

## **Senior Citizen Discount Program Application**

Applicant(s) must renew application each year

## **Eligibility Requirements:**

- Applicant(s) must be 65 years of age or older.
- Gross household income of \$35,000 or less per year.
- Must be incurring MSD single-family residential wastewater charges.

Date:						
MSD A	ccount Number:					
Name	of Applicant:					
Name	of Co-Applicant (if	applicable):				
Service	e Address:					
City:				State:	Zip:	
1. 2. 3.	of the household Proof of age Proof of all incon (paycheck stub,	Security Number or (driver's license or some received during the social security benefits employment benefit	state-issued ID may he previous month b fit statement, SSI be	be accepted to	of the household	
service is \$35,	e address listed ab 000 or less per ye	ove. I certify that I ai ar and that I have pr	m 65 years of age o	r older, that my g documents relation	rastewater service for the gross household income ng to my income and	
Execut	ed this day	of		20		
Signati	ure of Applicant:					

Please mail application and supporting documents to the following address:

MSD Attn: Revenue Dept. Senior Citizen Discount Program 700 West Liberty Street Louisville KY 40203

Application and supporting documents may be scanned and emailed to revenuegroup@louisvillemsd.org.