



**2022 FRANCHISE FEE REBATE APPLICATION**

PLEASE PRINT LEGIBLY

Property Owner Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_

E-mail Address: \_\_\_\_\_

Property Address: \_\_\_\_\_

Parcel Identification Number: \_\_\_\_ - \_\_\_\_ - \_\_\_\_ - \_\_\_\_ - \_\_\_\_ - \_\_\_\_

Electric/Gas Provider (check one):  Xcel Energy       Steele Waseca       Greater MN Gas

I certify that I am the current property owner and was the property owner of the above referenced property at the time the special assessment was levied.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date



- Attach a copy of the most recent electric/gas bill for this property with the same name as above. Applications without this information will not be approved.
- A separate form **must** be submitted for each parcel identification number.
- Return this application and supporting documentation via mail to:

City of Faribault  
Attn: Franchise Fee Rebate  
208 1<sup>st</sup> Ave NW  
Faribault, MN 55021

or email to: [financedepartment@ci.faribault.mn.us](mailto:financedepartment@ci.faribault.mn.us)

- Questions Contact: Ann Remold, Assistant Finance Director  
(507) 333-0349  
[aremold@ci.faribault.mn.us](mailto:aremold@ci.faribault.mn.us)