CITY OF NEWARK
UTILITY USERS TAX EXEMPTION REQUEST FORM
FOR FEDERAL CREDIT UNIONS

Company Name: ____________________________________________________________________

Company Address: ____________________________________________________________________

____________________________________________________________________

Company Phone No.: ___________________ Charter Type: ___________________ Charter Number: ______________ Status (active or inactive): ______________

Address of each property for which you are requesting an exemption and a description of its use:

____________________________________________________________________

NOTE: EXEMPTION REQUESTS APPLY ONLY TO THE ABOVE LISTED ADDRESSES.

Please attach to this application the following information:
A. Proof of your company's current status as a Federal Credit Union in good standing (e.g., letter of exemption, or other documentation verifying your company as a current Federal Credit Union).
B. A copy of a recent utility bill from each utility provider for which you are requesting an exemption. NOTE: Exemptions are valid only for utility services for which a recent bill is received by the City. If you change utility providers at any time, you must notify the City of the new utility provider to receive an exemption for the new utility service.

This application for exemption from the City’s Utility Users Tax is valid only for federal credit unions organized under 12 USC Sec. 1751 et. seq. For other types of exemption requests, please contact the City at the address indicated below. Please note, credit unions organized under the laws of the State of California are specifically not exempt from the City’s Utility Users Tax and other taxes. See California Revenue and Tax Code Section 23182 and California Constitution, Article XIII, Section 27.

DECLARATION
I declare, under penalty of perjury, that the undersigned company is a federal credit union, in good standing, organized under 12 USC Sec. 1751 et. seq., and that to the best of my knowledge and belief, the statements herein, and any attachments hereto, are true and correct.

Date: ___________________ Signed:____________________________________________________

Phone: ___________________ Print Name/Title : __________________________________________

MAIL TO : CITY OF NEWARK
ATTN: FINANCE DEPT.
37101 NEWARK BLVD.
NEWARK, CA 94560