



# Woodinville Water District

17238 NE Woodinville-Duvall Road  
PO Box 1390  
Woodinville, WA 98072-1390  
(425) 487-4100  
FAX (425) 487-4188

<input type="checkbox"/> New Application
<input type="checkbox"/> Renewal Application

## Application for Low Income Rate (Effective July 1, 2010 – June 30, 2011)

**The Undersigned applicant certifies under penalty of perjury that:**

- a. Applicant resides in the residence where the discounted rate(s) is being requested;
- b. Applicant's residence has a separate water meter;
- c. Applicant's combined household gross income from all sources, excluding children under eighteen, for the previous year did not and for this year (estimated) will not, exceed the dollar amount listed below based on the size of the household:

Household Size	Maximum Combined Household Income	Household Size	Maximum Combined Household Income
<input type="checkbox"/> One Person Home	\$30,000	<input type="checkbox"/> Five Person Home	\$46,250
<input type="checkbox"/> Two Person Home	\$34,250	<input type="checkbox"/> Six Person Home	\$49,650
<input type="checkbox"/> Three Person Home	\$38,550	<input type="checkbox"/> Seven Person Home	\$53,100
<input type="checkbox"/> Four Person Home	\$42,800	<input type="checkbox"/> Eight or More Person Home	\$56,500

- d. Applicant is the named customer on the District's billing statement and is the person who qualifies for the discount.

Signature \_\_\_\_\_ Date \_\_\_\_\_

Printed Name \_\_\_\_\_ Customer No. \_\_\_\_\_

Address \_\_\_\_\_

Phone No. \_\_\_\_\_ Email: \_\_\_\_\_

### Information and Instructions

**PLEASE INCLUDE COPIES OF THE FOLLOWING WITH YOUR APPLICATION FORM:**

1. IRS Form 1040 with all attachments and schedules for the previous year.
2. All W-2 Forms for the previous year.

**Renewal:** Application for renewal of the Low Income Rate must be made annually during the month of June each year. Failure to renew will result in reinstatement of regular rates.

**Discounts:** The Low Income Rate will commence on the next billing date after the application is approved.

**Signature of Applicant:** The person who qualifies for the discount must sign the application.

**If you have any questions or are having difficulty completing this form, please call Sally Starbuck, Woodinville Water District Finance Manager at (425) 487-4106.**