

CHARTER TOWNSHIP OF PORT HURON Application for Senior Citizen Water Rate

Date: _____ Tax I.D. #: _____

Name: _____ Age: _____

Address: _____

Spouse's Name: _____ Age: _____

ANSWER ALL OF THE FOLLOWING QUESTIONS

1. Do you own, occupy and reside at the above address? _____

2. Does anyone, except your spouse, live with you?
If so, who? _____
Do they pay rent? _____

3. Do you owe any delinquent water and sewer bills? _____

4. Itemize your household income (and attach a copy of last year's MI-1040 or MI-1040-CR).

a. Wages, Salaries, Tips, etc. \$ _____

b. Net business, farm, rental income \$ _____

c. Income from annuities, estates, trusts \$ _____

d. Dividends, Interest (including interest from U.S. Securities, state & municipal bonds). \$ _____

e. Social Security, Veteran's Pension, Railroad Retirement \$ _____

f. All Other Pensions \$ _____

g. Total cash public assistance \$ _____

h. All other income \$ _____

TOTAL HOUSEHOLD INCOME \$ _____

I, _____, do hereby certify that the above Information is true and correct. I further state that I will report any material changes to the above information directly to the Township of Port Huron.

Telephone # _____ Signature: _____

TOTAL HOUSEHOLD INCOME LIMIT \$20,000