



CITY OF BOULDER 2024 FOOD TAX REBATE APPLICATION

INSTRUCTIONS FOR COMPLETING THIS APPLICATION

Who Qualifies? Applicants must:

- Meet financial eligibility guidelines (see chart below);
- **and** have been a resident of Boulder for the entire 2023 calendar year;
- **and** qualify as one of these three categories:
 - age 62 or over for the entire 2023 calendar year;
 - **or** a person with a disability;
 - **or** a family with children under 18 years of age in the household for the entire 2023 calendar year

Boulder Housing Partners Residents Please read the instructions on page 2 carefully to determine what documentation is required to qualify for the rebate. You may be able to skip some parts of the application or not submit certain documentation by signing the records release.

Financial Eligibility Guidelines

Households must meet the income limits below. Use “Total Income (line 9) from your 2023 Federal 1040 or 1040 SR tax form. If not required to file an income tax return, use total income from all sources.

| Family Size | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 |
|--------------|--------|--------|--------|--------|--------|--------|--------|--------|
| Income Limit | 46,500 | 53,150 | 59,800 | 66,400 | 71,750 | 77,050 | 82,350 | 87,650 |

Application period - March 1, 2024- June 30, 2024. Rebates will be mailed to households as applications are approved, may take up to 2 months. **No late applications or documentation will be accepted.**

To Submit Application

| | |
|---|---|
| Mail to: Postmark by June 30, 2024 | Food Tax Rebate Program 1101 Arapahoe Ave Boulder, CO 80302 |
| By Appointment: Office hours, Fridays 1-4pm; April 1- June 28 No appointment necessary; first come first serve | New Britain Building: 1101 Arapahoe Ave. Boulder, CO 80302 |

Questions?

For more information or assistance call 303-441-4261 and leave a message. We will return your call as soon as possible.

DOCUMENTATION CHECKLIST

PLEASE INDICATE THE DOCUMENTATION YOU ARE ATTACHING

1. **Photo ID:** First time applicants or if ID on file has expired, please submit an U.S. or foreign government-issued photo ID including full name, date of birth, and photo. This ID must be valid or expired within the last 2 years.
☐ Form of id you are attaching: _____
2. **Proof of Residency:** Have lived in the City of Boulder continuously from Jan. 1, 2023 through Dec. 31, 2023. BHP can verify your residence. **If you resided in the city for all of 2023, but lived with BHP for part of the year, further proof will be required showing city residence for entire year.** Please check all that apply:
☐ lease, deed
☐ property tax receipt
☐ the attached "Landlord Affidavit" completed and signed by your landlord or housing provider, or other proof establishing full-year residency.
☐ City residents who do not have permanent shelter are eligible for the refund and can meet the residency requirement by providing documentation that they are receiving services from a city-recognized homelessness services agency.
☐ Other _____
3. **Proof of Income** Residents of BHP properties are income qualified. However, if you are applying as a family with children, a copy of your 2023 Federal Tax return is required. Your tax return will be used to show your dependent(s). If you were not required to file a federal tax return for 2023, we can accept other proof of your status as a family with children.
4. **Proof of Category** Check the appropriate category that describes you and form of documentation:
☐ **Families with children**
☐ Federal tax return showing dependents or qualifying child for head of household
☐ Copies of birth certificates if not required to file a federal income tax return for 2023
Children of separated or divorced couples must have lived in the City of Boulder for all of 2023.
☐ **Persons with Disabilities**
☐ Proof of Supplemental Security Income or Social Security Disability income
☐ Letter from a physician stating that the individual has a disability as defined by the federal Americans with Disabilities Act.
☐ **Older Adults** must have been at least 62 years of age for all of 2023. Proof of age may include: a state issued I.D., a driver's license, a passport, a birth certificate, or military.

Have you attached the required documentation to this application?



CITY OF BOULDER
FOOD TAX REBATE APPLICATION
 (For rebate of taxes from 2023)

CITY OF BOULDER
HOUSING AND HUMAN SERVICES DEPARTMENT

**Staff
Use**

Please check one:

- ☐ Family with children under the age of eighteen (18) for all of 2023: rebate -\$318
Please fill out the 'Family Members' section on next page.
- ☐ Individual with a disability: rebate - \$104
- ☐ Older Adult - must have turned 62 on or before January 1, 2023: rebate - \$104

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[] BHP

| | | | | |
|---|---------------|----------------------------------|---|----------------|
| Last Name | | First Name | | Middle Initial |
| Street Address (Do not use P.O. Box) | | | | Apt. or Unit # |
| City | State | Phone Number Mobile [] Home [] | | Zip Code |
| Mailing Address (if different than Street address) | | | Apt or Unit # | |
| Mailing city | | State | Zip Code | |
| Date of Birth | Email Address | | | Today's Date |
| Race <input type="checkbox"/> African (Black) or African American <input type="checkbox"/> American Indian or Alaskan Native <input type="checkbox"/> Asian <input type="checkbox"/> Hawaiian Native or Pacific Islander <input type="checkbox"/> Hispanic or Latino/Latina <input type="checkbox"/> Other <input type="checkbox"/> Two or more races <input type="checkbox"/> White or Caucasian | | | Gender: <input type="checkbox"/> Female <input type="checkbox"/> Male <input type="checkbox"/> Transgender <input type="checkbox"/> Prefer to self identify | |

Application continues on other side.

FAMILY MEMBERS

Please only fill out the section below if you are applying as a family with at least one child under the age of 18 for all of 2023.

| Name | Date of Birth | Name | Date of Birth |
|------|---------------|------|---------------|
| | | | |
| | | | |

OATH OF APPLICANT

I declare under penalty of perjury in the second degree that this application and all attachments are true, correct, and complete to the best of my knowledge. I hereby grant my permission to City of Boulder staff to verify my federal income tax return and to have information released to them.

| | |
|-----------|------|
| Signature | Date |
|-----------|------|

RECORDS RELEASE

I hereby grant permission to Boulder Housing Partners (BHP) to release information to City of Boulder staff regarding my low-income status, dependent(s) and residency status in order to qualify for the food tax rebate

| | |
|-----------|------|
| Signature | Date |
|-----------|------|

WE CANNOT PROCESS UNSIGNED APPLICATIONS