

Please note this is a  
365-39 filing

TRANSMITTAL OF RULES ADOPTED

Office of Community Development

*Handwritten initials*

FROM: Planning and Community Affairs Agency  
(Name of Agency)

TO: CODE REVISER  
LEGISLATIVE BLDG. (Southwest Corner, Ground Floor)  
Olympia 98504

The enclosed rules Permanent rules  / Emergency rules , being Order No. 7776  
relating to (Name of rules or description of subject matter)

Rules and regulations regarding the Special Crisis Intervention Program.

(ALTERNATIVE A. Use only for adoption of permanent rules)

pursuant to Notice No. \_\_\_\_\_<sup>1</sup> filed with the code reviser on \_\_\_\_\_<sup>2</sup>  
(date)  
were regularly adopted as permanent rules of this agency at \_\_\_\_\_  
(place) on \_\_\_\_\_  
(date)  
and are herewith filed in the office of the code reviser pursuant to chapter 34.04 RCW. The effective date of such rules  
shall be \_\_\_\_\_<sup>3</sup>

(ALTERNATIVE B. Use only for adoption of emergency rules)

pursuant to its finding in the attached administrative order, that the immediate adoption of these rules is  
necessary for the preservation of the public health, safety, or general welfare and that observance of the requirements  
of notice and opportunity to present views on the proposed action would be contrary to the public interest, were  
regularly adopted as emergency rules of this agency at \_\_\_\_\_  
Olympia, Washington on August 22, 1977  
(place) (date)  
and are herewith filed in the office of the code reviser pursuant to chapter 34.04 RCW.

The undersigned hereby certifies that the requirements of chapter 34.04 RCW and of the Open Public Meetings Act of  
1971, chapter 42.30 RCW have been fulfilled.

Dated this 22 day of August 1977.

STATE OF WASHINGTON  
FILED

SEP 1 1977

CODE REVISER'S OFFICE  
DOCKET # 8444 FILE # 1

OFFICE OF COMMUNITY DEVELOPMENT  
Planning and Community Affairs Agency  
(AGENCY)

*Eugene Wiegman*  
By Eugene Wiegman, Acting Director

Title

NOTES:  
<sup>1</sup>Notice number as appears on the copy of notice returned to you by reviser's office (if proceedings were continued, use no. of last notice)  
<sup>2</sup>Stamped date as appears on the copy of notice returned to you by reviser's office (if proceedings were continued, use date of last notice)  
<sup>3</sup>Unless a later date is specified in this order or is prescribed in another statute, rules are effective 30 days after filing: RCW 34.04.040. Leave  
this space blank except in such special cases.

State of Washington

Planning and Community Affairs Agency OFFICE OF COMMUNITY DEVELOPMENT  
(agency name)

Administrative Order No. 77-06

(1) I, Eugene Wiegman, Acting, director of Planning and Community Affairs Agency OFFICE OF COMMUNITY DEVELOPMENT of the State of Washington,

**ALTERNATIVE A. Use only for Adoption of Permanent Rules.**

after due notice and in a meeting open to the public, held at \_\_\_\_\_ on \_\_\_\_\_, as required by chapters 34.04 and 42.30 RCW, do promulgate and adopt as permanent rules of this agency, the annexed rules:

**ALTERNATIVE B. Use only for Adoption of Emergency Rules.**

do promulgate and adopt as emergency rules of this agency, the annexed rules:

Regarding the Special Crisis Intervention Program

I, Eugene Wiegman, find that an emergency exists and that the foregoing order is necessary for the preservation of the public health, safety, or general welfare and that observance of the requirements of notice and opportunity to present views on the proposed action would be contrary to public interest. A statement of the facts constituting such emergency is:

That federal funds are available until August 31, 1977 to improve the financial condition of the poor and near poor before the return of cold weather.

Such rules are therefore adopted as emergency rules to take effect upon filing with the code reviser.

(2) Pursuant to the requirements of RCW 34.04\_\_\_\_ (1977 c 19 § 2)<sup>1</sup> that "every agency shall incorporate the most specific, but in no case omit all, of the following language alternatives when adopting or amending rules" (fill in statement (a), (b), or (c) as appropriate):

(a) This rule is promulgated pursuant to RCW \_\_\_\_\_ and is intended to administratively implement that statute.

