

Utility Subsidy Assistance Program

Palmview CommUNITY Assistance Recovery Economic Stimulus Center

Palmview CARES Center

105 E Veterans Blvd, Suite D

Palmview TX 78572

956.432.0319

palmviewcarescenter@cityofpalmview.us

CITY OF PALMVIEW
TEXAS



We Are In This Together

Stay Safe ● Stay Home

November 3, 2020

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**Utility Subsidy Assistance Program
Palmview CARES Center
City of Palmview
November 3, 2020**

1. Background

The [County of Hidalgo](#) has provided the City of Palmview federal Coronavirus Aid, Relief, and Economic Security (CARES) Act funds from which the City is utilizing to establish a COVID-19 CommUNITY Assistance Recovery Economic Stimulus (CARES) Center in response to the Coronavirus Disease 2019 (COVID-19) pandemic. The City has established this Utility Subsidy Assistance Program (USAP) as part of this initiative and capitalized with its own funds at \$50,000.

2. Policies

On September 15, 2020, the City Council determined the Utility Subsidy Assistance Program to be a public necessity for certain expenditures incurred by Residents in response to the COVID-19 pandemic. The Council adopted the following policies and procedures for this program. The City reserves the right to make changes without notice.

A. Purpose

The purpose of the Utility Subsidy Assistance Program is to provide emergency, temporary financial assistance to Residents (ie, Utility Customers) located in Palmview, Texas directly impacted by a loss of income or other related unanticipated expenses during the COVID-19 pandemic. This assistance is to be used for certain expenses in their water, wastewater and/or solid waste utility bill or other qualified expenses, which will allow Residents to continue to receive essential services.

B. Eligibility

Program Requirements

Any Resident satisfying the following eligibility requirements may qualify for a Subsidy Assistance:

| | |
|---------------------|----------------------------------|
| Utility Account: | Active account with Agua SUD |
| Resident Household: | Within Palmview corporate limits |
| COVID-19 Impact: | Negatively impacted |

Residents not meeting these guidelines, as defined by the City are not eligible for this program.

Resident Requirements

The Resident must certify in good faith as to the “Resident Background” qualifications itemized in the Application (Attachment A).

C. Expenditures

Subsidy Assistance proceeds may be used exclusively for utility payments at a Resident’s household or other qualified expenses. Funds may not be used for late fees, security deposits, reconnection costs, or other ineligible purposes.

Payments will be released to Residents in the form of a credit on a debit card, which must be used exclusively for utility payment(s) to the [Agua Special Utility District](#) (Agua SUD).

D. Amounts

The City may award approximately \$50.00 in the form of a subsidy to Residents for utility assistance. The actual amount may be based on the average monthly utility payment for residential customers.

Residents may receive a maximum of one (1) utility payment award per Household under this program (ie, one monthly utility invoice).

E. Prioritization

Residents demonstrating substantial loss of gross income due to pandemic will be prioritized for awards.

This program may be extended at the discretion of the City depending on the availability of funds and other programmatic criteria.

F. Administration

Definitions

- **Resident:** A living person, but not a Business Entities such as sole proprietorships, partnerships, and corporations (private and public). Residents include persons residing in single- and multi-family housing (eg, duplexes, apartments) who are responsible for a utility bill. A utility’s commercial, wholesale, or other non-residential customers are not considered Residents. Resident shall be singular or plural as needed.

Selection

The Palmview CARES Center administrator shall evaluate applications for program compliance. The administrator shall make recommendations to the City Manager based on program prioritization and first-come-first-serve basis. City Manager shall review and award Subsidy Assistances.

Indemnification

The awardee or Resident agrees to, indemnify and hold harmless the City, its officers, elected or appointed officials, employees, agents and volunteers from and against any and all claims, damages, losses, expenses, fines, penalties, judgments, demands and defense costs (including, without limitation, actual, direct, out-of-pocket costs and expenses and amounts paid in compromise or settlement and reasonable outside legal fees arising from litigation of every nature or liability of any kind or nature including civil, criminal, administrative or investigative) arising out of or in connection with the this Subsidy Assistance program. The Resident or awardee will conduct all defenses at its sole cost. By accepting any money from the City of Palmview the Resident or awardee hereby acknowledges this clause and knowingly accept any liability and hold harmless the City of Palmview.

