

CITY OF WESTPORT
APPLICATION FOR SEWER DISCOUNT RATE FOR
SENIOR OR DISABLED CITIZENS

Applicant's Name _____ Birthdate _____
Social Security # _____

Spouse/Co-tenant Name _____ Birthdate _____
Social Security # _____

Physical Address _____

Mailing Address _____

Date moved in (if less than 1 year) _____

Phone # _____ No. of Persons in Household _____

Combined Annual Income from previous year of all persons living at this address:

Wages, Salary, etc.	\$ _____
Social Security	\$ _____
Interest/Dividends	\$ _____
Rents/Royalties, Etc.	\$ _____
All other Income	\$ _____

Total Annual Income \$ _____

Utility Account # _____ Circle One: Multi-family unit or Single Family dwelling

I swear under the penalties of either civil or criminal perjury that all of the above statements and information are true. I consent and agree that the City of Westport may verify and confirm the above if deemed necessary. I have read and understand the Income Eligibility Discount Program Requirements. The Social Security Administration and the Internal Revenue Service are authorized to release my income information from their files.

Applicant Signature _____ Date: _____

- Senior applications MUST be accompanied by proof of age and income or application will be returned.
- Disabled applicants (under age 61) MUST be accompanied by proof of disability and income or application will be returned.

If you are a Single Family Dwelling Renter, Property Owner must complete and sign the statement below.

Owner Statement. I understand that as the owner of this property, I am responsible for the water/sewer/garbage bill and that this sewer discount is designed to assist the renter, not the owner. I certify that the tenant named above resides at this address and has my permission to have the utility account transferred to their name. I will also notify the City if this tenant moves out of the house at the above address. Failure to do so will result in a penalty as prescribed in WMC _____.

Name(print) _____ Telephone # _____

Signature _____ Date: _____

SEE REVERSE FOR OTHER REQUIREMENTS

Claim Procedures

1. Directly billed customer: Claims for low-income senior citizens/disabled discounts shall be reflected on the utility bill following application and eligibility.
2. Indirectly billed customers: Claims eligible for the low-income senior citizens/disabled discount shall be filed between January 2 and February 29 of the year following the period for which the discount is applied.

Eligibility

- a. Must be occupied by the person claiming eligibility as her/her principal place of residence;
- b. Claimant must have resided in the house for at least 6 months prior to filing the discount;
- c. Claimant must be head of the household;
- d. Utility account must be kept current; and
- e. No person may claim a discount for more than one dwelling unit during the same period.

The claimant must qualify in one of the following two categories throughout the period for which the discount is claimed:

1. Low-income senior citizen:

- a. At least 61 years of age; and
- b. Total household income of twenty-five thousand dollars or less.

OR

2. Low-income disabled: Household income is at or below one hundred twenty-five percent of the federally established poverty level* **and** claimant:

- a. Qualifies for special parking as defined by RCW 46.16.381; **or**
- b. Is blind as defined by RCW 74.18.020; **or**
- c. Is disabled, handicapped or incapacitated as defined by any other existing state or federal program.

***2013 Federal Poverty Level (125%) HHS Guidelines):**

Household size: One (1): \$14,362	Five (5): \$34,462
Two (2): \$19,387	Six (6): \$39,487
Three(3): \$24,412	Seven(7): \$44,512
Four(4): \$29,437	Eight (8): \$49,537
	(\$5,025 for each addl person)

Income

Defined by RCW 84.36.383(5)

Adjusted gross income as defined in the federal internal revenue code, as amended prior to January 1, 1989, plus all of the following items to the extent they are not included in or have been deducted from adjusted gross income:

1. Capital gains;
2. Amounts deducted for loss;
3. Amounts deducted for depreciation;
4. Pension and annuity receipts;
5. Military pay and benefits other than attendant-care and medical-aid payments;
6. Veterans benefits other than attendant-care and medical-aid payments;
7. Federal social security act and railroad retirement benefits;
8. Dividend receipts; and
9. Interest received on state and municipal bonds