

Original and Renewal Application for Utility Users Tax Exemption



Finance Department
735 Anacapa St
Santa Barbara, CA 93101
805-564-5342

Frequently Asked Questions and Answers

What is this application for?

This application is for the Utility Users Tax Exemption program. By telling us about yourself and answering three simple questions we can determine your eligibility for the program. If you are approved you will receive assistance by having the utility user's taxes removed from your utility bills.

How much is the discount?

If you are approved for the Utility User's Tax Exemption the City will report your exemption status to the utility companies who will then remove the applicable taxes from your bill(s).

I am already on this program. Why are you sending me another application?

The savings afforded by this program are only valid between July 1, 2021 and June 30, 2022 and ***must be renewed every year***. If you are currently enrolled in the program and you do not return a complete application ***you will be removed from the program and no longer receive the discount(s)***.

If your completed renewal application is not received by June 30, 2021, and you are later approved, your benefits *will not* be back-dated.

Is there an income requirement?

Yes. If you live alone, your Adjusted Gross Income (often referred to as your "AGI") in the calendar year **2020** must have been no greater than \$18,563.00.

If you have two or more people in your household, all members of that household's income must be listed together, and the total AGI may be no greater than \$27,827.00.

We may verify the AGI you report by requesting proof of income, including copies of your tax returns.

What is Adjusted Gross Income (AGI)?

Your AGI is calculated pursuant to the rules and regulations of the State of California Franchise Tax Board. You can find your AGI on your California State Tax return Form 540EZ, line 16, or on line 17 of Forms 540 and 540A.

If you need help calculating your AGI please contact the California Franchise Tax Board, the IRS, or a private tax professional. The City cannot help you determine your AGI.

Reporting your AGI or exempt status is required for your application to be processed.

May I receive the discount from this program in addition to others?

The Utility Users Tax Exemption program is administered by the City of Santa Barbara and is independent of any other programs offered by the utility companies or any other government agency.

Being enrolled in other programs which assist you in paying your utilities will not exclude you from receiving the discounts afforded by these programs. Approval for the City's programs is based solely on income.

I enrolled in this program recently. Do I have to fill out this application again?

The short answer is, "yes". The long answer is your previous application will only insure you have benefits until June 30, 2021 of this year. The application you are filling out today, if approved, will enable your benefits to continue through June 30, 2022. If you do not fill out and return this completed application to us your benefits will expire on June 30, 2021.



CITY OF SANTA BARBARA

FINANCE DEPARTMENT
735 ANACAPA ST
SANTA BARBARA, CA 93101

Please sign back of application



ORIGINAL AND RENEWAL APPLICATION FOR UTILITY USERS TAX EXEMPTION

For the period July 1, 2021 through June 30, 2022

APPLICANT

FIRST NAME	MI	LAST NAME	
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
SOCIAL SECURITY NUMBER		DATE OF BIRTH (MM/DD/YYYY)	
<input type="text"/>		<input type="text"/>	<input type="text"/>
STREET ADDRESS			APT/UNIT/BLDG
<input type="text"/>			<input type="text"/>
	ZIP	PHONE NUMBER	
SANTA BARBARA, CA	<input type="text"/>	<input type="text"/>	

SPOUSE INFORMATION (IF LIVING WITH APPLICANT)

SPOUSE FIRST NAME (IF LIVING WITH APPLICANT)	MI	SPOUSE LAST NAME (IF LIVING WITH APPLICANT)
<input type="text"/>	<input type="text"/>	<input type="text"/>

MAILING ADDRESS (IF DIFFERENT FROM ABOVE)

STREET ADDRESS (PO BOX)		APT/UNIT/BLDG
<input type="text"/>		<input type="text"/>
CITY	STATE	ZIP
<input type="text"/>	<input type="text"/>	<input type="text"/>

INCOME QUESTIONNAIRE – FOR CALENDAR YEAR 2020

ENTER THE TOTAL NUMBER OF PEOPLE LIVING IN YOUR HOUSEHOLD:

ENTER TOTAL **2020** ADJUSTED GROSS INCOME FOR ALL MEMBERS OF YOUR HOUSEHOLD: \$, .00

IF ALL PERSONS IN YOUR HOUSE WERE EXEMPT FROM PAYING TAXES IN 2020, WRITE "EXEMPT" IN THE BLOCKS ABOVE.

