APPLICATION FOR SENIOR CITIZEN WATER SERVICES DISCOUNT

Enrollment

For the discount program, customers may apply at the time of initial service or at any time the customer meets the qualifications described below.

Discount

Eligible customers will receive a ten dollar ($10.00) discount on their bi-monthly water base minimum service charge.

Eligibility for Discount

1) Applicant must be a resident of the City of Lomita and must be the sole user of the residence. Any co-habitants of the residence must be legal dependents of the sole user.
2) Applicant must be sixty-two (62) years of age or older.
3) Applicant must have an annual total household income which falls within the guidelines below:

Income is defined as the combined gross income, taxable or non-taxable, of **all** persons who live in the household. Income includes, but is not limited, to income derived from: salaries or wages, child support, alimony or spousal support, interest, rental income, dividends, Aid to Families with Dependent Children, Social Security income, veteran benefits, disability, unemployment, retirement, cash, tips, public assistance, S.N.A.P., and all employment related non-cash income.

All such income may not exceed the following guidelines:

Members in Household	Maximum Annual Gross Income
1-2 Persons	$28,600
3	$33,600
4	$40,500
5	$47,400
For each additional person add…	$6,900 Per person

Proof of Age

For seniors, any of the following documents will be accepted as proof of age:

1) CA Driver's License or California Identification Card
2) Birth Certificate
3) MediCare Card
4) Social Security Administration Document

Proof of Income

Any of the following documents will be accepted as proof of income:

1) Previous year State or Federal Income Tax Return
2) Previous year Social Security Benefit Statement
3) Copy of previous year Social Security check or SSI check
4) Previous year SSI Disability Award Letter
5) Previous year proof of eligibility for a State or Federal low income mandated program

Continued Eligibility

The City of Lomita may require a customer to requalify at any time. Additionally, any changes in household income must be reported to the Water Utility Billing Department in a timely manner. Any discount received while ineligible must be repaid to the City.

Last Name: _____ First Name: _____ M.I. _____

Service Address: _____ ❑ Own ❑ Rent

Phone: _____

Date of Birth: _____ Total Household Income: _____

Social Security No: _____ Number of persons in household _____

Copies of proof of age and proof of income must accompany this application. Do not send or bring original documents. The copies must remain with this application. Keep a copy of this application for your records.

I certify that the information, listed above, is true and accurate to the best of my knowledge. I agree to immediately report any change in eligibility. I agree to repay any cost exemptions received should I receive them while ineligible.

Signature: _____ Date: _____

~ Office Use Only ~

Water Account Number: _____ ❑ Approved ❑ Denied

Date Submitted: _____ Exemption Start Date: _____

Received By: _____ Date: _____

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