(b) This rule is promulgated pursuant to RCW \_\_\_\_\_ which directs that the \_\_\_\_\_

(agency)

has authority to implement the provisions of \_\_\_\_\_

(name of act or RCW citation)

(c) This rule is promulgated under the general rule-making authority of the GOVERNOR Planning and Community Affairs as authorized in RCW 365-39 43.06.120

(3) This order after being first recorded in the order register of this agency shall be forwarded to the Code Reviser for filing pursuant to chapter 34.04 RCW and chapter 1-12 WAC.

APPROVED AND ADOPTED August 22 1977

CORRECTIONS APPROVED BY  
THOMAS F. CARL ASSISTANT  
ATTORNEY GENERAL AND COUNSEL  
TO OGD/PCAA ON SEPT. 1, 1977  
*Thomas Carl*

By Eugene Wiegman  
Acting Director

Title

STATE OF WASHINGTON

PLANNING AND COMMUNITY AFFAIRS AGENCY

ADMINISTRATION ORDER NO. 77-06

I, Eugene Wiegman, Acting Director of the Planning and Community Affairs Agency of the State of Washington, in recognition of the facts that funds are available to the Planning and Community Affairs Agency until August 31, 1977 for distribution as Special Crisis Intervention Program funds for assistance to eligible households; that a number of eligible households exist for such assistance; and that the immediate providing of such funding will improve the financial condition of the poor and near poor before the return of cold weather; hereby find that immediate adoption of these regulations is necessary for the preservation of the public health, safety, and general welfare, and that observation of the requirements of notice and opportunity to present views on this proposed action would be contrary to the public interest. Consequently, pursuant to RCW 34.04.030, I hereby declare an emergency to exist, and by virtue of the authority vested in me under chapter 34.04 RCW do promulgate and adopt the annexed rules and regulations, to wit:

WAC 365-39 RULES AND REGULATIONS REGARDING  
THE SPECIAL CRISIS INTERVENTION PROGRAM

as emergency rules of this agency.

(2) This order after being first recorded in the order register of this agency shall be forwarded to the Code Reviser for filing pursuant to chapter 34.04 RCW and chapter 1-12 WAC.

APPROVED AND ADOPTED August 22, 1977

By   
Acting Director  
Title

NEW SECTION

WAC 365-39-010 PURPOSE AND AUTHORITY. The purpose of this chapter is to describe the conditions and procedures under which the Special Crisis Intervention Program (as described in the Federal Register volume 42, number 125 -- Wednesday, June 29, 1977, pages 33240-33253) will operate in Washington state.

NEW SECTION

WAC 365-39-020 PROCEDURES. The procedures, and parameters that will govern this program are contained in the application form that will be utilized by persons requesting assistance under this program.

NEW SECTION

WAC 365-39-030 EXCEPTIONS. Appeals as to the results of procedures may be made in writing to the Director, Planning and Community Affairs Agency, State of Washington, Olympia, Washington, 98504.

NEW SECTION

WAC 365-39-900 FORM--SPECIAL CRISIS INTERVENTION APPLICATION FORM.

STATE OF WASHINGTON

SPECIAL CRISIS INTERVENTION PROGRAM

Under the provisions of federal law, the state of Washington has limited funds available to help people who have unpaid heating bills from the last winter. The federal law and Washington state regulations determine the conditions under which households are eligible for this assistance and the amount of assistance that can be provided. Use this form to provide information about your need for such assistance, and to determine whether or not you are eligible. Follow the instructions at the bottom of Page 2 about how to file your application.

.....  
(FOR OFFICE USE ONLY)

- |  |  |
|--|--|
| <input type="checkbox"/> Approved. Amount Approved \$.....                             | Returned to:                             |
| <input type="checkbox"/> Approved by.....  | <input type="checkbox"/> Energy Supplier |
| <input type="checkbox"/> Approved amount different than<br>amount in Column B., Page 2 | <input type="checkbox"/> Customer        |
| Because:.....  | For additional nec-                      |
| .....  | essary information                       |
| .....  | as marked.                               |
- .....

PART I: TO BE FILLED IN BY THE FUEL DEALER OR UTILITY COMPANY PROVIDING ENERGY FOR HOME HEATING.

Business Name and Address:

Company Contact About This Account:

Name (Area Code) Phone No

Department of Revenue Registration # or Special Fuel License #

Customer Account No.: County:

Customer Name and Service Address:

(See also required certification on Page 2. Payment will not be made without confirmation of balance due, etc.)

Page 2 (of form)

PART I: (continued)

NOTE: Only past-due bills for service during the period of November 1, 1976, through March 31, 1977 are eligible for payment. The total amount that may be paid for any household is \$250. Payment will be made directly to the home heating energy supplier, upon receipt of certification as provided on this form. The penalties of fraud apply for any false certification. Payments in excess of the balance due must be refunded to the state of Washington by the supplier.

