

APPLICATION LOW INCOME DISCOUNT

City of Santa Clarita

Please provide a copy of your driver's license or ID card and a current utility bill that indicates if you receive a
utility bill utility rate discount based on financial need. (For example, Universal Lifeline Telephone Service
Credit, CARE Program, etc.)

Send completed application and all required documents to: Burrtec at 26000 Springbrook Avenue, Ste 101 Saugus, CA. 91350 or email <u>santaclarita@burrtec.com</u>

Name				-
Address				
City		State	Zip	
Telephone #				
Are you head of household?	Yes	No		
Do you qualify for lifeline on your utili	ty bill? Yes	No		
****COPY OF DRIVER LICENS	E REQUIRED/II (PLEASE AT		ILITY BILL F	REQUIRED****
I certify under penalty of perjury that the	above information	is true and cor	rect.	
Applicant Signature		I	Date	
	(Office use (Only)		
Review by:		I	Date	
Approved () Des	nied ()			