



**County of Kauai
Department of Public Works
Wastewater Management
Sewer Billing**

**Mail to: Wastewater Management
4444 Rice Street, Suite 500
Lihu'e, HI 96766
Phone: 241-4082 or 241-4216**

2020 Residential Sewer Utility Credit Application

Part I: Credit Qualifications	YES	NO
Do you receive sewer service and a residential sewer bill from the County of Kauai? _____		
Is your 2018 total annual adjusted gross income under \$40,000? _____		
We are (I am) <u>not</u> receiving sewer utility assistance payments from any organizations. _____		
Is this the only dwelling that you are claiming for this credit? _____		
Is this dwelling unit your principal residence? _____		
We are (I am) <u>not</u> delinquent in our sewer utility payments. _____		

IMPORTANT:

You must answer "YES" on all the above questions to be eligible for the sewer credit program.

You are not eligible for the credit, if you have answered "NO" on any of the above questions.

(For more information on Credit Qualifications, please call 241-4082 or 241-4216.)

Part II: Total Adjusted Gross Income for the 2018 INCOME TAX YEAR.

A. Enter your TOTAL ADJUSTED GROSS INCOME from your 2018 Federal Tax Return \$ _____

B. Enter your TOTAL ADJUSTED GROSS INCOME from your 2018 Hawaii State Tax Return \$ _____

For proof of income, attach pages 1 & 2 of both your 2018 Federal and State Income Tax Return.

If you were not required to file a return, complete the affidavit on the back of this application.

Part III: Other Information	YES	NO
Are you an owner occupant? _____		
Do you pay for the sewer utility charges? _____		

Part IV: Applicant Information

1 Applicant's Name: _____ Sewer Account No. _____

2 Social Security Number: _____ - _____ - _____

3 Sewer Resident Address: _____ Mailing Address: _____

City/State/Zip: _____ City/State/Zip: _____

4 Home Phone: _____ Business Phone: _____

5 Name of Residential Owner: _____

Part V: Declaration

Under penalty of perjury, I hereby declare that I am a qualified residential sewer customer and the information above is true and correct. I shall notify the Wastewater Management, County of Kauai immediately if my annual income exceeds \$40,000 and I am benefiting from this credit. I authorize the County of Kauai to verify my income or other information on this application with the State and/or Federal taxing authorities.

Signature, Applicant Date

Deadline for submitting an application is Tuesday, December 31, 2019. Mail completed application to the above address postmarked no later than Tuesday, December 31, 2019 or hand deliver to the Wastewater Management Office, Suite 500 at the ground floor level of the Kapule Building by 4:30pm on Tuesday, December 31, 2019.

ANY PERSON WHO FALSIFIES OR MISREPRESENTS ANY INFORMATION ON THIS APPLICATION OR FILES A FRAUDULENT APPLICATION, WITH THE INTENT TO DEFRAUD OR EVADE THE PAYMENT OF ANY PART OF HIS SEWER BILL, OR WHO IN ANY MANNER INTENTIONALLY DECEIVES THE COUNTY OF KAUAI, WILL BE FINED \$1,000 OR IMPRISONED FOR NOT MORE THAN ONE YEAR OR BOTH (K.C.C.25-13.9(g) / ORD. NO. 793)

SOCIAL SECURITY NUMBER: The applicant's social security number is requested for the purpose of establishing the identity of the applicant for Sewer Credit and maintaining a record of individual payments to customers. The request is authorized under the Federal Social Security Act (42 U.S.C.A. Sec. 405 (c) (2)). Disclosure is voluntary and will not affect the allowance of a claim for a Sewer Credit, but failure to disclose may result in a delay of processing the claim. If disclosed, social security numbers will not be subject to public access.

