

Utility Billing Department  
401 S Balsam St.  
P.O. BOX 1579  
Moses Lake, WA. 98837  
(509)764-3719  
(509)764-3738 Fax  
[www.cityofml.com](http://www.cityofml.com)



# Low Income Senior Discount Application

Applicant Name: \_\_\_\_\_ Utility Account#: \_\_\_\_\_

Spouse: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_

**In order to qualify for reduced refuse rates, I hereby certify to the following:**

1. I own or rent my place of residence and the utility account is in my name.
2. My age at the time of submitting this application is sixty-five (65) years or older. (Age of spouse if applicant is not 65 or older. \_\_\_\_\_ )
3. Number of persons in your household (including yourself) \_\_\_\_\_.
4. The maximum annual household income of all household members does not exceed 125% of federal poverty guidelines. (see table on reverse side.)
5. That I will notify the city in writing if there are any changes in my household status as it relates to the requirements as set forth above.
6. I understand that the application for senior discount must be completed annually with the Utility Department to receive the Senior Discount.

**I have attached to this application a copy of my photo ID and documents which verify my household income for 2021.**

Applicant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Full Name of Witness (please print): \_\_\_\_\_

Witness' Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Application Received: \_\_\_\_\_ Approved \_\_\_\_\_ Denied \_\_\_\_\_

Account Updated by: \_\_\_\_\_ Date: \_\_\_\_\_

# 2022 Federal Poverty Guidelines

Number in Household	125% of Poverty
1	\$16,988
2	\$22,888
3	\$28,788
4	\$34,688
5	\$40,588
6	\$46,488
7	\$52,388
8	\$58,288
For each Additional Person, Add:	\$5,900