



1510 228th Avenue SE, Sammamish, WA 98075
425.392.6256 • spwater.org

Utility Billing Assistance Program (UBAP)

GENERAL INFORMATION & INSTRUCTIONS Long-term Assistance: 2020/2021 Utility Bill Rebate

This information applies to residents of apartments, condominiums and residential homes who pay for water and sewer service through rent or to a third party. The program period is July 1, 2020 through June 30, 2021.

Residents currently paying for water and/or sewer utility services directly to the District must instead refer to the *UBAP Long-term Assistance: 2020/2021 Utility Bill Discount Instructions*.

Residence: Please provide proof of the payment of water and sewer utilities and proof of how long you lived at the property during the program dates of July 1, 2020 to June 30, 2021 This may be one of the following:

- A copy of the lease/rental agreement that shows utilities are included with the rent with move in date
- A copy of the statement(s) from a third party billing agency for the rebate period you are requesting

Income: Annual income will be the total annual income from all household members 18 years or older as identified in the 2020 Federal Income Tax return(s). In the absence of a Federal Income Tax Return, the District may consider other documentation of annual income.

2020 income must not exceed sixty (60) percent of the King County Department of Housing and Urban Development (“HUD”) area median household income calculation as set forth for the number of persons in the household

2020/2021 Program - Income Qualification Chart (Based on 2020 annual Income)

1 person	2 persons	3 persons	4 persons	5 persons	6 persons	7 persons	8 persons
\$50,160	\$57,360	\$64,500	\$71,640	\$77,400	\$83,160	\$88,860	\$94,620

Please attach copy (copies) your 2020 Federal Tax return for each adult living in the household. If you do not file a Federal Income Tax return(s), please provide alternate income documentation where applicable.

Rebate: The water rebate is 45% and the sewer rebate is 30% of the District’s single family base charges and shall not apply to consumption charges, or any other charges or fees. For each month you lived at the residence you will receive the following rebate:

2020 Monthly Utility Rebate		2021 Monthly Utility Rebate	
Water	\$ 14.41	Water	\$ 14.85
Sewer	\$ 11.17	Sewer	\$ 11.39
Total	\$ 25.58	Total	\$ 26.24

GENERAL INFORMATION & INSTRUCTIONS
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Filing: The application for rebate must be applied for annually for each program period. The program runs from July through June of each year in which the total annual income will be based on the prior year. Applications for the upcoming year will be available after July 1st with rebate checks mailed by the end of September.

Annual household income worksheet Annual Income Source	Applicant	Resident #2	Resident #3	Resident #4
Social Security (SSA, SSI, SSDI, 1099)				
Salary/Wages/Tips (W-2)				
Pension/Veteran's Benefits/Annuities (1099-R)				
Interest/Dividends (1099-INT or 1099-DIV)				
Capital Gains/Losses (1040 + Schedule D)				
Business/Rental Income (1040 + Schedule C)				
IRA Withdrawal (1099-R)				
Other Income (e.g. unemployment, gifts/cash, military pay/benefits, work study earnings)				
Total Annual Income	\$	\$	\$	\$

Utility Billing Assistance Program (UBAP)

APPLICATION

Long-term Assistance: 2020/2021 Utility Bill Rebate

This application applies to residents currently paying for water and/or sewer utility services through rent or to a third party. -The program period is July 1, 2020 through June 30, 2021.

Sammamish Plateau Water® (“District”) is now accepting applications for the 2020/2021 rebate portion of the Utility Billing Assistance Program (July 1, 2020 through June 30, 2021). This program applies to residents of apartment, condominiums and residential homes who pay for water and sewer service through rent or to a third party.

Residents of single-family homes, apartments or condominiums who pay for water and sewer services directly to the District must complete a Utility Billing Assistance Program Discount Application.

Date _____

Applicant’s Name _____

Applicant’s Service Address _____

Applicant’s Mailing Address (if different) _____

Phone Number _____ Email Address _____

Name of Complex or Property Owners Name _____

Income qualification: The combined annual income of all adult household members for 2020 must not exceed sixty (60) percent of the King County Department of Housing and Urban Development (“HUD”) area median household income calculation as set forth for the number of persons in the household. For the 2019/2020 UBAP (2019 Taxable income) year, the amounts are shown below:

1 person	2 persons	3 persons	4 persons	5 persons	6 persons	7 persons	8 persons
\$50,160	\$57,360	\$64,500	\$71,640	\$77,400	\$83,160	\$88,860	\$94,620

For each adult member (18 years and older) of your household, you must provide proof of annual income (Federal Tax Return) and proof of identification (Copy of Drivers’ License, State ID Card, Passport)

How many people live with you in the household? _____ Please provide the name, age and relationship of each household member (please attach separate form if needed)

	First Name	Last Name	Age	Relationship to Applicant
1				
2				
3				
4				

Verification of Income

Please indicate your total 2020 annual household income: \$ _____

Please attach copy (copies) your 2020 Federal Tax return for each adult living in the household. If you do not file a federal tax return, please provide alternate income documentation where applicable

Please provide proof of payment of the payment of water and sewer utilities and proof of how long you lived at the property during the program dates of July 1, 2020 to June 30, 2021. This may be one of the following:

- A copy of the lease/rental agreement that shows utilities are included with the rent with move in date
- A copy of the statement(s) from a third party billing agency for the rebate period you are requesting

I, the undersigned, under penalty of perjury of the laws of the state of Washington do hereby declare and certify

- I have read and understand the program guidelines provided with this application. All the information provided by me on this application is accurate, complete and true to the best of my knowledge.
- I understand that submitting the required documentation does not guarantee eligibility to the program. Such information will, however, be used to determine if I qualify this program.
- I have provided a true and accurate list of income to the District for 2020 for all household members 18 years and older.
- I understand the rebate period is for July 1, 2020 through June 30, 2021 only and it is my responsibility to re-apply for this program each year.
- I understand any attempt to falsify my information will result in my disqualification from the program for this year and may subject me to civil or criminal penalties.

Signed this _____ day of _____, 20_____

Signature _____

Applicant's Printed Name _____

<i>For District use only</i>	
Date Received _____	Received By _____
Approved By _____	Date _____