



# Medical Rate Assistance Program Application



Municipal Services Division  
City of Santa Clara  
1500 Warburton Avenue Santa Clara, CA 95050

(408) 615-2300: Monday - Friday, 8:00 a.m. - 5:00 p.m.  
1-800-735-2922 CA Relay Service for the Deaf or Hearing Impaired

The City of Santa Clara provides a Medical Rate Assistance Program (MRAP). This program provides a monthly 25% discount to eligible households on their electric charges. To participate in MRAP, you must submit a completed Physician's Certification Form. Please note that applicants who qualify for both the Low Income and Medical Rate Assistance programs may only be enrolled in one program.

Applicant Information	
Name of Utility Customer	Electric Utility Account Number
Name of Resident with Qualifying Medical Condition	Relationship to the Utility Customer: <input type="checkbox"/> Self <input type="checkbox"/> Child <input type="checkbox"/> Spouse <input type="checkbox"/> Other _____
Service Address	
Email Address	Phone Number
<b>Attention</b> If you use a medical device such as an oxygen machine or ventilator, please notify the Santa Clara Fire Department at: (408) 615-4900 for protective services in the event of an emergency.	

The information on this application will be used to determine and verify my eligibility for assistance. My signature gives consent for this information to be shared with other offices of the State and Federal Government and with my utility company as necessary to effectuate the purpose of this application. If eligible for the MRAP discount, I permit the proper change to my rate schedule and give consent to have my eligibility verified every two years. **If my name, address, or medical condition changes, I MUST inform the City of Santa Clara, Municipal Services Division.** I declare, under penalty of perjury, that the information on this application is true and correct.

Applicant Signature

Date

Witness' Signature (if applicant signed with a mark)

Date

**YOU MUST INCLUDE THE FOLLOWING:**

- This form filled out completely
- Your utility account number
- Completed Physician Certification Form

For information on the Home Energy Assistance Program, call Sacred Heart Community Services at 1-877-278-6455.

**For City Use Only**

Verified By

Date