



SENIOR CITIZEN SALES TAX HARDSHIP REBATE
INCOME AFFIDAVIT

*To be completed only if you are **not** required to file a Federal Income Tax Return under IRS regulations.*

APPLICANT INFORMATION			
Applicant Name:		Applicant Email:	
Spouse Name:			
Primary Phone:		Secondary Phone:	
Mailing Address:		Residential Address:	

STATEMENT OF 2016 INCOME			
Type of Income	Monthly	Annual	Verified
Wages, Salaries, Tips			
Interest Income			
Dividend Income			
Taxable Refunds or Credits			
Alimony received			
Business Income			
Capital Gain			
IRA Distributions (not rollover)			
Pensions and Annuities			
Rent, royalties, partnerships, corporations, trust income			
Unemployment Compensation			
Social Security Income			
Supplemental Social Security			
Social Security Disability Income			
Veterans Administration (VA)			
Permanent Fund Dividend			
Other Income			
Longevity Bonus			
APA (Public Assistance)			
Total Annual Income			

Certification: I declare subject to the penalties prescribed in the City and Borough of Juneau ordinances that this form has been examined by me and to the best of my knowledge and belief is true, correct and complete.

Signature of Applicant:		Date:	
Signature of Spouse: <i>(Only if applying jointly)</i>		Date:	