

# Application for Reduced Water and Sewer Connection Fee(s)

## Complete one (1) per unit

Applicant Name: \_\_\_\_\_  
Applicant Address: \_\_\_\_\_  
Applicant Phone: \_\_\_\_\_  
Applicant Email: \_\_\_\_\_

Property Owner Name: \_\_\_\_\_  
Property Owner Address: \_\_\_\_\_  
Property Owner Phone: \_\_\_\_\_  
Property Owner Email: \_\_\_\_\_

Property Location: \_\_\_\_\_

Describe Project (type of unit(s)): \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## If owner occupied:

	<b>Names of Dependents</b>	<b>Social Security Number</b>
Spouse	_____	_____
Children	_____	_____
Children	_____	_____
Children	_____	_____
Children	_____	_____

Owner Social Security #: \_\_\_\_\_

## Annual Income:\*

Owner: \_\_\_\_\_  
Spouse: \_\_\_\_\_  
Children: \_\_\_\_\_  
Children: \_\_\_\_\_  
Total: \_\_\_\_\_  
Value of House/or Purchase Price: \_\_\_\_\_

*\*Submit prior year tax return and most recent check stub for all in household.*

## Non-Owner Occupied Properties:

Unit Sale Price: \_\_\_\_\_  
Unit Rent: \_\_\_\_\_

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Name of Purchaser/Tenant \_\_\_\_\_

## Names of all Dependents (Annual Income):

Tenant: \_\_\_\_\_  
Spouse: \_\_\_\_\_  
Children: \_\_\_\_\_  
Children: \_\_\_\_\_  
Total: \_\_\_\_\_

**For owner Occupants:** I certify that the Occupant has income less than 80% of AMI. I further certify that if I sell the property within 5 years of the date of the connection that I will pay the difference between the returned fee and the standard fee. I also agree to allow the City access to all records necessary to verify this information.

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

**For Non-Owner Occupied Properties:** I certify that this property will be leased to tenants with a household income less than 80% of AMI and that I will maintain the affordability for 5 years from the date of connection. I also agree to allow the City access to all records necessary to verify this information.

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

### STAFF ONLY

Approved

Denied

Reason: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

Return to UBO