

## ST. ALBERT UTILITY RELIEF PROGRAM 2026

The City of St. Albert in collaboration with the St. Albert Community Village is offering a Utility Relief Subsidy to households. This subsidy is a one-time annual amount of \$75 or \$200 dependent of your housing type. **For applicants with a City of St. Albert Utilities Services account** this subsidy will be applied directly against your utility account. **For applicants with no utility account** this subsidy will be deposited to your bank account or a cheque will be issued. This will **NOT** affect those on income supports. **Eligibility requirements are listed below.**

**All applications must be received by the St. Albert Community Village no later than December 1, 2026.**

### Eligibility:

- Your **total household Annual income** must be at or under the CNIT (Core Needs Income Threshold):

FAMILY STATUS	CNIT THRESHOLD-2025
Individual with no dependents	\$43,500
Couple with no dependents	\$51,500
Couple/Individual with 1 dependent	\$63,500
Couple/Individual with 2 dependents	\$72,000
Couple/Individual with 3 dependents	\$75,000

- You have **lived in St. Albert a minimum of 6 months** with a fixed address and you must be the homeowner or lease holder.
- You meet the **Residency requirements** as outlined below:  
All members of the household must be a Canadian Citizen or Permanent Resident. Households with family members in Canada under a private sponsorship agreement are not eligible while the sponsorship agreement is in effect.

### How to Apply:

**STEP 1: Confirm your eligibility.**

**STEP 2: Complete an application form.**

**STEP 3: Attach supporting documents and submit application.**

**STEP 4: You will be notified by email or telephone once your application has been reviewed.**

Application forms can be found on our web site at [www.stalbertfoodbankandcommunityvillage.com](http://www.stalbertfoodbankandcommunityvillage.com)  
Email, fax, or drop off the completed application form along with the supporting documents to:

St. Albert Community Village & Food Bank Society  
30 – 50 Bellerose Drive, St. Albert AB T8N 3L5  
ATTENTION: Utility Relief Program Coordinator  
accounting@stalbertfoodbank.ca  
Fax: 780-459-0589; Phone: 780-459-0599 ext. 5

Before submitting your application, please review to ensure all required paperwork is included. Processing time may be delayed if incomplete. Applications with missing information will be held for 30 days to allow time to gather missing material. After the 30 days, the application will be closed and the applicant will be required to submit a new application along with all the supporting documentation.

Documents from each of the 4 categories below **MUST** be included with your application:

1. **Proof of Status in Canada** – Provide a copy of one of the following:

- Canadian Birth Certificate
- Passport
- Citizenship papers or Immigration documents, Record of Landing (IMM1000) and Permanent Resident Card (both sides)

**Identification is required for each member of the household listed on the application** (including children).

2. **Proof of Address** – copy of Homeowner's driver's license; Lease or Tenancy agreement

3. **City of St. Albert Utilities Services (WATER) bill** – if applicable. If water is included in lease or condo agreement, provide a copy of the agreement.

4. **Proof of Income** for all household members. Proof of income can be your most recent **CRA Notice of Assessment (NOA)** or bank statements to all bank accounts.

Please note that Students over 18 years and in school must have letter from their school.

**All official documents must be current, and the City of St Albert Utilities Services bill must be dated within the last 3 months.** Please do not submit originals.

### Grievance Procedure

St. Albert Utility Relief Program acknowledges and supports a client's right to grieve the services provided and pursue effective resolution. Your grievance will be addressed professionally in a formal manner.

### Important Notice

St. Albert Utility Relief Program will comply with the provisions of the Freedom of Information and Protection of Privacy Act. It is the St. Albert Utility Relief Program's intent to protect the privacy of its clients at all times in the collection, storage and destruction of information. Data collected will be used anonymously for future statistical analysis and reporting.

This application is designed to collect specific information from Applicants applying for the St. Albert Utility Relief Program in accordance with Section 33(c) of the Freedom of Information and Protection of Privacy Act.

