Finance Department
567 El Camino Real, San Bruno, CA 94066
(650) 616-7086 *voice* · (650) 876-0256 *fax*
www.sanbruno.ca.gov

	Approved	Denied
Finance:		
	For office use only	

2026-27 Application for Discounted Rates

Water & Sewer ☐
(Check each that apply)
Water Customer Number _____

CUSTOMER INFORMATION

Name _____

Service Address _____

Mailing Address ***(if different from residence)*** _____

Daytime Telephone Number _____

Email Address: _____

HOUSEHOLD INFORMATION

Number of People Living in Household: Adults _____ + Children _____ = Total _____

Name and Birthdate of All Household Residents: _____

REQUIRED DOCUMENTS

Proof of income is required. Please attach a copy of your income verification.
Failure to include necessary documents will result in a denied application.

Income Verification: *(Please provide a **copy** of **one** of the following)* ***NO W-2 FORMS ACCEPTED***

*2025 Federal **OR** State Income Tax Return **(first two pages only showing AGI), or***

*2025 Statement of Social Security or Disability Benefits, **or***

2025 Proof of State/Federal Housing Assistance

$ _____
Total Annual Household Income

(Salary check stubs are not acceptable)

To ensure your privacy, please remove all social security and account numbers.
Documents will be destroyed once application has been approved and cannot be returned to the applicant.

Examples of Income Sources are:

Wages/Salaries	Disability Payments	Rental Income
Social Security, SSI, SSP	Pension/Private Retirement	Interest/Dividends

DECLARATION

I state that the information I have provided in this application is true and correct. I agree to provide all information necessary to approve this application. I agree to inform the City of San Bruno's Finance Department if I no longer qualify to receive the reduced rates. I understand that if I receive the discount without meeting the qualification guidelines, I will be required to repay the discount I received. I understand that participation in the program is voluntary and I agree to comply with all requests made by the City of San Bruno. I accept these terms and acknowledge the City may amend the administration of the discounts for the Discounted Rate Program at any time.

X _____ X _____
Signature Date

Qualifying applicants are not provided reduced rates retroactively for any delay due to processing or late submission.

CITY OF SAN BRUNO
FINANCE DEPARTMENT

Fiscal Year 2026/27

Dear Residential Customer:

The City Council has established a program that provides reduced rates to households with certain income limitations. Participation in this program is voluntary. **All customers that currently qualify for reduced rates must re-apply each fiscal year.** In order to participate, a household's combined gross annual income (the total income before tax deductions for **all** residents of the service address) may not exceed the maximum income as detailed below.

Schedule of Discounts: (effective on bills generated after July 1, 2026)

Service	Discount	Limitations
Water and Sewer	25%	n/a

Income Guidelines:

Number of Persons in Household	Total Combined Annual Income
1	$68,550
2	$78,350
3	$88,150
4	$97,900
5	$105,750
6	$113,600
7	$121,400
8	$129,250

Renewal applications and proof of income must be submitted by June 30, 2026, to avoid being dropped from the program.

Qualifying applicants are not provided reduced rates retroactively for any delay due to processing or late submission.

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