the household? \_\_\_\_\_

### Sources of Household Income:

<u>Source</u>	<u>Amount – please specify if it is monthly or yearly</u>
_____	_____
_____	_____
_____	_____

Total Household Income: \_\_\_\_\_

Applicant's Signature \_\_\_\_\_ Date: \_\_\_\_\_

Date Received: \_\_\_\_\_ Approved by: \_\_\_\_\_ Processed by: \_\_\_\_\_

Return this form to [customerservice@rwpud.org](mailto:customerservice@rwpud.org) or in person at Rockwood's District office at 19601 NE Halsey St. Portland, Oregon 97230.