CITY OF BOULDER
PARKS AND RECREATION
REDUCED RATE APPLICATION

Mail to:
Parks & Recreation Dept
Reduced Rate Program
P.O. Box 791
Boulder CO 80306
Secure FAX to: 303 413-7276

Hand Deliver to:
Parks & Recreation Administration Offices
3198 Broadway
Boulder CO 80304
8 am to 5 pm Monday to Friday
Email to: moorek@bouldercolorado.gov

For information or assistance call: 303 413-7200

Applications are accepted year round. Applications must be complete and include all necessary documentation to be accepted. Please allow up to 7 business days for your application to be reviewed.

Please answer the following two questions to help you decide if you qualify

1) I live in the city limits in the City of Boulder (a Boulder zip code does not guarantee city limits)

YES→ move to question #2 **No →** Sorry, you do not qualify

2) I fall into one of the following categories: **Please check one**

[ ] Family unit (with at least one child 18 yrs or younger living in the household)
[ ] An Adult **with a disability** and annual income less than $33,650
[ ] Senior (age 62 or over) and annual income less than $33,650

YES→ move to applicant information **No →** Sorry, you do not qualify

Applicant Information: (Please print legibly) Today's Date:_____

Last Name: _____First :_____Middle initial:_____

Street Address: _____ Apt or Unit #_____

City of Boulder, State of Colorado ZIP: _____

Phone: _____ Email: _____

ALL OTHER MEMBERS OF HOUSEHOLD TO BE REVIEWED FOR BENEFITS
(Attach a separate page if necessary)

Last Name: _____First :_____Birthdate: _____

Last Name: _____First :_____Birthdate: _____

Last Name: _____First :_____Birthdate: _____

Last Name: _____First :_____Birthdate: _____

Last Name: _____First :_____Birthdate: _____

For a list of documentation needed and Signature of Oath see other side→

Part A Provide one or more of the following documentation:

Proof of Residency – Applicants must live in the city limits of Boulder. Provide a current copy of one of the following: Colorado ID or license; lease, deed or property tax receipt; utility bill from the City of Boulder, Xcel Energy, or a phone company. If you do not have any of the documents listed then you may completed a "Landlord Affidavit." form.

Part B Provide one or more of the following documentation:

BHP Managed Properties (*Section 8 and Affordable housing does not qualify*)
City residents who live in the Boulder Housing Partners managed Properties will be approved through the administrative office of Boulder Housing Partners, located at 4800 Broadway. Submit the authorized eligibility form. Boulder Housing Partners eligibility forms will be valid for 90 days from the date of issue.

Medicaid

Note 2014 – new low-income adults applicants without dependent children to provide proof of disability

A copy of each family member current Medical Authorization Card (MAC) OR a letter of verification of the Medicaid status. Copy all cards on one page, separate pages are not necessary. Letters of Medicaid status will be valid for 6 months from the date of issue.

Colorado Health Plan (CHP)

A copy of each family member current CHP card(s), for children 18 yrs or younger living in the household. Copy all cards on one page, separate pages are not necessary.

City of Boulder Food Tax Rebate

City residents who have received the City of Boulder Food Tax Rebate are eligible for the Reduced Rate Program. Attach a copy of the Food Tax Rebate check stub. If you have lost the check stub please contact our office to confirm a check was issued from the Finance department from March to June. A Food Tax Rebate check will be valid for 6 months from the date of issue.

Exception Requests : *If you do not have any of the documentation listed above*
You will need to provide a copy of your current year Federal Income Tax return.(current tax return= last year's return required by law to be filed this year) **OR** If you are a family unit and were not required to file a Federal Income Tax return then you must provide copies of birth certificates for all children and complete the "Income Oath" **and/or** Application for Exception.
Proof of Disability → Proof of SSI or SSDI- qualifies disability and income OR
attach proof of disability, such as: a letter stating your disability status from an agency/physician AND complete the documents as listed. **Note 2014-proof of disability RTD's Special Discount Card**

Family Size	1	2	3	4	5	6	7	8
Income Limits	$0 - $33,650	$33,651 - $38,450	$38,451 - $43,250	$43,251 - $48,050	$48,051 - $51,900	$51,901 - $55,750	$55,751 - $59,600	$59,601 - $63,450

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 the City of Boulder staff to verify my federal income tax return and to have information released to them.**	
Signature X	**Date**

CITY STAFF USE ONLY

Date Received_____ **Date Approved** _____ **Approved By** _____