



Madison Customer Assistance Program (MadCAP)

City of Madison's Customer Assistance Program (**MadCAP**) assists lower-income customers with credits, or discounts, to their Municipal Services Bill. Eligible households will receive either a **\$20** or **\$30** monthly bill credit, or discount.

HOW TO QUALIFY

1. Be a residential customer
2. Have the Municipal Services Bill in your name
3. Your household income must meet the program guidelines as shown in the table below
4. Provide last year's tax return or a benefits statement from Social Security to verify your income¹
5. **For homeowners only, not renters:** Take part in a water conservation program. Options include:
 - a. Take part in [MWU's Toilet Rebate Program](#). If you have received this rebate already, that counts. **or**
 - b. Take part in MWU's Home Water Conservation Program through [Project Home](#) to evaluate options for water-saving toilets and fixtures, and to fix water leaks.

INCOME GUIDELINES:

"Gross annual household income" means incoming money that is earned or unearned by all the household members. For example: wages, salaries, interest, dividends, spousal support and child support payments, public assistance payments, social security and pensions, rental income, income from self-employment, and all employment-related, non-cash income, and money from other sources. If your household income is the same or less than 30% of area median income (AMI), you may be eligible for a \$30 credit each month. If your household income is between 30% and 50% AMI you may be eligible for a \$20 credit each month. If you qualify for Section 8, Wisconsin FoodShare or SNAP benefits, or the Women, Infants, and Children (WIC) program, your income would likely meet the MadCAP income guidelines.

Eligibility – At or below amounts shown below (2022)

Number of Persons in Household	Gross Annual Household Income (all household income before taxes) must not exceed the following Area Media Income (AMI) Limits	
	30% AMI Limit	50% AMI Limit
1	\$24,250	\$40,400
2	\$27,700	\$46,150
3	\$31,150	\$51,900
4	\$34,600	\$57,650
5	\$37,400	\$62,300
6	\$40,150	\$66,900
7	\$42,950	\$71,500
8 or more	\$46,630	\$76,100

- Protect your personal information by hiding or removing the first five digits of any social security number on any document you send.
- If your income changes and or no longer eligible, you must let the City know by emailing or writing to the address given at the end of Page 2. Households that qualify will need to re-apply every year.

¹ Last year's signed tax return (1040, 1040A, or 1040 EZ) including all schedules (if electronically filed, please manually sign the copy provided) OR an IRS Verification of Non-filing Letter **OR** Yearend benefits statement from Social Security or evidence of any other source of income or assistance.



Municipal Services Billing

119 E Olin Avenue, Madison, WI 53713 • TEL (608) 266-4651 • municipalbilling@cityofmadison.com

Madison Customer Assistance Program (MadCAP) – APPLICATION FORM (General)

Complete all steps 1 - 6 below. Applications with missing information must be re-submitted.

1. Customer Information

Customer Name:		Date:	
Service Address:		City:	Zip:
Customer Number: ²	Account Number:	Phone Number:	Email:
Mailing Address (if different):		City:	Zip:

2. How many people live in your household? _____

3. Use the table below to find the **number of people who live in your household**. Under the number of people who live in your household, circle the total **GROSS** (before taxes and other deductions) household income that is applicable to you.

Number of People in Household	1	2	3	4	5	6	7	8+
My Annual Household Income is lower than:	☐ \$24,250	☐ \$27,700	☐ \$31,150	☐ \$34,600	☐ \$37,400	☐ \$40,150	☐ \$42,950	☐ \$46,630
My Annual Household Income is lower than:	☐ \$40,400	☐ \$46,150	☐ \$51,900	☐ \$57,650	☐ \$62,300	☐ \$66,900	☐ \$71,500	☐ \$76,100

4. Attach a copy of **all** documents that show your **GROSS** household income for every household member.

5. Check the box below that applies to you:

- ☐ I have previously participated in the Toilet Rebate Program
- ☐ I am a current participant in the Home Water Conservation Program (Project Home)
- ☐ I have not participated in the Toilet Rebate Program nor the Home Water Conservation Program

6. **DECLARATION: (Please read, sign, and date.)**

The information on this application is true and correct. I have read and understand the requirements of the MadCAP. I agree to provide proof of income in order to participate. I agree to notify the City if the number of people in my household or my household income changes. I understand that if I receive the credit without qualifying for it, I may be required to pay back the credit I received. I understand that I need to apply and provide my household income documents every year. The City may take legal action against me if I was not truthful or do not follow these rules.

Applicant's Signature: _____

Date: _____

Submit completed MadCAP application, income verification document, and Home Water Conservation Program application or Toilet Rebate Program application to:

Email: municipalbilling@cityofmadison.com **US MAIL:** Madison Municipal Services, 119 E. Olin Ave, Madison, WI 53713

² You may need to look at your bill to obtain customer and account numbers. These two numbers are listed on the first page of your bill. If you need help finding your customer or account number, please call 608-266-4651.