

2006 SENIOR CITIZEN UTILITY TAX REBATE PROGRAM

INCLUDES ELECTRIC, HEATING, PHONE, CELL PHONE, GARBAGE & CABLE TV

**If you are a senior citizen and paid utility taxes during 2006,
you may be eligible to receive a rebate!**

TO QUALIFY YOU MUST:

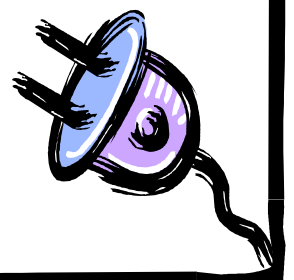
- Be 65 years of age or older;
- Be a resident of the City of Federal Way;
 - *Residents in unincorporated King County are ineligible*
- Have the utility bill(s) in your name (no third-party billing); **AND**
- Meet certain income requirements
 - 1 person in household: Your total income must be less than \$27,250
 - 2 people: Combined total income is less than \$31,150
 - 3 or more people: Please call 253-835-2541 for income limits

Total income includes, but is not limited to: Wages, social security/pension benefits, bank interest, dividends and capital gains from investments, rental/business income, and IRA distributions for **ALL** members of the household and does not include federally-eligible tax deductions.

HERE'S HOW TO APPLY:

- **Gather your ORIGINAL 2006 utility bills**
(electric, heating, phone, cell phone, garbage & cable television—**NOTE:** Lakehaven bills are not eligible as they don't collect the utility tax.)
- **Provide proof of income**
(example: copy of your November & December bank statements or income tax filing for 2006)
- **Complete the attached application form**
- **Mail (or drop off) the application, proof of income, and your bills to City Hall**
Mail your documents to PO Box 9718, Federal Way, WA 98063-9718
Hand-Deliver to City Hall at 33325 Eighth Avenue South
Applications will be accepted **January 2, 2007 through April 30, 2007**
Office Hours are Monday through Friday 8:00—5:00, Closed regular holidays—
Appointments NOT REQUIRED

QUESTIONS?: Contact Krystal Kelsey, Deputy City Clerk, at 253-835-2541



2006 SENIOR CITIZEN UTILITY TAX REBATE APPLICATION

PLEASE PROVIDE THE FOLLOWING INFORMATION:

Last Name: _____ First: _____ Middle: _____

Home Address: _____ Federal Way, WA _____
Street Address City State ZIP

Mailing Address: _____
Street Address City State ZIP

Daytime Phone: (____) _____ Evening Phone: _____

Date of Birth: ____/____/19____ Number of People in Household: _____
(you must be 65 years of age or older to participate)

By signing below, I hereby certify that all of the information contained in this application, and the materials I submit, is accurate to the best of my knowledge.

Signature of Applicant

Date

STOP PLEASE DO NOT WRITE BELOW THIS LINE—THE FOLLOWING INFORMATION FOR OFFICE USE ONLY:

Household Member 1:	
Income Source	Amount
Social Security:	_____
Pension:	_____
Annuities:	_____
IRA Distributions:	_____
Wages:	_____
Other Income:	_____
Total Income HHM#1:	_____

Household Member 2:	
Income Source	Amount
Social Security:	_____
Pension:	_____
Annuities:	_____
IRA Distributions:	_____
Wages:	_____
Other Income:	_____
Total Income HHM#2:	_____

TOTAL Household Income 2006 \$

Gas/Electricity Taxes Paid	_____
Telephone Taxes Paid	_____
Cell Phone Taxes Paid	_____
Garbage Taxes Paid	_____
Cable TV Taxes Paid	_____

Prepared By: _____
 Date: _____
 Rebate Amount: _____
 Purchasing Code: 103-0000-000-316-00-000
 APPROVED: Yes NO If no, state why not: _____

TOTAL Utility Taxes Paid for 2006 \$

Authorization to Pay

Date