

# Sunrise Cares Utility Relief Program Appeals Application

Please complete the appeals application in its entirety in order to be considered.

Before completing the appeal, please consider the following:

- All questions require a response.
- Appeals must be postmarked within ten (10) days of receiving the denial notice of the original application.
- Please reference the FAQ on our website to confirm you are eligible, which can be found by visiting: <a href="http://www.sunrisefl.gov/utilityrelief">http://www.sunrisefl.gov/utilityrelief</a>

Once completed in its entirety, applications (with any additional supporting documentation) should be mailed to:

#### **Sunrise Cares Utility Relief Program**

1007 North Federal Highway #316 Fort Lauderdale, FL 33304-1422

If you provide an email address, you will be emailed a confirmation of receipt of your application. If you do not have an email address, you will receive a phone call confirming receipt of your application.

The appeal will be reviewed by the City's Director of Finance and Administrative Services or designee, and a response will be sent to the applicant with a final decision within 10 business days after receipt of the application. All appeal decisions are final.



## Sunrise Cares Utility Relief Program Appeals Application

Utility Account Holder First Name and Last Name:
Utility Account Number:
Utility Account Holder Email Address:
Utility Account Holder Phone Number:
Who is applying for the appeal (check one)?
☐ Utility Account Holder
☐ Other Adult Household Member over the age of 18
If the Other Adult Household Member is applying for the appeal, please list this individual's name, email address, and phone number. Otherwise, skip this question.
First Name and Last Name:
Email Address:
Phone Number:
What service did you apply for (check one)?
□ Water □ Water & Wastewater



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Please provide a statement why you believe you qualify for the program an	d were
mistakenly denied?	

If you would like to provide any additional supporting documentation, please include copies with your completed application and mail to:

#### **Sunrise Cares Utility Relief Program**

1007 North Federal Highway #316 Fort Lauderdale, FL 33304-1422

Note: please make sure to cross out / black out any personal information on your supporting documents (i.e., account numbers; driver's license number; etc.) before mailing them.

