



**COMMISSIONERS:**

G. Brian Egan  
Terry Barnes  
Nick Warner

Vince Johnston, Manager

# East Wenatchee Water District

(509) 884-3569 • Fax (509) 886-0550 • 692 Eastmont Avenue • East Wenatchee, WA 98802

## SENIOR CITIZEN AND DISABLED/LOW INCOME PERSONS ADJUSTMENT OF WATER SERVICE CHARGES

1. \_\_\_\_\_  
Claimant's Name

\_\_\_\_\_  
Mailing Address

\_\_\_\_\_  
City State  
Zip Code

2. **Description of Property**

Single Family Dwelling       Mobile Home

**Customer must own the property. Property must be the primary residence of the Customer.**

\_\_\_\_\_  
Service Location

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

3. **Please check one the three boxes**

- I will be 61 years of age or older on or before December 31 of the year in which this adjustment is filed.
- I am physically disabled and as such, retired from regular gainful employment by reason of such disability.
- I am a surviving spouse of a person who was approved for this exemption and I am at least 57 years old.

For Office Use Only	
Account #	_____
<input type="checkbox"/>	Adjust 14.00
<input type="checkbox"/>	Adjust 21.00
<input type="checkbox"/>	Adjust 27.00
Auditor's Tax Status	_____
Approved	_____
Date	_____

4. Any adjustment granted through erroneous information shall be subject to penalty. I swear under the penalties of perjury that all of the foregoing statements are true.

\_\_\_\_\_  
Signature of Claimant

\_\_\_\_\_  
Phone Number

*This claim is subject to audit by the Department of Revenue*

**\*\*\*Accounts must be current and remain in good standing to receive this Senior Discount\*\*\***