



City of SeaTac
Finance Department
4800 S 188th St
SeaTac, WA 98188
PH: 206-973-4880

Utility Tax Relief Program

Senior (or disabled) low-income residents of SeaTac may qualify for a rebate of the Utility Taxes they incurred in 2015. Only one claim for utility tax relief may be made per household per tax relief year.

WHO IS ELIGIBLE? You are eligible if:

1. You lived in SeaTac during 2015; and
2. You paid household utilities in 2015 (the utility bills must be in your name); and
3. You were a senior, at least 65 years old, in 2015 **OR** you were disabled and unable to work (as defined below); and
4. The annual *gross income* of your household in **2015** did not exceed the following:

People In Household	Maximum Annual Income
1	\$31,400
2	\$35,850
3	\$40,350
4	\$44,800
5 or more	Call 206-973-4880

WHAT PROOF IS REQUIRED FOR SENIOR CITIZENS

To be considered a Senior citizen, you must have been 65 years of age, or older, in 2015. Please attach a copy of your photo I.D. to your application packet.

WHAT IS THE DEFINITION OF DISABLED?

As defined under RCW 84.36.383 and WAC 458-16A-130, a disabled individual is any person unable to maintain gainful employment because of his or her physical or mental disability (i.e. ability to work is diminished because of a physical or mental impairment).

WHAT PROOF IS REQUIRED FOR DISABLED CITIZENS?

Please attach to your application **one** of the following to prove disability:

1. Proof of social security disability income; OR
2. Proof of Supplemental Security Income (SSI) for the blind or disabled; OR
3. Signed physician's certification of physical or mental disability (attached)

WHAT IS "GROSS INCOME" OF HOUSEHOLD?

This is the income received in the 2015 tax year by EVERY member of your household who was at least 18 years old. This includes, but is not limited to: *wages, salaries, bonuses, tips, gross amounts of pensions and annuities, retirement benefits, Social Security benefits, life insurance benefits, interest, capital gains, gifts, inheritances, third-party income, and other assets.*

WHAT DOCUMENTS ARE REQUIRED TO PROVE INCOME?

If you are filing as a **Low-Income Senior Citizen**, for all members of your household with an income we require:

- A complete copy of U.S. Individual Tax Return Form 1040; and
- Documentation for all sources of income not included on IRS Form 1040.

If you are filing as a **Low-Income Disabled Citizen**, for all members of your household with an income we require:

- A complete copy of U.S. Individual Tax Return Form 1040; **OR**
- A Report of Confidential Social Security Benefits Information (Form SSA-2458) if you or family members receive social security benefits. You may get this form mailed to you by calling the Social Security Information Teleservice Number **1-800-772-1213**. If they are sending you Form SSA-248 ask them to fill in the amount of Supplemental Security Income (SSI) on line 5.

WHAT OTHER DOCUMENTATION MUST BE PROVIDED?

- A completed Senior (or Disabled) Low-Income Utility Tax Rebate Application (attached)
- All **original** bills paid in 2015 for the following utilities:
 - Gas and/or Electric (Example: Puget Sound Energy)
 - Telephone including Cell Phone (Example: Century Link, AT&T, Verizon, Sprint, etc.)
 - Cable Television (Example: Comcast, DirecTV, etc.)

(continued on next page)

IMPORTANT THINGS TO REMEMBER REGARDING YOUR UTILITY BILLS:

- This tax relief program is meant to reimburse residents for utility taxes paid in 2015. Therefore, any bills you submit to the City must be for **services provided in 2015**. Indicate on your bill how much utility tax was paid to ensure that you were *actually billed* for utility taxes. If you are unable to identify how much was paid, contact the utility provider directly.
- You must submit utility bills for each month that you paid a utility tax. We can only reimburse you for the months in which you provide proof to us.
- If you already qualify for a senior or disabled citizen discount through a utility company, that particular utility bill(s) will be ineligible for utility tax relief reimbursement.
- You must include EVERY page of each month's bill so we may determine the amount of rebate due.
- Please staple or clip all pages of the bill together in order to ensure accurate, prompt processing of your rebate (i.e. all pages of January's phone bill clipped together, all pages of February's phone bill clipped together, etc.). Failure to submit your invoices in an organized manner may cause significant delays in processing your rebate.

HOW MUCH TAX RELIEF CAN I EXPECT TO RECIEVE?