Authority

The City Manager shall have final authority in the administration of this program. Any ambiguity in policies or procedures shall be reviewed and adjudicated by the City Manager upon consultation with consultants, legal counsel, and program administrators.

2. Procedures

A. Applications

Applications are available at [Palmview CARES Center](#) and [online](#). Residents must complete, sign, and submit applications and supporting documentation to the [Palmview CARES Center](#) or via email (palmviewcarescenter@cityofpalmview.us). Incomplete applications will not be processed.

B. Documentation

Residents must submit the following as part of the Household's application process:

- | | | |
|---|-----|-------|
| 1. Utility Subsidy Assistance Program Application (Completed) | App | _____ |
| 2. Government issued photo identification (eg, drivers license, passport) | ID | _____ |
| 3. Most recent Utility Bill (Agua SUD) | UB | _____ |

Completed applications and corresponding documentation must be submitted in person to the [Palmview CARES Center](#) or via [email](#). Date and time of submittals will be documented.

Incomplete applications (with or without proper documentation) will be rejected, and are ineligible for funding, unless resubmitted in completed form. All submitted documents become the property of the City and will not be returned.

C. Assistance

Staff assistance is available during regular office hours to answer questions or complete applications via telephone (956.432.0319) or palmviewcarescenter@cityofpalmview.us:

[Palmview CARES Center](#)

105 E Veterans Blvd, Suite D
Palmview TX 78572

D. Schedule

Applications will be accepted on a first-come-first-serve basis. The program will operate on the following schedule:

| Activity | Start Date | End Date | Duration (Days) |
|-------------------------------------|------------|--|-----------------|
| Council Program Approval | Sept 15 | Sept 15 | 1 |
| Program Promotion | Sept 24 | Nov 13 | 50 |
| Staff Training | Oct 29 | Nov 2 | 3 |
| Applications Available | Nov 3 | Nov 13 | 10 |
| Evaluate Applications & Award Funds | Nov 4 | As funds permit or at discretion of City | |

This schedule is subject to change without notice. Updates may be available on the City's website and other media.

1. Attachments

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A. Utility Subsidy Assistance Program Application

1. Contact & Program Information

The Resident (ie, Utility Customer) shall enter completely the following information as required.

| Resident Contact Info (Applicant) | Household Info |
|---|----------------|
| Utility Customer Name | |
| Applicant Name, if not Utility Customer | |
| Street Address | |
| City, State Zip | |
| App. Phone | |
| App. email | |

| Utility Company Info | Household Info |
|---|-------------------------------|
| Legal Name Agua SUD | Agua SUD Account # |
| Street Address 3120 Abram Road | Average Utility/Month \$ |
| City, State Zip Palmview, TX 78572 | Total Past Due (If Any) |
| Business Phone 956.585.2459 | |
| Business email service@aguasud.com | |

| |
|------------------------------------|
| Additional information, if needed: |
| |
| |
| |
| |

2. Program Requirements

By initialing below, the Resident certifies in good faith as follows:

- _____ a. The Resident had an active utility account with Agua SUD.
- _____ b. The Resident’s household is within the City of Palmview.
- _____ c. The Resident was adversely affected by the pandemic.

3. Program Guarantees & Authorizations

By initialing below, the Resident certifies in good faith as follows:

- _____ a. I acknowledge that the City may confirm the eligible Subsidy Assistance amount using required documents submitted.
- _____ b. I acknowledge that I will provide proper documentation as requested by the City to assure the fund will be utilized in a proper/eligible manner.

4. Resident Background

The Resident certifies in good faith as follows:

If **YES**, CHECK BOX. If **NO**, leave blank.

