

City of Warrenville
3S258 Manning Avenue
Warrenville, IL 60555

Phone (630) 393-9427
Fax (630) 393-5053

Senior Citizen Tax Rebate Instructions

Policy: The City of Warrenville will reimburse City Telecommunications Taxes paid by qualified seniors with a total net household income of \$40,000 or less in the previous calendar year. The rebate is applied to the tax payments made beginning with the year in which the senior turned 65. Applicant must occupy the property as their principal residence and be liable for paying the taxes. Reimbursement will be made annually for the preceding calendar year.

Procedures:

1. Applicants must complete the attached application form, which will be available starting December 1 each year
2. Applications must be submitted by April 30 for the previous calendar year.
3. Reimbursement will be made within 30 days following receipt of a completed application.
4. Applicant must provide proof of the following:
 - a. Age – Driver’s license, birth certificate, Medicare card or other acceptable form of identification. Once established, proof of age does not need be provided in future years.
 - b. Home ownership/Renter status – Tax bills or lease for the address for which reimbursement is requested.
 - c. Income – Copy of U.S. Tax return for the year reimbursement is requested showing adjusted gross income, IRS Notice 703, or other proof of income acceptable by the City.
 - d. Paid Telecommunication Bills.

Documents submitted for proof of age, home ownership/renter status, and paid utility bills will be verified and returned to applicant upon submission of application.

5. For an applicant who becomes 65 years old during the year for which an application is filed, reimbursement will be calculated starting with the month in which the applicant became 65 and will be made for those utility billing periods which start in the month the applicant became 65, regardless of whether the billing period starts before or after the applicant’s birthdate.

**City of Warrentville
Application
Senior Citizen Telecommunications Tax Rebate**

1. NAME _____ 2. DATE _____
3. ADDRESS _____ 4. PHONE _____

5. Names and ages of all persons who reside at the above address:

Name	Age	Birthdate m/d/yyyy

Applicant must provide proof of age when submitting application. Please present driver's license or other proof of age for verification.

6. Are you, (Check All that Apply)
 Head of Household
 Homeowner
 Renter

Applicant must provide copy of property tax bill or lease corresponding to the address for which utility bills were paid for verification.

7. Adjusted gross income: _____

Attach a copy of U.S. Tax Return, which shows adjusted gross income, IRS Notice 703, or other proof of income.

- OR -

Attach a copy of Application to Senior Assessment Freeze Program.

8. City Telecommunications taxes paid by month due:

MONTH	Telephone TAX amount
January	
Febuary	
March	
April	
May	
June	
July	
August	
September	
October	
November	
December	

Total of All Telecommunications Taxes \$ _____

Submit copies of bills for verification.

I hereby certify that all information provided as a part of this application is true and correct.

Signature

City Use Only:

1. Proof of Age _____ By: _____ Date: _____
2. Proof of Ownership/Rental _____ By: _____ Date: _____
3. Verification of Taxes Paid _____ By: _____ Date: _____
4. Participation in DuPage Co. Senior Assessment Freeze: Yes _____ No _____
5. Amount Reimbursed _____ Check Number _____ Date: _____