



## Utilities Department Late Fee Exemption Application Residential Only

Date:		Phone Number:	
Name:			
Address:			
Mailing Address:			
<i>(If different from physical address)</i>			
Email Address:			

**Permanent Exemption Request.** Customer must show proof of ALL of the following:

	Low to moderate fixed income household as identified by current figures obtained from the Department of Housing and Urban Development (HUD), and;
	Permanently disabled or over 65 years of age, and;
	Timing of the receipt of income checks make it difficult to pay utility bills prior to delinquency, and;
	Satisfactory 12 month history of on-time payments for utilities with the City of Winnsboro (provided by COW-Utility Dept.)

**Temporary Exemption Request.** Customer must show proof of ALL of the following:

	Household income of low to moderate standards or a temporary disability, prohibiting work, which reduces household income to low to moderate standards as identified by HUD and;
	Medical bills, which erode the ability to provide other essential household needs and;
	Satisfactory 12 month history of timely payments for utilities with the City of Winnsboro or proof of extenuating circumstances which have hindered on-time payment.

*The undersigned hereby attests to the above information as accurate. Any falsification may result in the denial or revocation of exemption.*

Signature:	
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City Use Below this line:

	Qualified for Fee Exemption
	NOT - Qualified for Fee Exemption (provide explanation below)

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City Administrator Approval: \_\_\_\_\_

ADJUSTMENT TO ACCOUNT

Date Entered:		Entered By:	
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