Application For Senior Citizen Sewer Discount

Name: _____   **Phone:** _____

Street Address: _____
Note: Per City Ordinance 428 Section 1(a), "No user outside the City limits shall qualify for the Senior Citizen discount."

Please Answer the Following Questions:

1. Does your household presently include an immediate family member (yourself, spouse, mother, father, brother or sister) who is a full-time occupant and 62 years of age or older as of this date? _____

2. How many people reside in your household? _____

3. On the Income Table below, please check the box next to the income range which reflects the combined income of your household during the last year.

1 Person	$0 - $17,750	5 Persons	$25,301 - $27,350
2 Persons	$17,751 - $20,250	6 Persons	$27,351 - $29,350
3 Persons	$20,251 - $22,800	7 Persons	$29,351 - $31,400
4 Persons	$22,801 - $25,300	8 Persons or More	$31,401 - $33,400

4. Housing Status (Please check one):
   ☐ I am living in my own home.

   ☐ I am renting.

   Note: **Homeowners** will receive a direct discount on their monthly sewer bill.
   Renters must furnish a written statement from their landlord that the rent payment includes the tenant sewer service charge and that rent payments are current. Renter discounts will be refunded to the landlord every four months.

False Application

Any person who falsely states any fact to acquire the benefits of the Senior Discount Program with knowledge that he/she does not qualify is guilty of a misdemeanor and shall be punished by a fine not to exceed one thousand dollars ($1,000) or by imprisonment for a period not to exceed one year or by both such fine and imprisonment.

Declaration

I hereby declare the foregoing to be a correct statement of my household and income status. I understand the penalties for falsely applying for, or accepting the benefits of the Senior Discount Program. I am willing to provide financial records verifying household income and age, if requested to do so.

_____   _____
Signature of Applicant   Date

--- **For Office Use Only** ---

_____ ☐ Yes ☐ No _____
Approved by   Date

(rev.1/11)