



Application For Reduced Utility Rates and/or Utility Tax Rebate

Date of Occupancy Account No.

Name: Phone No.

Service Address: Email:

Mailing Address:

1) I am applying for:	Applicant is:	I reside at this address as:
<input type="radio"/> Reduced Rates for my Renton Bill	<input type="radio"/> Age 61 or older and/or	<input type="radio"/> The owner of the property
<input type="radio"/> *Tax Rebate Only-No Renton Bill	<input type="radio"/> Permanently disabled	<input type="radio"/> The current tenant of the property.

*Tax Rebate Only applications are accepted from April 15 to June 15th of the current year.

Reduced Rate applications received after June 15th will not qualify for the current year's tax rebate check. Approved Applications receive a (50% subsidy) on City Services. King County Sewer is exempt from this discount

2) Yearly Household Income - From All Sources

	Age	Social Security Benefits	Pensions\ Annuities	Other Income	Totals
Applicant 1:					
Resident 2 Name:					
Resident 3 Name:					
Resident 4 Name:					
				Total Income for all residents:	

3) Income Standards for all Residents over 18 years of age

Single Applicants maximum allowable income standard from all sources cannot exceed:	\$35000.00
How many residents over 18 years of age, <u>other than applicant</u> , live here? Multiply number by \$5000:	\$5000.00
To qualify for reduced rates, the total combined income for all residents cannot exceed this income standard per year:	

4) Required Proof of Eligibility and Residency

Age	<input type="checkbox"/> Current Washington State Drivers License or ID Card	<input type="checkbox"/> Passport with proof of Age and Residency	<input type="checkbox"/> Other photo ID with Proof of Age and Residency
Income	<input type="checkbox"/> Last two consecutive months of bank Statements	<input type="checkbox"/> Current Tax Return	
Under 61 and applying due to permanent disability -Attach one of the following required documents.			
Disability	<input type="checkbox"/> Social Security Award Letter	<input type="checkbox"/> Other State of Federal Program Approval Letter	

Return this application with all required documentation to (see page 1, Proof of Eligibility):

City of Renton, Utility Billing, 1055 S Grady Way, 1st Floor, Renton WA 98057 Phone: (425)-430-6852

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and/or Utility Tax Rebate**

Note: Utility customers with addresses outside Renton City Limits will not be allowed the utility tax rebate. Reduced rates for utility services are available to those who qualify.

Proof of Utility Services: For tax rebate only applicants. Applications are accepted for rebates from 4/15-6/15. *If the City of Renton does not bill you directly for utility services, provide a copy of a current bill from another utility service to verify your home address.*

- A tax rebate will be issued only to eligible residents residing at addresses within Renton City Limits after June 30.
- A tax rebate will be based on a prior 12-month period, July 1 to June 30. A Tax rebate only application is required **every year** or if occupancy changes, or as requested by City of Renton staff
- The tax rebate will be pro-rated for occupancy of less than one year. **Only one (1) rebate per household**
- Applications received after **June 15** will not be considered for a rebate for the current year.

AFFIDAVIT

I affirm and promise that in the event that I qualify to receive the reduced utility rates/utility tax rebate that I will promptly notify the City of Renton in writing of the following: 1) if I move from the above address; and 2) of any change in my financial condition that disqualifies me from receiving a special utility rate and/or rebate.

If it is determined that I am not qualified to receive a special utility rate reduction or rebate, I also promise to promptly repay the City of Renton any utility rate undercharge or a rebate payment made to me prior to that determination.

I agree to provide the City of Renton, or its duly authorized representative, additional information about my income and/or residence, as may be requested from time to time.

I also confirm that I have provided documentation to verify my eligibility and household income from all sources and I declare under penalty of perjury that the information on this application is true and complete.

Printed Name _____ *Signature* _____ *Date* _____

This affidavit is renewable every **2 years** , (1year for tenants) or if occupancy changes, or as requested by City of Renton Staff.

Reminder – *Do not forget to provide adequate proof of income, age and identity for all occupants, i.e., a copy of income tax return, social security annual statement, retirement statement, bank statement, or any other proof required by the City of Renton. Application cannot be approved without required documentation. Please call Customer Service at (425)430-6852 if you need assistance. Thank You.*

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