
ACCESS AND FUNCTIONAL NEEDS APPLICATION

Please read this form and fill out accordingly.

NAME:

PHONE NUMBER:

PHYSICAL ADDRESS:

EMAIL ADDRESS:

ACCOUNT NUMBER:

Help us keep your family safe and informed during an emergency by updating your contact information with Bear Valley Electric Service, Inc. It is especially important to keep us informed of any Access and Functional Needs (AFN) members of your household, so we can ensure you get timely AFN updates and alerts. Every second matters during an emergency event, please update your information today!

Please select the option that pertains to you:

- Physical, developmental or intellectual disabilities
- Chronic conditions or injuries
- Limited English proficiency
- Older adults
- Children
- Low income, homeless and/or transportation disadvantaged (i.e., dependent on public transit)
- Pregnant women

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