HOME HEATING ENERGY SUPPLIER:

Signature of Company Official Certifying Balance Due:	Total Balance Due*	Months for which payment has not been made (circle)				
		Nov	Dec	Jan	Feb	Mar
X.....*	\$.....*	76	76	77	77	77

PRINT NAME

\*No payment that totals less than \$10.00 will be paid.

Has service been discontinued or disconnected? Yes  No

HOW TO FILE THIS APPLICATION

Make sure that the information requested in sections I, II, and III is supplied. Forms with incomplete information will be returned to the customer.

Be sure that an official of the fuel supplier has certified the balance due as required in Part I. If you owe money to more than one company, complete a form for each company.

Be sure to mail this application form before August 31, 1977. Application forms postmarked after that date are not eligible for assistance and will be returned.



If you are eligible, you will be notified by mail of the amount approved at the same time the company listed in Part I is notified.

This form will be returned to you if you are not eligible or if further information is necessary. See Page 1 for an explanation.

When you have completed this application form use the envelope provided to mail to:

Special Crisis Intervention Program  
Office of Community Development  
400 Capital Center Building  
Olympia, Washington 98504

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This blank form may be duplicated if more forms are needed, or call the Office of Community Development (Toll Free 800-562-5677) and request special crisis intervention application forms.

Do not submit copies of completed forms as only forms with original certification and signatures can be processed for payment.

Page 3 (of form)

PART II: TO BE FILLED IN BY CUSTOMER

This program provides assistance only for people who live in households with total income below the limits set by federal law. To determine whether or not your household is eligible, you may compare the amount that applies to your household by using the maximum income information provided below.

Family Size	Non-farm Family	Farm Family
1	\$ 3,713	\$ 3,188
2	4,913	4,200
3	6,113	5,213
4	7,313	6,225
5	8,513	7,238
6	9,713	8,250

For family units with more than 6 members, add \$960 for each additional member in a non-farm family; add \$810 for each additional member in a farm family.

If more than one member of the household had income, be sure to add together all income received. If possible, use the figure reported on federal income tax returns Line 15c on Form 1040 or Line 12 on Form 1040-A. If you did not file a federal income tax return, or if you had income you did not report for any reason, please show your actual income below.

(The following are used to determine income: Employment, Unemployment Compensation, Social Security, Retirement, Supplemental Security Income (SSI), AFDC (Welfare), and General Assistance.)

Social Security Number of Head of House Hold:.. ..-.. ..-.. ..

Number of persons living in your household: ..... Do you live on a farm Yes  No

Number of people in this household receiving AFDC or SSI (Welfare Benefits): .....

Total AFDC and SSI for all persons in household (include as income): \$.....

Number of household member employed as migrant/seasonal farm workers (if any): .....

Total income from all sources of all persons living in this household during one of the 12-month periods listed below:

(CIRCLE ONE)

Jan 76-Dec 76      Feb 76-Jan 77      Mar 76-Feb 77      Apr 76-Mar 77

TOTAL INCOME: \$.....

I declare under penalty of perjury that the information given by me in this declaration is true, correct and complete to the best of my knowledge and realize that willful falsification of this information by me may subject me to penalties as provided in Washington state law, RCW 74.08.055.

..... (Signature)      ..... (Print Name)

Page 4 (of form)

PART III: OPTIONAL, STATISTICAL INFORMATION, TO BE PROVIDED BY THE CUSTOMER

You may leave this section blank if you wish. Your request for assistance will be reviewed on the basis of information provided in sections I and II.

The information requested here will not be used to determine eligibility for the amount of assistance provided. It is requested in order to comply with federal regulations, and will be used only for the purpose of developing statistical information for the United States Congress about the special fuel crisis intervention program and for planning future programs to reduce the impact of rising fuel costs on low income people. No information about individual will be released to anyone or used for any other purpose.

Sources of income for your household (Please check all that apply):

- Employment, Unemployment Compensation, Social Security, Retirement, Supplemental Security Income (SSI), AFDC (Welfare), General Assistance, Other

Please give the number of people living in your household who are in each of the following groups (also circle the group to the the head of the household belongs):

- Black (not Hispanic), White (not Hispanic), American Indian or Alaska Native, Asian or Pacific Islander, Hispanic

What is the age of the head of your household? Under 65 or 65 and over