



**Ronald Wastewater District**  
17500 Midvale Ave N  
Shoreline, Washington 98133-4905  
(206) 546-2494 • Fax (206) 801-2787  
www.ronaldwastewater.org

**COMMISSIONERS**  
Robert L. Ransom  
Gretchen A. Atkinson  
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George R. Webster  
Wesley J. Brandon

**2017 Application for  
Low Income Senior Citizen Discount or  
Low Income Disabled Citizen Discount**

Please read the entire form before completing. Call the District if you have questions.

Name \_\_\_\_\_ Co-Applicant's Name \_\_\_\_\_  
Street Address \_\_\_\_\_ Phone # \_\_\_\_\_  
Applicant's Birth date \_\_\_\_\_ Co-Applicant's Birth date \_\_\_\_\_  
Age at time of completing this application \_\_\_\_\_ Co-Applicant's Age \_\_\_\_\_

**Requirements for Low Income Senior Citizen Discount or Low Income Disabled Citizen Discount for Year 2017:**

**Senior Citizen Discount ONLY:**

- You or your spouse/co-applicant must be at least 62 years of age.
- A copy of your Washington State Driver's License or Birth Certificate(s).
- A copy of your property tax statement or assessment card. Must own and reside at the property for at least one (1) year prior to date of application.
- A copy of your 2016 1040 form or 2016 SSA-1099 form or SSA-4926 form.

**Disability Discount ONLY:**

- A copy of your Social Security Administration Disability Verification Letter.
- A copy of your Washington State Driver's License or Birth Certificate(s).
- A copy of your property tax statement or assessment card. Must own and reside at the property for at least one (1) year prior to date of application.
- A copy of your 2016 1040 form or 2016 SSA-1099 form or SSA-4926 form.

**Please note: financial eligibility requirements are:**  
One person Gross Income must be less than \$40,320.00 per year  
Two Person Gross Income must be less than \$46,080.00 per year

**Please notify Ronald Wastewater District immediately of any changes in your eligibility.**

I hereby apply for the Ronald Wastewater District Low Income Senior Citizen or Disability Discount as provided in RCW 74.38.070 and District Resolution 16-13, and by signing below do certify under penalty of perjury that to the best of my knowledge all on this form are true.

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

Co-Applicant's Signature \_\_\_\_\_ Date \_\_\_\_\_

**DISTRICT USE ONLY**

Approval Date: \_\_\_\_\_ Effective Date: \_\_\_\_\_ By: \_\_\_\_\_

Application Denied Date: \_\_\_\_\_ Reason: \_\_\_\_\_

**RONALD WASTEWATER DISTRICT  
2017 LOW INCOME SENIOR CITIZEN DISCOUNT OR  
LOW INCOME DISABLED CITIZEN DISCOUNT  
INCOME FILING FORM**

Please use this form when your only taxable income was one or more of the sources listed below, and you DO NOT file a 1040 form. Enter the amount of 2016 income for each item listed below, IF APPLICABLE.

- |  |          |          |
|--|----------|----------|
| 1. Gross Social Security Income  | \$ _____ | per year |
| 2. Gross Income (Wages/Salaries)   | \$ _____ | per year |
| 3. Gross Dividend Income   | \$ _____ | per year |
| 4. Gross Rental Income   | \$ _____ | per year |
| 5. Gross Taxable Refund (federal income tax)                                   | \$ _____ | per year |
| 6. Gross Taxable Interest Income   | \$ _____ | per year |
| 7. Gross Taxable Retirement Income<br>(Pensions, Annuities, IRA Distributions) | \$ _____ | per year |
| 8. TOTAL GROSS INCOME (Add lines 1-7)  | \$ _____ | per year |

If line 8 is less than the Total Gross Income listed below, you should qualify for a discount with the Ronald Wastewater District.

Single Applicant

**\$40,320.00 per year**

Household of two (2) or more

**\$46,080.00 per year**

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Print Co-Applicant's Name

\_\_\_\_\_  
Co-Applicant's Signature

# of People in Household \_\_\_\_\_

**Ronald Wastewater District's**  
**List of Acceptable Documentation**  
**For the Senior Citizen & Disabled Discount**

- **PROOF OF BIRTH DATE** (One of the following)
  - > Driver's License
  - > Birth Certificate
  - > Passport
  - > Any official document with your birth date on it
  
- **PROOF OF PROPERTY OWNERSHIP** (One of the following)
  - > Property Tax Statement
  - > Property Assessment Card
  - > If the mortgage company pays your property taxes, then use a copy of the receipt the Mortgage Company provides.
  - > Must own and reside at the property for at least one (1) year prior to date of application.
  
- **DISABLED APPLICANTS ONLY – SOCIAL SECURITY DEPARTMENTS**  
**DISABILITY VERIFICATION LETTER**
  
- **COPY OF 1040 TAX RETURN -- OR --**
  
- **COMPLETED SENIOR/DISABLED INCOME FILING FORM (Page 2)**
  - > Complete ONLY if you do not file a 1040 tax return
  - > Report income from all sources (example: Social Security, interest, pension, retirement, Rental income, wages, etc.)
  - > Must be signed by applicant and spouse/co-applicant (if applicable)
  
- **SENIOR CITIZENS ONLY – COPY OF SSA-1099 OR SSA-4926**
  - > You should receive these each year from Social Security
  - > We will need one for you and your spouse/co-applicant (if applicable)
  - > If you did not receive, please call Seattle Social Security office at 1-800-772-1213
  - > To obtain a copy, either call or go to the Social Security office:  
13510 Aurora Ave N Suite B  
Seattle, WA 98133

**We only need copies of the verifications – PLEASE DO NOT SEND ORIGINALS!!**

There is a copy machine in our office and we are happy to make all necessary copies for you.