- Resident has a relationships to an elected or appointed municipal officers as defined by Texas Government Code, Chapter 573 and/or the City's [municipal charter](#)?
- Resident has a Conflicts of Interest as per the Texas Local Government Code, Chapters 173, 176 and/or the City's [municipal charter](#)?

5. Certifications and Authorizations

By signing below, the Resident makes the following representations, authorizations, and certifications:

I certify that:

- I have read the statements included in this application, and I understand them.
- The information I have provided in this application and all supporting documents and forms is true and accurate in all material respects.
- I understand that knowingly making a false statement to obtain Subsidy Assistance funds may be punishable under the law.

X

Print Legal Name:

Title & Date:

B. Voluntary Release of Image for Publication

I authorize City of Palmview (Grantee) to film, photograph, and record my likeness, voice, and any other form of my identity (Recording), and grant Grantee an irrevocable, transferable, sublicensable, royalty-free right and license to create, reproduce, alter, modify, publish, publicly perform, publicly display, distribute, sell, assign, transfer, exhibit, create derivative works of, and use my voice, likeness, and any other form of my identity in any manner (including without limitation advertising, promotion, merchandising, and other commercial purposes) or form, including without limitation all video, audio, digital, and print formats and any other media now known or hereafter created, including without limitation use via computer, the internet, films, DVDs, video tapes, audio tapes, digital audio files, digital image files, photographs, prints, copies, facsimiles, and electronically captured images thereof, without limitation as to method of reproduction or exhibit and without any territorial or time restrictions.

Further, I hereby relinquish, give, transfer, and assign to Grantee all right, title, copyright, and interest I may have in the finished product contemplated by this Release, agree that any and all materials created by or on behalf of Grantee are the property of Grantee, and I waive any right of review or inspection. I agree that no other material needs to be submitted to me for any further approval, and Grantee shall be without liability to me or any person for any distortion or illusionary effect resulting from the publication or dissemination of any likeness, audio recording, or other indicia of my identity.

I further release the City and any of its agents, employees and customers, and their officers, agents and employees, and those acting pursuant to their authority, from any and all liability associated with my execution of this Publicity Release or from the use of the Recording of my name, likeness and/or voice, or other form of my identity, described above, and from all claims of every kind on account of such use.

I state further that: (a) I am of legal age and capacity; (b) I acknowledge that nothing herein requires Grantee to use my likeness as described herein or elsewhere; (c) I acknowledge that no compensation or consideration will be provided to me for the rights and releases granted herein, other than the potential publicity; (d) I have read, or have had read to me, this release and agreement and have had the opportunity to ask questions before its execution, and I am fully familiar with and understand its contents; and (e) I hereby irrevocably release Grantee from any and all liability based upon, arising out of or in any way related to this release and agreement or the exercise of the rights granted herein.

Recording Date(s): _____

X

Print Legal Name:

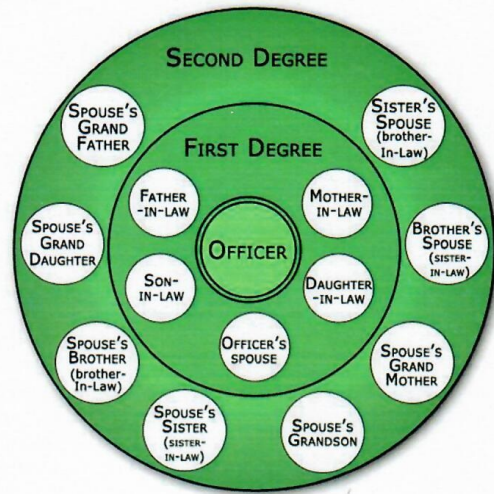
Title & Date:

C. Nepotism Charts

The chart below shows

- **Affinity Kinship** (relationship by marriage)
- **Consanguinity Kinship** (relationship by blood)

AFFINITY KINSHIP
Relationship by Marriage



CONSANGUINITY KINSHIP
Relationship by Blood