UTILITY ACCOUNT INFORMATION - INCLUDE COPIES OF YOUR MOST RECENT UTILITY BILLS WITH THIS APPLICATION

ENTER THE ACCOUNT NUMBERS OF THE UTILITIES FOR WHICH YOU ARE APPLYING FOR THE UUT EXEMPTION. IF YOU ARE UNSURE OF YOUR ACCOUNT NUMBERS CONTACT YOUR UTILITY PROVIDER. THE ACCOUNTS LISTED MUST BE IN THE APPLICANT'S NAME.

SOUTHERN CALIFORNIA EDISON	SO CAL GAS
<input type="text"/>	<input type="text"/>
	CITY OF SANTA BARBARA (WATER and/or TRASH)
	<input type="text"/>

PLEASE NOTE:

- ADJUSTED GROSS INCOME IS DETERMINED BY THE CALIFORNIA FRANCHISE TAX BOARD ON YOUR **2020** CALIFORNIA INCOME TAX RETURN. IF YOU WERE NOT REQUIRED TO FILE A CALIFORNIA TAX RETURN YOU MAY ENTER "EXEMPT" IN THE INCOME BLOCKS.
- THE UTILITY USER'S TAX EXEMPTION, IF ANY, AUTOMATICALLY TERMINATES IF THERE IS A CHANGE OF ADDRESS OR DEATH OF THE APPLICANT.
- A NEW APPLICATION MUST BE SUBMITTED IF YOU MOVE TO A NEW ADDRESS.
- A RENEWAL APPLICATION MUST BE SUBMITTED EVERY YEAR FOR BENEFITS TO CONTINUE. IF A RENEWAL APPLICATION IS NOT RECEIVED AND APPROVED BY THE CITY YOUR BENEFITS WILL EXPIRE.
- THE CITY OF SANTA BARBARA RESERVES THE RIGHT TO REQUIRE DOCUMENTATION OF ANY INFORMATION PROVIDED BEFORE OR AFTER THIS APPLICATION IS APPROVED.
- OTHER MEMBERS OF YOUR HOUSEHOLD MAY ALSO BE REQUIRED TO PROVIDE INCOME INFORMATION BEFORE OR AFTER THIS APPLICATION IS APPROVED.



- ✓ **DID YOU INCLUDE COPIES OF YOUR MOST RECENT UTILITY BILLS FOR WHICH YOU ARE APPLYING FOR RELIEF?** IF COPIES OF YOUR BILLS ARE NOT SUBMITTED WITH THIS APPLICATION YOU **WILL NOT** RECEIVE ANY CREDITS FROM THESE UTILITIES.
- ✓ INCLUDE PROOF OF INCOME.
- ✓ DID YOU FILL OUT THIS APPLICATION COMPLETELY? IF SO, PLEASE SIGN AND DATE BELOW.

SIGNATURE REQUIRED

I DECLARE UNDER PENALTY OF PERJURY THAT THE INFORMATION HEREIN IS TRUE AND CORRECT.

SIGNATURE

//
DATE (MM/DD/YYYY)

MAILING AND CONTACT INFORMATION

RETURN THIS APPLICATION AND ANY REQUIRED DOCUMENTS **BY MAIL** TO:

CITY OF SANTA BARBARA
ATTN: BILLING DEPT
PO BOX 1990
SANTA BARBARA, CA 93102-1990

OR YOU MAY RETURN THIS APPLICATION **IN PERSON** AT CITY HALL IN DE LA GUERRA PLAZA:

SANTA BARBARA CITY HALL
CASHIER / BILLING OFFICE
735 ANACAPA ST
SANTA BARBARA, CA 93101

IF YOU NEED ASSISTANCE FILLING OUT THIS APPLICATION OR HAVE QUESTIONS REGARDING THE PROGRAM: 805-564-5343
FOR INFORMATION ABOUT THE LIFELINE TELEPHONE DISCOUNTS, CONTACT FRONTIER COMMUNICATIONS: 1-800-794-4741
THIS APPLICATION IS ONLY VALID FOR RESIDENTS WHO LIVE WITHIN THE CITY LIMITS OF SANTA BARBARA.

IF YOU LIVE OUTSIDE THE CITY LIMITS OF SANTA BARBARA DO NOT SUBMIT THIS FORM; INSTEAD, CONTACT ONE OF THE FOLLOWING:

- CITY OF CARPINTERIA RESIDENTS MAY CONTACT THE CITY ADMINISTRATOR'S OFFICE AT 805-684-5405 x 416
- CITY OF GOLETA RESIDENTS MAY CONTACT THE GOLETA WATER DISTRICT AT 805-964-6761
- UNINCORPORATED AND ALL OTHER RESIDENTS MAY CONTACT THE COUNTY TAX COLLECTOR'S OFFICE AT 805-568-2933