

# Senior Water & Sewer Rate Program

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The Senior Water/Sewer Rate Exemption program is designed for those residents who are in the most need for assistance. It is not intended for part time residents who may also reside in another community during part of the year. The program is based on your age, household income and taxable assessed value of your property. Household income must include all residents residing within the household.

## **Qualifications**

1. Age 65 or older.
2. Assessed property value must be less than \$300,000 with a property code 210.
3. Property must be owned by and be the primary residence of the applicant.
4. Property must be the only residence maintained by the applicant.
5. Modified Adjusted Gross Income must be less than the median household income for the county.
6. Usage must be metered and cannot exceed 2000 cu. ft. per quarter.
7. Property may not be held in Trust.
8. Spouses cannot file separate applications for separate properties.

## **Initial Entry Date**

The senior rate will be applied to the quarter after the qualification requirements are met.

## **Documentation**

1. Proof of age 65.
2. Recent property assessment or property tax bill.
3. IRS tax returns & related documents.
4. Documentation of Social Security, Pension, IRA, Retirement, or Other Income.
5. Other documents maybe requested to validate an application for senior rates.

## **Ineligibility**

- 1) Less than a 12 month resident.
- 2) Own more than one property with habitable dwellings.
- 3) Business operated on the property.
- 4) Property leased to others.

Eligibility is valid for one year unless the Village receives notification of a change affecting eligibility (sale, transfer, death of owner, excess water usage, property classification, etc.) If you are ineligible, you will be advised in writing.

**Applications need to be submitted in person to:** Sharron Nugent at the Village Billing Office, 2693 Main Street, 1<sup>st</sup> Floor.

**Lake Placid Village, Inc.  
Senior Water & Sewer Rate  
Application**

NAME: \_\_\_\_\_ TELEPHONE: \_\_\_\_\_ CELL: \_\_\_\_\_

PROPERTY ADDRESS: \_\_\_\_\_

DATE OF BIRTH: \_\_\_\_\_ ASSESSED VALUE OF PRIMARY RESIDENCE \_\_\_\_\_

NUMBER IN HOUSEHOLD: \_\_\_\_\_ (must list all residents in household) Property has tenants?  Yes  No

**Modified Adjusted Gross Household Income Calculation – MUST INCLUDE ALL HOUSEHOLD INCOME**

Form 1040 (Line 22)	\$ _____
Social Security Benefits not reported elsewhere	\$ _____
Rental Income (even if not reported on tax return)	\$ _____
Pensions, Annuities & IRA Distributions	\$ _____
Interest or Dividend Income	\$ _____
Any other household income not declared above	\$ _____

Form 1040 Adjusted Gross Income. Line 37 \$ \_\_\_\_\_

Business Income/Loss Line 12 \$ \_\_\_\_\_

Capital Gain/Loss Line 13 \$ \_\_\_\_\_

Other Gain/Loss Line 14 \$ \_\_\_\_\_

Other Income/Loss Line 21 \$ \_\_\_\_\_

**Total Modified Adjusted Gross Household Income \$ \_\_\_\_\_**

**Must be less than the Household Median Income of: \$ 33,055**

**I have received and understand the qualification requirements for this program. I declare the property is my solely owned residence which I occupy 12 months a year and no income is derived from the property. I acknowledge that metering is required for this program. Furthermore, I agree to provide any additional documentation upon request to verify my eligibility. I understand that my failure to provide the requested information will result in the loss of the exemption. Knowingly filing a false application will result in a permanent suspension from the program. I certify that the information provided herein is true and accurate.**

Signature \_\_\_\_\_

Date \_\_\_\_\_

Village Witness \_\_\_\_\_ (Must be witnessed by Village employee verifying the data)

**Provide: Proof of age. Most recent property tax bill. Current tax return & schedules. Social Security Statement. Documentation of other income, including interest and dividend income and any 1099 income.**