



**Illinois Department of Revenue**  
**RWS-1 Water and Sewer Assistance Charge Return**

REV 01  
 E S \_\_\_/\_\_\_/\_\_\_  
 NS DP CA

**Identify your business**

Station R02 Do not write above this line.

Account ID: \_\_\_\_\_

Liability period \_\_\_/\_\_\_/\_\_\_  
 Month Year

FEIN: \_\_\_\_\_  
 Federal Employer Identification number

Check here if your address has changed.

Is this a final (you are no longer in business) return?  yes  no

License no.: W S - \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_  
 Number and street

City State ZIP

**Step 1: Figure your assistance charges due**

	Total number of accounts	Assistance Charge
1 Total number of accounts to which you provided residential water service and from which you collected the full amount of the assistance charges during this liability period.	1 _____	
2 Multiply Line 1 by the applicable rate. See instructions.		2 \$ _____
3 Total number of accounts to which you provided nonresidential water service and from which you collected the full amount of the assistance charges during this liability period.	3 _____	
4 Multiply Line 3 by the applicable rate. See instructions.		4 \$ _____
5 Total number of accounts to which you provided residential sewer service and from which you collected the full amount of the assistance charges during this liability period.	5 _____	
6 Multiply Line 5 by the applicable rate. See instructions.		6 \$ _____
7 Total number of accounts to which you provided nonresidential sewer service and from which you collected the full amount of the assistance charges during this liability period.	7 _____	
8 Multiply Line 7 by the applicable rate. See instructions.		8 \$ _____
9 Add Lines 2, 4, 6, and 8. This is your total water and sewer assistance charge from accounts that paid the charge in full.		9 \$ _____
10 Enter the total amount of water and sewer assistance charges collected from accounts that have not paid the charge in full.		10 \$ _____
11 Add Lines 9 and 10. This is your total water and sewer assistance charge.		11 \$ _____
12 Enter the amount of your overpayment credit. See instructions.		12 \$ _____
13 Subtract Line 12 from Line 11. This is your water and sewer assistance charge due. Make your payment to "Illinois Department of Revenue."		13 \$ _____

**Step 2: Sign below**

Under penalties of perjury, I state that I have examined this return and, to the best of my knowledge, it is true, correct, and complete.

\_\_\_\_\_  
 Title: \_\_\_\_\_ (\_\_\_\_\_)\_\_\_\_\_-\_\_\_\_\_  
 Taxpayer's signature and title (state if individual owner, member of firm, or corporate officer title) Telephone number (include area code) Date \_\_\_/\_\_\_/\_\_\_

\_\_\_\_\_  
 Firm: \_\_\_\_\_ (\_\_\_\_\_)\_\_\_\_\_-\_\_\_\_\_  
 Preparer's signature and name of the firm or employer (if applicable) Telephone number (include area code) Date \_\_\_/\_\_\_/\_\_\_

**Step 3: Mail your return**

Mail your completed Form RWS-1 and payment to:

**ASSISTANCE CHARGES**  
**ILLINOIS DEPARTMENT OF REVENUE**  
**PO BOX 19037**  
**SPRINGFIELD IL 62794-9037**