## 2026 ST. ALBERT UTILITY RELIEF PROGRAM APPLICATION

### APPLICANT INFORMATION

Title: Mr. Mrs. Ms. Miss (please circle one)

Last Name:

First Name:

Phone 1:

Phone 2:

Email:

Address:

St. Albert, Alberta

Postal code: T8N

Date of birth: MM/DD/YYYY

Are you a Canadian Citizen?  
\_\_\_YES \_\_\_NO

If no, are you a Permanent Resident? \_\_\_YES \_\_\_NO

Are you a full-time student?  
\_\_\_YES \_\_\_NO

### OTHER PEOPLE RESIDING IN HOME

Last Name:

First Name:

Date of birth: MM/DD/YYYY

Relationship to you:

\_\_\_Spouse \_\_\_Son \_\_\_Daughter \_\_\_Other

Canadian Citizen: \_\_\_YES \_\_\_NO

Permanent Resident: \_\_\_YES \_\_\_NO

***If over 18 and not a full-time student, do they have a source of income: \_\_\_Yes \_\_\_No (if yes, include proof of income)***

### ADDITIONAL PEOPLE (attach extra sheet if required)

Last Name:

First Name:

Date of birth: MM/DD/YYYY

Relationship to you:

\_\_\_Spouse \_\_\_Son \_\_\_Daughter \_\_\_Other

Canadian Citizen: \_\_\_YES \_\_\_NO

Permanent Resident: \_\_\_YES \_\_\_NO

***If over 18 and not a full-time student, do they have a source of income: \_\_\_Yes \_\_\_No (if yes, include proof of income)***

### ADDITIONAL PEOPLE

Last Name:

First Name:

Date of birth: MM/DD/YYYY

Relationship to you:

\_\_\_Spouse \_\_\_Son \_\_\_Daughter \_\_\_Other

Canadian Citizen: \_\_\_YES \_\_\_NO

Permanent Resident: \_\_\_YES \_\_\_NO

***If over 18 and not a full-time student, do they have a source of income: \_\_\_Yes \_\_\_No (if yes, include proof of income)***

### HOUSING INFORMATION

Housing Type: (Please check one)

\_\_\_ Single Family House/Duplex \_\_\_ Apartment \_\_\_Townhouse \_\_\_ Basement Suite

Ownership Status: \_\_\_Own \_\_\_ Rent

I have been a resident of St. Albert since: (Month, Year) \_\_\_\_\_

#### VERIFICATION REQUIRED

Homeowner: \_\_\_\_  
Include copy of **City of St. Albert Utilities Services Water bill** (dated within last 3 months).  
OR  
Include proof that water is included in Condominium Fees.

Renter: \_\_\_\_  
Include copy of **Lease or Tenancy agreement** (current and signed).  
Note Basement suites must be registered with the City of St. Albert; we may ask for a copy of the occupancy permit.

#### INCOME INFORMATION

INCOME FROM ALL SOURCES FOR EACH WORKING HOUSEHOLD MEMBERS MUST BE DECLARED.

Please list all annual amounts of income for each household member by source:

Household Income (in dollars)	Employment Amount	CPP Amount	OAS Amount	AB Seniors Amount	AB Works Amount	Other Amount	Total ANNUAL INCOME Amount
Applicant							
Person 1							
Person 2							
Person 3							
Person 4							

#### OTHER INFORMATION

Have you or anyone on the application ever received a St. Albert Utility Relief Subsidy before?  
\_\_ Yes \_\_ No

If your application is approved, **and you DO NOT** have a City of St Albert Utilities Services Account, how would you like to receive your subsidy?

\_\_ Cheque via mail

**If requesting a cheque**, there is a 6-week processing time.

\_\_ Direct Deposit

**If requesting Direct Deposit**, please **complete** the City of St Albert Direct Deposit Agreement Form and provide proof of your banking information.

#### DECLARATION

The information you give will be kept confidential. The collection of information is authorized under section 33(c) of the Freedom of Information and Protection of Privacy Act and the privacy protection provisions in that act will protect it. Data collected will be used anonymously for future statistical analysis and reporting.

I declare this is my application. I declare that all the information in it is true and complete to the best of my knowledge. I understand the application period for 2026 ends December 1, 2026.

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date