

Household	size	

APPLICATION FOR REDUCED WATER/SEWER RATES

ΑF	PPLICANT NAME:				
ACCOUNT NO:		PHONE NO:			
Α[DDRESS:				
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 <u>all sources</u> 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.	. 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				
7.	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.				
ΑI	DDITIONAL HOUSEHOLD MEMBER	RS:			
SPOUSE:		GROSS INCOME:	_GROSS INCOME:		
NAME:		GROSS INCOME:	GROSS INCOME:		
N	AME:	GROSS INCOME:			
N	AME:	GROSS INCOME:			
	SWEAR UNDER PENALTY OF PE ASHINGTON THAT ALL OF THE AB		E STATE OF		
Ar	oplicant's Signature				
	APPROVED DENIED	Date	e:		
Discount valid until		or until there are household char	naes		

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:
 - o 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 <u>TOGETHER WITH</u> recent bank statements for all accounts for all household members.