| UPPCO Account Holder Name | UPPCO Account Number | |
|--|---|--|
| | | |
| First Last | | |
| | | |
| Email | | |
| Service Address | | |
| | | |
| Street Address | City | |
| | | |
| Street Address Line 2 | Zip Code | |
| This is the address that appears on my driv | ers license or State ID and is my primary residence. | |
| To qualify for Residential Income Assistance benefits from one of the following programs Please check all that apply | (RIA) Credit you must be receiving, or have received aduring the past 12 months: | |
| Home Heating Credit (HHC) | | |
| State Emergency Relief (SER) | | |
| Michigan Energy Assistance Program (M | EAP) | |
| Medicaid | | |
| Supplementary Nutrition Assistance Prog | gram (SNAP) | |
| | ments listed above, you may be eligible based on a % of the Federal Poverty Level (see table below). | |
| My total household income is less than 15 | 50% of the Federal Poverty Level | |
| Annual Household Income | Number of Individuals in Household | |
| By signing this document, I attest that the info | ormation provided is accurate | |
| Account Holder Signature (sign after printing form) | Date | |
| 2025/2026 INCOME ELIGIBILITY TABLE | | |

| 2025/2026 INCOME ELIGIBILITY TABLE | | |
|------------------------------------|--------------------------------|----------------------------------|
| No. of Household Members | Federal Poverty Level (FPL) | 150% FPL Max Household Income |
| 1 | \$15,650 | \$23,475 |
| 2 | \$21,150 | \$31,725 |
| 3 | \$26,650 | \$39,975 |
| 4 | \$32,150 | \$48,225 |
| Add for each add'l member: | \$5,500 | \$8,250 |

Upper Peninsula Power Company MAIL

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FAX (906) 485-2431

Customer Service: (906) 449-2013