City of Bothell

Utility Billing
18415 – 101st Avenue NE
Bothell, WA 98011
(425) 806-6881

2020 Low-Income Senior Citizen Discount Application

The City of Bothell Water & Sewer District provides qualifying low-income senior residents with a twenty-five percent (25%) discount off of its water and sewer utility services. To apply for this program, complete the "Proof of Income" section below, print your name, sign your name, fill in the date and address where you reside. Proof of Age & Residency and **all** Proof of Income documentation must be attached**.**

DISCOUNT PERIOD: July 1, 2020 – June 30, 2021

PROOF OF AGE & RESIDENCY

(Applicant must be 62 years or older, reside in home & supply one of the following:)

Copy of Washington State Driver's License **or**
Copy of Washington State Identification card

PROOF OF INCOME

(All 4 sections below must be completed and all income documentation must be included with application)

I. Please check one:

- ☐ Yes, I File an IRS Tax Return (**include a copy of your most recent Tax Return**)
  (Tax Return **must** include copies of **all** Schedules used in preparation of your tax return)
- ☐ No, I Do Not File an IRS Tax Return

II. Please check one:

- ☐ Yes, there are other adult occupants in home
- ☐ No, there are no other adult occupants in home

III. Please check all boxes below that apply to you and all other adult occupants of the home (**include a copy of the agency issued Form 1099 for each applicable income source below**):

	Applicant	Spouse	Addt'l Adult	Addt'l Adult
Employment / Unemployment	☐	☐	☐	☐
Social Security	☐	☐	☐	☐
Pension, Annuity, IRA	☐	☐	☐	☐
Dividends, Interest	☐	☐	☐	☐
Rental Income	☐	☐	☐	☐
DSHS (cash assistance)	☐	☐	☐	☐
Other Income (401K, Other:_____)	☐	☐	☐	☐

IV. **Please circle total number of persons in household (combined household income limit shown)**

Household Size	Max. Income	Household Size	Max. Income
One	41,800	Five	64,500
Two	47,800	Six	69,300
Three	53,750	Seven	74,050
Four	59,700	Eight	78,850

I, _____(**print name**) certify under penalty of perjury that all statements on this form are true and that I have furnished complete and accurate copies of all applicable documentation as indicated above and as required by the discount program.

_____ _____ _____
Signature **Date** **Address**

Both Waste Management & Recology offer a ten percent (10%) low-income senior discount. A copy of this application will be provided to your garbage company for its discount program.