If you qualify for utility tax relief reimbursement, the rebate will be based upon the amount of utility tax that you paid during 2015. The amount of reimbursement will be determined by the following:

1. If utility tax paid was equal to or greater than \$50.00 and less than \$75.00: there will be a **\$50.00** utility tax relief reimbursement.
2. If utility tax paid was equal to or greater than \$75.00 and less than \$100.00: there will be a **\$75.00** utility tax relief reimbursement.
3. If utility tax paid was equal to or greater than \$100: there will be a **\$100.00** utility tax relief reimbursement.

WHEN ARE REBATE APPLICATIONS ACCEPTED?

Applications for 2015 rebates will be accepted **January 2 through October 1, 2016**. File early to avoid delays in processing.

WILL THE CITY RETURN MY INCOME DOCUMENTS AND UTILTY BILLS?

Yes! Once your rebate is completely processed all of your original documents (except the application form) will be returned to you. We are happy to mail them to you at the address provided on your application, or you may make arrangements to pick them up at City Hall.

QUESTIONS?

We are here to help. Please contact the City of SeaTac's Finance Department at 206-973-4880 or send email to alanphear@ci.seatac.wa.us.



Mail To:
City of SeaTac
Finance Department
4800 S 188th St
SeaTac, WA 98188

Utility Tax Rebate Application

Application due before October 1, 2016

Applicant Information

Name: _____ Birth date: _____

SSN: _____ Telephone: _____

Address: _____

Filing Status (choose only one - proof required):

- Senior
- Disabled

Members of Household

List all other people in household. Use additional sheets if needed.

Name: _____ Birth date: _____

Name: _____ Birth date: _____

Name: _____ Birth date: _____

Verification of Income

(For ALL household members with an income)

Federal Tax Return

- ✓ Include a complete copy of all 2015 tax returns
- ✓ Provide documentation of any other income
- ✓ For disabled residents, include Form SSA-2458 for SSI income

Please indicate how you would like your documents (and rebate check for those who qualify) returned to you:

- Please Mail
- Pick up at City Hall

I, _____, declare that under penalty of perjury, that all information stated on this form and on the documents I have submitted is true and correct. I further declare that I meet the minimum eligibility requirements of the utility tax rebate program.

Signature: _____ **Date:** _____

Optional Form for Providing Proof of Disability

If you are disabled, but do not have other means to verify your disability (proof of social security disability income or proof of Supplemental Security Income) please have your health care provider complete this certificate. Complete either the physical disability certificate **OR** the mental disability certificate based on your circumstance. You are **NOT** required to complete both sections.

PHYSICIAN'S CERTIFICATION

(For citizens with a physical disability)

PRINT CLEARLY IN INK

I hereby certify that I am a licensed physician and that the applicant has the disability listed below:

Physician's Name: _____ Telephone Number: _____

Type of Practice: _____ License Number: _____

Address: _____

Patient's Name: _____ DOB: _____

Patient's Disability: _____

Period of Disability: From _____ to _____ ("current" or specific date)

Does this disability prevent the patient from regular, gainful employment: Yes _____ No _____

Comments:

Signature: _____ **Date:** _____

MENTAL HEALTH PROFESSIONAL'S CERTIFICATION

(For citizens with a mental disability)

PRINT CLEARLY IN INK

I hereby certify that I am a licensed mental health professional and that the applicant has the disability listed below:

Physician's Name: _____ Telephone Number: _____

Agency or Program Name: _____

Address: _____

Patient's Name: _____ DOB: _____

Patient's Disability: _____

Period of Disability: From _____ to _____ ("current" or specific date)

Does this disability prevent the patient from regular, gainful employment: Yes _____ No _____

Comments:

Signature: _____ **Date:** _____

Utility Tax Rebate Application Checklist

Before you turn in your application, make sure you have everything you need!

Are you?

- At least 65 years of age or disabled?
- Considered a low-income household?

Did you?

- Live in SeaTac during 2015?
- Pay utilities, in your name, throughout 2015?

In your application packet, did you remember to include?

- A **completed and signed** Utility Tax Rebate Application form? *See page 4*
- Proof of age? *See page 1* **OR** Proof of disability? *See page 2*
- Proof of income? *See page 2*
- All **original** utility bills for services in the year 2015? *See pages 2 & 3*

Mail application and all required materials to:
City of SeaTac Finance Department 4800 S 188th St SeaTac, WA 98188

**INCOMPLETE SUBMITTALS WILL BE RETURNED WITHOUT
PROCESSING AND MUST BE RESUBMITTED TO THE CITY BY THE
OCTOBER 1, 2016 DEADLINE.**

*Thank you for submitting for the
City of SeaTac's Utility Tax Relief Program!*

