City of South Pasadena

FINANCE DEPARTMENT
1414 Mission Street, South Pasadena, CA 91030
Tel: (626) 403-7309 * Fax: (626) 403-7251

UTILITY USER'S TAX EXEMPTION APPLICATION

Applicant's First Name	Initial	Last	Social Security Number

SERVICE ADDRESS Number Street Apt. No.	Zip Code	Date of Birth

In the space below for each utility company, enter the names and account numbers exactly as shown on the utility bills received for the location where the meters and telephone are installed.

1 WATER Name	Account Number
2 SOUTHERN CALIFORNIA GAS COMPANY Name	Account Number
3 SOUTHERN CALIFORNIA EDISON COMPANY Name	Account Number
4 PACIFIC TELEPHONE COMPANY Name	Account Number
5 LONG DISTANCE CARRIER Name	Account Number
Address City State	Zip Code
CELLULAR PHONE CARRIER Name	Account Number
Address City State	Zip Code

6 Do you subscribe to Cable? Circle One: YES NO

Name	Account Number

Total Gross Household Income (Previous Year) $ _____

Number of Persons in Household _____

CERTIFICATION

I certify or declare under penalty of perjury that all information submitted with this claim is true to the best of my knowledge and that:

___ 1. I am the user of the utilities shown at premises occupied by myself, and

___ 2. I have a 100% service connected disability as verified by the Veterans Administration or

___ 3. The combined gross household income of all members of the household in which I reside is at or below 80% of the area median income as determined under the Section 8, Income Limits for Los Angeles County, as published by the U.S. Department of Housing and Urban Development (see Income Limits on reverse).

___ 4. The amount of tax imposed on the above utilities is not paid by a public agency or from funds received from a public agency specifically for the payment of such tax.

Signature	Date	Telephone Number

Finance Department Use Only

Date Received	Approved By	Date Approved

CITY OF SOUTH PASADENA

UTILITY USER'S TAX EXEMPTION

The following utility users shall be exempt from the imposition of the utility user tax, per South Pasadena Municipal Code, Sec. 34B.3:

A. Public schools and exempt churches and religious organizations.

B. Combined gross household income of all members of the household at or below eighty percent of the area median income as determined under the Section 8, Income Limits for Los Angeles County, as published by the U.S. Department of Housing and Urban Development.

2015 INCOME CRITERIA

FAMILY SIZE	INCOME LIMIT
1 PERSON	$46,500
2 PERSON	$53,150
3 PERSON	$59,800
4 PERSON	$66,400
5 PERSON	$71,750
6 PERSON	$77,050
7 PERSON	$82,350
8 PERSON	$87,650

Attach a complete copy of last year's Federal Income Tax Return including supporting schedules and SSA 1099 Form for all household members.

C. All service users who are veterans who have a one hundred percent (100%) disability as verified by the Veterans Administration.

Return application to:

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