

CITY OF NORTON SHORES  
4814 HENRY STREET  
NORTON SHORES, MI 49441

APPLICATION FOR LOW INCOME SENIOR CITIZEN WATER RATE DISCOUNT  
UNDER THE PROVISIONS OF ORDINANCE #194

Name: \_\_\_\_\_  
Last First Middle

Address: \_\_\_\_\_  
Number Street Name

Birth Date: \_\_\_\_\_ Phone #: \_\_\_\_\_  
Month/Date/Year

Social Security Number: \_\_\_\_\_  
XXX-XX-

Parcel Number: \_\_\_\_\_

Utility Account Number: \_\_\_\_\_

Total Household Income Line 33(as defined by Michigan Income Tax Act of 1967 as amended)

\$ \_\_\_\_\_

The facts set forth above in my application for a water rate discount are true and complete. I understand that if granted the discount, false statements shall constitute nullification of the discount. All benefits obtained shall be returned to the City if an application is nullified.

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

Processed by: \_\_\_\_\_

Reviewed by: \_\_\_\_\_  
Finance Director

Approved by: \_\_\_\_\_  
Public Works Director