

**\*PUBLIC NOTICE \***  
**CITY UTILITY DEPARTMENT**

The City of Klamath Falls is again offering a Senior Citizen Utility Credit for 2018. The credit in the amount of \$65.00 is available to senior citizens that meet the following criteria:

**INCOME:** Single - \$19,150 annual gross

Couple - \$21,900 annual gross

**AGE:** Must be at least 60 years of age  
**(VERIFICATION OF AGE AND INCOME REQUIRED)**

**RESIDENCE:** The UTILITY account must be *WITHIN THE CITY LIMITS*, and in the name of the applicant from January 1, 2018 through December 31, 2018. The service address of the utility account must also be the principal residence of the applicant.

Application forms will be available February 15, 2019 at the following locations:

Utility Billing Department  
222 S 6<sup>th</sup> St.

Senior Citizens Center  
2045 Arthur St

The applications must be received in our office at 222 S.6<sup>th</sup> St. no later than April 15, 2019. A credit will be issued to successful applicant's utility accounts by May 5, 2019. Any questions should be directed to the City Utility Department at 883-5301.

ACCT # \_\_\_\_\_

**City of Klamath Falls**  
**SENIOR CITIZEN LOW INCOME UTILITY REBATE**  
**\* APPLICATION \***

Customer  
Name \_\_\_\_\_ SS# \_\_\_\_\_ Age \_\_\_\_\_  
Spouse  
Name \_\_\_\_\_ SS# \_\_\_\_\_ Age \_\_\_\_\_  
Service  
Address \_\_\_\_\_ Phone \_\_\_\_\_  
Mailing  
Address \_\_\_\_\_

- 1. Wages, salary and other pay for work..... \$ \_\_\_\_\_
  - 2. Interest and dividends..... \$ \_\_\_\_\_
  - 3. Business, rentals and any other investment income ..... \$ \_\_\_\_\_
  - 4. Social Security, Railroad Retirement, Military Pay, Veterans Benefits \$ \_\_\_\_\_
  - 5. Other pensions and annuities ..... \$ \_\_\_\_\_
  - 6. Unemployment, Workers' Comp., Accident/Health Insurance .... \$ \_\_\_\_\_
  - 7. Inheritance, gifts and grants ..... \$ \_\_\_\_\_
  - 8. Child Support and any other income ..... \$ \_\_\_\_\_
- ❖ Please do not include any welfare income, disability pay, life insurance proceeds, personal injury damages or strike benefits as income.
- 9. TOTAL INCOME ..... \$ \_\_\_\_\_

Under penalties for false swearing, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct and complete.

I further certify that I am the principal resident of the above service address receiving water and sewer, and have occupied this residence from January 1, 2018 through December 31, 2018. I am also the principal signer of the account.

I further authorize the City to make any necessary inquiries for determination of eligibility for this refund.

I understand that my rebate will be applied as a credit to my Utility Account.

Signature \_\_\_\_\_ Date \_\_\_\_\_

REBATE GRANTED _____	CREDIT APPLIED _____
	DATE _____