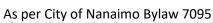
Resident Application SEWER & WATER USER FEE SUBSIDY





		ACCOUNT #:
1.	I/We own & occupy the reside	ence at
	, ,,	(Property address)
	and hereby request applica	ation/renewal for a 50% reduction to the base charges for
	City of Nanaimo water & sew	er services, as per the age and income requirements.
2.	Owner/Applicant's Name: _	
3.	Date of birth (must be 65 years of age or over to qualify):	
	,	DD/MM/YYYY
4.	Owner/Applicant's total income from previous year (from Line 15000 of the Canada Revenue Agency Tax Notice of Assessment):	
5.	Additional owner or spouse's name (if applicable):	
6.	Additional owner or spouse's total income from previous year (from Line 15000 of the Canada Revenue Agency Tax Notice of Assessment):	
7.	Are there any other people liv	ving with you at this address? ☐ Yes ☐ No —
8.	Each additional resident's total Agency Tax Notice of Assessment	al income from previous year (from Line 15000 of the <i>Canada Revenue</i> :):
	and that my eligibility for this subsidy station required as proof of my incom	y may be reviewed at any time and I agree to provide the City of Nanaimo any ne as it relates to this grant.
		ONSCIENTIOUSLY BELIEVING IT TO BE TRUE, AND KNOWING THAT IT IS OF NDER OATH AND BY VIRTUE OF THE 'CANADA EVIDENCE ACT'.
If any adj	ustments are required to your accou	nt, you will see them on your next user rates statement.
-	Print Name	Signature of Registered Owner
-	Phone Number	Date signed

PLEASE NOTE: YOU MUST ATTACH A COPY OF THE MOST RECENT CANADA REVENUE AGENCY TAX NOTICE OF ASSESSMENT FOR **EACH PERSON LISTED ABOVE BEFORE YOUR ACCOUNT WILL BE REVIEWED.**

The personal information on this form is collected under the authority of the Municipalities Enabling and Validating Act and will be used for the purpose of determining eligibility for a user fee subsidy per Bylaw 7095. If you have any questions about the use and collection of this information, contact the Legislative Services Department at 250-755-4405.