



**Policy**

The Village of Machesney Park will reimburse Village Telecommunications Taxes paid by qualified senior residents age 65 or over with total household income of 50% or less of median income as established by the Dept. of Housing & Urban Development (HUD) for the Rockford metropolitan statistical area (MSA) in the previous calendar year. Applicants must occupy the property as their principal residence and be liable for paying the taxes. Rebates will be given up to \$25 per household per year, and will be awarded first-come, first-served until the allocated budget is exhausted. Minimum rebate is \$10.

**Procedures**

1. Applicants must complete the attached application form, which will be available starting July 1 each year.
2. Applications must be submitted by August 31 to qualify. Rebates will be given first-come, first served.
3. 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 US Tax return for the previous year showing adjusted gross income, IRS Notice 703, or other proof of income acceptable by the Village
  - d. Paid telephone bills

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

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

---

**2018 Income Guidelines**

*Rockford IL MSA, 50% of median*

<b>1 person</b>	<b>2 person</b>	<b>3 person</b>	<b>4 person</b>	<b>5 person</b>	<b>6 person</b>
<b>\$23,200</b>	<b>\$26,500</b>	<b>\$29,800</b>	<b>\$33,100</b>	<b>\$35,750</b>	<b>\$38,400</b>



# TeleCom Tax Rebate

MACHESNEY PARK SENIOR  
TELECOMMUNICATIONS TAX REBATE PROGRAM

## Application

Name: \_\_\_\_\_ Date: \_\_\_\_\_

Address: \_\_\_\_\_ Phone: \_\_\_\_\_

City: *Machesney Park*

County: *Winnebago*

Zip Code: *61115*

**Names and ages of all persons residing at above address:**

Name	Age	Date of Birth	Name	Age	Date of Birth
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

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

**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.*

*Copies of paid telephone bills for preceeding year MUST accompany this application.*

**Adjusted Gross Income:** \$ \_\_\_\_\_ *Attach a copy of U.S. Tax Return, which shows adjusted gross income, IRS Notice 703 or other proof of income.*

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

Signature: \_\_\_\_\_

**For more information, please contact Village of Machesney Park at 815-877-5432.**

Visit <http://machesneypark.org>



**For Office Use Only**

Proof of Age By: \_\_\_\_\_ Date: \_\_\_\_\_  Proof of Income By: \_\_\_\_\_ Date: \_\_\_\_\_

Verification of Property Taxes Paid By: \_\_\_\_\_ Date: \_\_\_\_\_  Amount Reimbursed \$ \_\_\_\_\_ Check #: \_\_\_\_\_ Date: \_\_\_\_\_

**Village Telecommunications taxes paid:**

Month	Telecommunications Tax Paid	Month	Telecommunications Tax Paid	Month	Telecommunications Tax Paid
July	\$ _____	November	\$ _____	March	\$ _____
August	\$ _____	December	\$ _____	April	\$ _____
September	\$ _____	January	\$ _____	May	\$ _____
October	\$ _____	February	\$ _____	June	\$ _____

**Total of All Telecommunications Taxes:** \$ \_\_\_\_\_ *Please submit copies of bills for verification. Total must exceed \$10 to qualify.*