

EL PASO WATER UTILITIES PUBLIC SERVICE BOARD  
**VERIFICATION OF ELIGIBILITY FOR NON-PROFIT RATE**

Name: \_\_\_\_\_  
Property Address: \_\_\_\_\_  
Telephone: \_\_\_\_\_  
Email: \_\_\_\_\_  
Account No: \_\_\_\_\_

I, \_\_\_\_\_, hereby certify and affirm:

1. That I am a non-residential stormwater customer in the City of El Paso;
2. I am a 501(C)(3), 501(C)(4), 501(C)(19) or 501(C)(23) per IRS regulations.

I am attaching a copy of the IRS determination letter as evidence of my non-profit status.

I hereby certify that I have read the verification, that it is true and accurate, and that I am eligible to receive the non-profit stormwater rate.

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Title

Return completed form and documentation to:

El Paso Water Utilities Public Service Board  
Attention: Stormwater Customer Service  
6400 Boeing  
El Paso, TX 79925

Or submit electronically to: [customer.service@epwu.org](mailto:customer.service@epwu.org)  
Or fax to 594-5660.