



City of Coffman Cove

PO Box 18135

102 NW Denali Alley

Coffman Cove, AK. 99918

Phone: (907) 329-2233 Fax: (907) 329-2212

Email: clerk@ccalaska.com

2020 Utility & Food Assistance – Economic Support for Families & Individuals Impacted by COVID-19

The City of Coffman Cove is expending CARES Act funding to provide financial relief to residents that have been financially affected by COVID-19. The CARES Act money used to provide this assistance requires that credits be implemented based on the appropriate timeframe of COVID-19's impact from March 1st through December 30th, 2020. **If you have been financially impacted by COVID-19, complete this form and submit to Coffman Cove City Hall in person or by Dropbox, by email to clerk@ccalaska.com, by fax to 907-329-2212, or postmarked by mail to P.O. Box 18135, Coffman Cove, AK 99918, no later than Monday, November 2nd, 2020.**

Eligibility Prerequisites:

- You must reside within Coffman Cove City limits
- Coffman Cove must be your primary residence*
- Proof of Residency – must provide 2020 Alaska Permanent Fund Dividend approval status
- In good financial standing with the City prior to March 1st, 2020

Name: _____

Street Address of Residence: _____

Mailing Address: _____ Contact Phone Number: _____

Email: _____

Are you the primary resident, or a landlord/owner not living at the above address?

Resident Landlord

*You are eligible for a credit if you are a landlord/owner, but the value of the credit applied to the appropriate account must be passed on to the physical residents, including renters or leaseholders. If "Landlord" selected, the City of Coffman Cove will contact you regarding passing on the value to the renter/lessee.

Is this your primary place of residence? Yes No

How have you been affected by COVID-19? (check all that apply)

- Work hour reductions, layoffs, furloughs, and/or other actions directly related to COVID-19 that have reduced or limited work availability at regular place of employment
- Medical bills, mandated quarantines, travel interruptions, and/or other unexpected expenses that developed due to COVID-19
- Other (explain):

UTILITY - Please choose one of the following utility companies to which a \$200 credit will be applied.

- | | |
|--|---|
| <input type="checkbox"/> Alaska Power & Telephone
Account Number: _____ | <input type="checkbox"/> Arrowhead Gas
Account Number: _____ |
| <input type="checkbox"/> R&R Fuels
Account Number: _____ | <input type="checkbox"/> Petro Marine
Account Number: _____ |

FOOD - Please choose one of the following grocery stores to which a \$210 credit/gift card will be issued.

- Klawock AC Craig AC A&P Thorne Bay Riggin' Shack

I hereby certify that the information provided is true and accurate to the best of my knowledge.

Printed Name	Signature	Date
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<p><u>FOR OFFICE USE ONLY</u></p> <p>Approved (Yes or No): _____ Date: _____</p> <p>Signature: _____</p>
