



# City of Santa Fe

## Low Income Credit Application

801 West San Mateo Rd. Santa Fe, NM 87505-3923  
(505) 955-4333 (Customer Service) Fax (505) 955-4363



Please read the reverse side of this form before filling out this application. Please print. Illegible applications will be returned. If you need assistance in filling out this form, please contact Customer Service at 955-4333. *The applicant must reside at the service address. By applying for a Low Income Credit I am certifying that I reside at the service address listed below.*

Applicant Name: \_\_\_\_\_ Service Address: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Please list all members of the household, including the applicant (use additional paper if necessary):

Name	Age	Total Annual Income (All Sources)
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
Total Annual Household Income _____		

Please list the total annual income from all sources for all household members:

Source	Amount	Source	Amount
Wages	_____	Alimony	_____
Social Security	_____	Child Support	_____
Rent/Royalties	_____	Retirement	_____
Interest/Dividends	_____	Veterans Benefits	_____
Food Stamps	_____	Welfare Payments	_____
Gambling	_____	Disability	_____
Unemployment	_____	Other	_____
Housing/Sec. 8	_____		
Total Annual Income: _____			

I, \_\_\_\_\_, swear or affirm under penalties provided by law that I have read and understand the terms of this application as presented on the reverse of this form and that the information presented by me on this application is complete, true and correct. I further agree to any reasonable investigation and substantiation of the information that I have presented on this application.

Applicant's Signature \_\_\_\_\_

Date \_\_\_\_\_

City Use Only

Approved for Credit: Refuse \_\_\_\_\_ Sewer \_\_\_\_\_ Water \_\_\_\_\_ Storm Water \_\_\_\_\_

Account Number: \_\_\_\_\_ Credit Amount: \_\_\_\_\_ Received By: \_\_\_\_\_ Date: \_\_\_\_\_

Processed By: \_\_\_\_\_ Effective From: \_\_\_\_\_ Through: \_\_\_\_\_

Supervisor Review and Approval: \_\_\_\_\_

Date: \_\_\_\_\_

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## *Low Income Credit Application Guidelines*

Chapter 15-1.3 - The Poverty Exemption allows that qualified customers be granted exemptions from the following monthly residential utility charges if their total gross annual household's income falls below the City's Low Income Limits: Sewer assessment & charges, refuse assessment & charges, service charge for water, and monthly residential storm water assessment. The residence must be individually metered. Annual income is for the period of January 1st to December 31st.

Credit will be granted where the household's total gross annual income does not exceed one hundred twenty percent (120%) of the most recent federal poverty guidelines issued by the U. S. Department of Health and Human Services.

Applicants aged 60 years or older or applicants with a medically verified permanent disability are required to file a new application on an annual basis every April (Annual Credit). The credit will be valid for one year and will be granted for the period of May 1 through April 30.

Permanently disabled applicants must include with their application a medical certificate (provided by the city) which must be signed by a medical doctor licensed by the State of New Mexico that certifies that the applicant is permanently disabled.

Applicants less than 60 years old with no permanent disabilities are required to reapply every three months (Semi-Annual Credit). The low income credit will be valid for a maximum of three months with each approved application.

Applicants applying for Low Income Credit must include a copy of their current year federal or state income tax filing with their application. Applicants that are not required to file Federal or State income tax forms will be required to provide documentation of all income or financial assistance that they are receiving. Additional proof of income may be required.

Applicants must report all income or assistance for the total household, including but not limited to wages, social security, retirement, veteran's benefits, welfare payments, alimony, rents/royalties, interest/dividends, food stamps, gambling winnings, disability, or any other income not included in this list. Applicants must report the names, ages and incomes of all persons residing in the household. The applicant agrees to promptly report any increases or new income received during the period of the approved credit.

Failure of an applicant to reapply for the low income credit may result in the loss of the credit for the period of time from the expiration of the current credit to the date a new application is received and approved.

No retroactive credits will be granted. In well documented hardship cases, the customer may apply to receive a formal hearing for the city to consider approval of an exemption of this rule. The customer must file a written request and include all applicable documentation plus the applicable hearing fee.

Applicants must consent to any reasonable investigation and substantiation of any or all data submitted on or with their application.

Applicant(s) must reside at the service address of record.

**Per Chapter 15-1.3B3 - "The filing of a false statement or otherwise fraudulently obtaining the benefits of this section is a violation of the Santa Fe City Code and is punishable pursuant to Section 1-3 (General Penalty) of this Code and shall entitle the city to recover any fraudulently exempted amount and applicable interest penalties."**

**Per Chapter 1-3 - General Penalty - "Any violation of the Santa Fe City Code of 1987, not specifically provided for in any ordinance, resolution, rule, regulation or order to the contrary, is punishable by a fine of not more than five hundred dollars (\$500.00) or by imprisonment in the county jail for a term of not more than ninety (90) days, or by both such fine and imprisonment. Every day that any such violation continues constitutes a separate offense, except where otherwise provided."**