



Household size _____

APPLICATION FOR REDUCED DOG LICENSE RATE

APPLICANT NAME: _____

ACCOUNT NO: _____ PHONE NO: _____

ADDRESS: _____

1. I am the head of household and/or directly responsible for paying the bill (if married, either the husband or wife may be the head of the household);
2. I am at least sixty-two (62) years of age;
3. My annual gross income from **all sources** is \$_____;
4. I have resided at such residence for a period of not less than ninety (90) consecutive days and intend to remain at such residence;
5. I do not have water/sewer service in my name at more than one address;
6. **The dog(s) that I am licensing is neutered or spayed.**
7. I will inform the City in writing within 10 days if there is any change in my household income, any change in my household members or any other changes as it relates to the requirements of this program; and
8. I understand that I am required to demonstrate satisfactory proof of household income and that the City may require me to complete an updated application at any time.

ADDITIONAL HOUSEHOLD MEMBERS:

SPOUSE: _____ GROSS INCOME: _____

NAME: _____ GROSS INCOME: _____

I SWEAR UNDER PENALTY OF PERJURY OF THE LAWS OF THE STATE OF WASHINGTON THAT ALL OF THE ABOVE INFORMATION IS TRUE.

Applicant's Signature

☐ APPROVED ☐ DENIED _____ Date: _____

**VERIFICATION FOR ALL PERSONS IN THE HOUSEHOLD
MUST BE PROVIDED**

The following information is required to verify income and eligibility:

- Proof of date of birth (Valid driver's license, state-issued ID or birth certificate)
- Proof of annual income documented with:
 - a *complete copy* of the previous year tax return (including all Schedules, if any) which includes all household members, OR
 - a *complete copy* of current bank statements (checking and savings) for all accounts for all household members, OR
 - a *complete copy* of income verification issued by an authorized government agency TOGETHER WITH recent bank statements for all accounts for all household members.