



## APPLICATION FOR LOW INCOME DISCOUNT – 2016

### City of Ripon

259 N. Wilma Avenue | Ripon, CA 95366  
Phone: 599-2108 Fax: 599-2685

If your annual income is within the income level shown in the chart below, you are eligible to receive a low income discount.

**IMPORTANT:** You must renew your application every year or you will lose your discount status.

**VERIFICATION OF INCOME IS NECESSARY WHEN APPLYING:** The discount is based on TOTAL household income. Please supply a copy of your 2015 income tax return. If you do not file a tax return, please supply a copy of your income source.

Income Limits 2016								
Income Level	1 Person	2 People	3 People	4 People	5 People	6 People	7 People	8 People
Very Low 20%	\$20,650	\$23,600	\$26,550	\$29,450	\$31,850	\$34,200	\$36,550	\$38,900
Low 10%	\$33,000	\$37,700	\$42,400	\$47,100	\$50,900	\$54,650	\$58,450	\$62,200

Date: \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_

P. O. Box \_\_\_\_\_

Phone: \_\_\_\_\_

\*Number of people in household: \_\_\_\_\_ \*TOTAL annual household income: \$ \_\_\_\_\_

**\*I certify under penalty of perjury under the laws of the State of California that the above information is true & correct.**

Applicant: (Signature) \_\_\_\_\_

Approved: (City Clerk) \_\_\_\_\_

Date Approved: \_\_\_\_\_

*\*If the number of people in your household does not match the total exemptions on your tax return (line 6 of form #1040) OR if the total household income does not match the total income (line 22 of form 1040), please explain why:*

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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