

3626 - 156<sup>th</sup> Street SW ● Lynnwood, WA 98087-5021 ● 425-743-4605 ● <u>www.awwd.com</u>

## LOW INCOME SENIOR DISCOUNT APPLICATION

Name:	
Address:	
I,certify that: (pleas	e initial applicable items)
I am sixty-two (62) years or older.	
I am the Owner of the property where the discreside at the residence.	ounted rate is being requested and I
>>> OR<<<	
I rent and reside in the residence where the di residence has a separate water meter.	scounted rate is being requested and the
I am providing a copy of the current lease agre	eement.
I have a total annual household adjusted groshousehold, not exceeding \$42,357.00 per year. This in Security or other retirement income, SSI or disability public, Child or Spousal support, other income.	ncludes but is not limited to: Social
My adjusted gross income is \$	
I have included a copy of my Federal Income	tax return.
I am not required to file Federal Income tax, in bank statements for all accounts. Statements must she Federal income tax return or last two (2) bank state	ow your name and all deposits. Only a
<u>income.</u>	
I have included proof of income for ALL reside	ents at this property

FULL NAME	DATE OF BIRTH	RELATIONSHIP TO APPLICANT	MONTHLY INCOME	
			ALL INCOME	
OCCUPANTS UNDE	R 18 YEARS OF AGE			
FULL NAME	DATE OF BIRTH	RELATIONSHIP TO	MONTHLY UNEARNED	
		APPLICANT	INCOME- SSI, Tribal, VA et	
	MONTHLY	<b>EXPENSES</b>		
Mortagae/Rent \$				
Mortgage/iterit ψ				
	iving housing assistance?		NO	
Currently rece	iving property tax exemption	onYES	NO	
Utilities:				
EL (' 10				
Electric and Gas \$				
Water and Sewer\$				
Carbaga (t				
Garbage \$				
Food \$				
Transportation \$				
Transportation \$				
	nder penalty of perjury that rood Water of any significa			
agree to notily Alderw	Toou Water of any Significa	int changes in income t	л оссиранть.	
NAME		DATE	DATE	
SIGNATURE		AGE		
SIGNATORE				
PHONE #		ACCT #		

## Information and Instructions:

**Enrollment:** The application must be signed by the person who qualifies for the discount. Once you are enrolled in the Senior discount program, you will be required to renew every year. Alderwood Water and Wastewater District will send you out a renewal by April 1<sup>st</sup> each year. The discount expires every April 30<sup>th</sup>.

**Start of Discount**: The discount will commence on the next subsequent billing date after the application has been received and approved by the Alderwood Water & Wastewater District.

**Residency**: The applicant must own or rent and reside in the residence where the discounted rate is being requested. If you are renting the residence, you must include a copy of your rental agreement. The residence must have a separate water meter, which is billed by Alderwood Water and Wastewater District.

**Tenants:** Tenants will be required to provide a copy of their current rental agreement.

**Income:** The applicant's gross adjusted income, including all residents in the home does not exceed \$42,357.00 per year. <u>All adults living in the home must provide proof of income</u>, Proof of income is a Federal tax filing. If you are not required to file federal tax, you will need to provide the last two months of bank statements for all bank accounts you have. **Only a Federal income tax return or last two (2) bank statements, will be accepted as proof of income.** Children 18 and under receiving any unearned income, e.g. SSI,Tribal,VA, etc will need to provide documentation for income.

**Water usage:** Water usage will need to be 100 CCF or less per the last calendar year to qualify. Alderwood Water & Wastewater District staff will calculate your water usage.

Mail completed application and all documentation to: Alderwood Water and Wastewater District 3626 156<sup>th</sup> St SW Lynnwood WA 98087

Email: Help@awwd.com

Questions: 425-787-0220

Before submitting your application, verify your application is completed and all documentation is included. Incomplete forms will be returned to you delaying your discount.