



Cathedral City

CITY OF CATHEDRAL CITY
USER UTILITY TAX EXEMPTION FORM

Last Name: _____

First Name: _____

Service Address: _____

Billing Address [if different than service address]: _____

Phone: _____

Applying for: [] New Exemption Request [] Annual Exemption Renewal Request
[] Address Change [] Change in Provider [] New Provider

Indicate: [] Home [] Condo - [Complex name] [HOA contact and telephone number]
[] Mobile Home Park (MHP) - [park name]

You must meet both of the following requirements to be eligible for an exemption:

- [] 65 YEARS OF AGE OR OLDER
[] ENROLLED IN THE CARE PROGRAM THROUGH SOUTHERN CALIFORNIA EDISON

Qualifying person must reside in the property listed on the bill, and be enrolled in the Southern California Electric's Care Program. If you qualify for this program, but have not applied through Southern California Edison Company, you must do so before applying for the User Utility Tax Exemption from the City of Cathedral City.

Important: Please attach to this application a copy of the following documents:

(1) Proof of age as 65 or older

Attach a copy of one of the following items:

- [] State Issued Drivers License
[] State Issued Identification Card
[] Passport
[] Permanent Resident Card

(2) Proof of enrollment in the Care Program

Attach a recent copy of your Southern California Edison electric bill for the above property that shows your name and service address, and the page that indicates you are receiving the discount for Southern California Electric's CARE Program. Exemptions are valid only for utility services for which a recent bill is received by the City. You must also provide a current copy of all other utility bills [i.e., gas, cable, telephone, or cell phone bills] that you are requesting an exemption. If you add or change utility providers at any time, you must notify the City by resubmitting this form and attaching new utility bills to receive an exemption for the new utility service.

DECLARATION:

I declare, under penalty of perjury, 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 Cathedral City
Attn: Finance Department, Tax Administrator
68-700 Avenida Lalo Guerrero
Cathedral City, CA 92234