



City of Shawnee

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Application Form Stormwater Utility Fee Rebate For Year 2009 (Submit Application between January 15 and August 31, 2010)

Property Owner Information:

Name: _____

Address: _____

Phone: _____

Number of Family Members at this address: _____

Parcel ID: _____

Johnson County Real Estate Payment Made (Half or Full) _____

Federal Annual Adjusted Gross Income (AGI) for family members residing at the above address (total for all). The latest Federal Income Tax Return is attached for all members of household.

\$ _____
 AMOUNT YEAR EARNED

Storm Water Utility Fee: Rebates For Low Income Families

All owner-occupied Dwelling Units that have a "Very Low Income", as defined and set by the U.S. Department of Urban Housing Development (HUD) guidelines for the Johnson County Area Median Family Income for the year that the Storm Water Utility User Fee is invoiced, are eligible for a 100% rebate of the Stormwater Fee paid by the property owner as shown on the annual property tax bill paid to the county.

Persons in Household	Family Household Income	Persons in Household	Family Household Income
1	\$24,650	5	\$38,000
2	\$28,150	6	\$40,850
3	\$31,700	7	\$43,650
4	\$35,200	8	\$46,450

Department of HUD 2009 Income Guidelines for Johnson County

I the undersigned do hereby certify the above statements as to family size, and most recent complete calendar year family income amount are true and correct to the best of my knowledge and belief and that I own the property and reside at the property I have identified on this application form and that the Stormwater Utility fee included with the Johnson County Real Estate Tax Bill has been paid as indicated above and therefore request the rebate as provided by City Ordinance:

Signature of Property Owner: _____ Date: _____

For City use only

APPROVAL FOR PAYMENT

DIVISION HEAD OR SUPERVISOR: _____ DATE: _____

DESCRIPTION: **Stormwater Fee Rebate** ACCOUNT CODE: **101.120.050.59000** AMOUNT: \$ _____

Fee Paid to Johnson County and Verified By City Staff:

Amount: _____ Date: _____

Submittal Reviewed For Family Income Eligibility For Rebate:

Initials: _____ Date: _____

Check if Previous Rebate for 1st Half Year Payment was made:

Amount: _____ Date: _____