

CITY OF GARDINER
APPLICATION FOR SEWER DISCOUNT PROGRAM
(Application Deadline – October 15)

Applicant/Property Owner:
Date of Birth:
Property Address:
Mailing Address:
Telephone Number:
Annual Household Income: Must be below \$49,549 Please provide verification
Sewer Account Number:

******* ALL APPLICANTS*******

You must show proof of age (copy of your birth certificate, driver license or passport), and proof of annual income (Social Security Benefit Statement or most recent tax form). Sensitive information may be redacted prior to submitting information.

This application has been prepared or examined by me. Under the pains and penalties of perjury, I declare that to the best of my knowledge and belief, it and all accompanying documents and statements are true, correct and complete. I understand that applications may be audited at random to verify authenticity of information provided. Failure to provide requested verification documentation will result in immediate removal from the program.

Signature of Applicant: _____ Date: _____

(If signed by an agent, attach a copy of written authorization to sign on behalf of applicant/property owner)

Please bring the completed application and supporting documentation to:
City of Gardiner, 6 Church Street, Gardiner, ME 04345