



# City of Newark

## UTILITY USERS TAX EXEMPTION CHANGE FORM – LOW INCOME

37101 Newark Boulevard \* Newark, California 94560-3796 \* (510) 578-4392 \* FAX: (510) 578-4306

PLEASE PRINT CLEARLY – FRONT AND BACK OF FORM

<b>Name:</b> Last			First			M.I.		
<b>Residential Service Address:</b>								
<b>Phone #:</b>				<b>E-Mail Address:</b>				

### QUALIFICATIONS FOR TAX EXEMPTION

Are you enrolled in Pacific Gas & Electric Company's (PG&E) CARE Program ("California Alternate Rates for Energy" program)? Yes  No

If enrolled, attach a copy of your most recent PG&E bill to verify your enrollment in the CARE Program.

Complete the change of account information in the space below. If adding a new utility, be sure to attach a copy of the utility bill. Only applies to electricity, natural gas, telephone, cell phone, and cable T.V. (not satellite).

UTILITY	ACCOUNT #	NAME ON ACCOUNT
1.		
2.		
3.		
4.		
5.		
6.		
7.		
8.		

### CERTIFICATION

I certify (or declare) under penalty of perjury that:

- I am the customer of the utilities shown hereon at premises occupied by myself.
- I am currently enrolled in the PG&E CARE Program.
- I will notify the City of Newark within 10 days of any changes, which could affect my eligibility for this exemption.
- I, the undersigned, hereby claim exemption from the utility users tax imposed by Ordinance No. 446

Date:	Signature:
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Do not write below this line – for Finance use only

Date received:	Exemption authorized by:	Date sent to service provider:
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**Note:**

This exemption change will not take effect until the application has been verified and approved by the Tax Administrator and processed by the utilities. The City has up to 60 days to process your change request and notify the utility companies.

The exemption becomes effective on the beginning of the second regular billing period commencing after the utility company(s) have been notified.

It is a misdemeanor for any person to knowingly receive the benefits of the exemptions when the basis for the exemption does not exist or ceases to exist. It is your responsibility to notify the City, within 10 days, if there is a change in fact or circumstances which might disqualify you from receiving the exemption.

I am aware that if denied, I have the right to file an amended application, or to appeal the Tax Administrator's decision to the City Manager within a ten-day period after the mailing date of the Tax Administrator's notification.

**DOCUMENTATION REQUIRED**

1. A copy of your most recent PG&E bill to verify your enrollment in the CARE Program.
2. If adding a new utility account(s), attach a copy of your most recent utility bill(s) (the first page of the most recent bill(s) for each account).

**Return completed application form and attachments to:**

City of Newark, Finance Department  
37101 Newark Boulevard  
Newark, CA 94560

**Questions?**

Call: City Manager's Office  
(510) 578-4392