



**1000 LAUREL ST  
MILTON, WA 98354  
253-922-8733**

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Dear Resident:

Attached is an application for the discount lifeline for utility services, plus a utility discount criteria form. Please read all information carefully and complete the enclosed application forms.

Please attach any documentation necessary to verify proof of income, age and/or disability, (**verification is required for all living in household**). Also, attach a copy of your property tax statement from the Pierce County Assessor-Treasurer, if you receive a storm discount.

Complete and return the forms to City Hall as soon as possible

If you have any questions, please feel free to phone us at **(253) 922-8733**.

Sincerely,

Utility Billing Department  
City of Milton

## DISCOUNT “LIFELINE” RATE FOR UTILITY SERVICES 2016

**The City of Milton offers a lifeline rate for utility services to low-income disabled citizens and to low-income senior citizens (62+). This rate applies to residential customers only. Lifeline discount rate is 30% off the standard utility rate for electric and water. Storm water discount is based on if you receive a discount on storm water from the Pierce County Tax Assessor. The lifeline rate becomes effective on the next billing cycle after you have qualified.**

To be eligible for the lifeline rate, low-income disabled adults and low-income senior residential customers (62 and over) must meet the low-income criteria. For the lifeline rate, “low-income” is defined as 50% below the median family income for Pierce County based upon the most current income data furnished by Pierce County Housing Authority.

Per family	Annual Income
1	\$25,350
2	\$28,950
3	\$32,550
4	\$36,150
5	\$39,050

**To be considered for the lifeline rate, please complete the following application and attach the following;**

- 1. Proof of income.** Verification of *gross income*. This includes any interest income, savings accounts, Social Security, retirement or pension. We must have verification of income from *all persons living in household*.
- 2. Proof of age over 62.** Copy of birth certificate or driver’s license.
- 3. Proof of permanent disability.** Copy of your doctor’s report will suffice.
- 4. Proof of Pierce County tax statement showing relief level for storm water discount.**

**This application must be renewed on an annual basis.  
The median amounts for eligibility will be adjusted annually.**

**CITY OF MILTON**

**APPLICATION FOR DISCOUNT "LIFELINE" RATE  
FOR UTILITY SERVICES**

**THIS DOCUMENT MUST BE NOTARIZED UPON COMPLETION**

**PLEASE PRINT**

**Name:** \_\_\_\_\_ **Account #:** \_\_\_\_\_

**Street Address:** \_\_\_\_\_

**Mailing Address: (if different from above)** \_\_\_\_\_  
\_\_\_\_\_

**City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip:** \_\_\_\_\_

**Contact #:** \_\_\_\_\_

**Number of persons living at residence:** \_\_\_\_\_  
\*\*\***(MUST HAVE VERIFICATION OF INCOME FOR ALL PERSONS LIVING IN HOUSEHOLD)**\*\*\*

**DISABLED**     **NO**         **YES**    *If "Yes" please provide documentation*

**SENIOR (62+)**     **NO**         **YES**    *If "Yes" please provide documentation*

**COPY OF PIERCE COUNTY TAX RECORD FOR STORMWATER  
RELIEF.**     **NO**         **YES**

**Annual Income Statement**

**Please list all income sources**

**TYPE**

**AMOUNT PER YEAR**

**Payroll Income**

\_\_\_\_\_

**Interest Income**

\_\_\_\_\_

**Social Security**

\_\_\_\_\_

**Retirement or Pension**

\_\_\_\_\_

**Annual Income Statement (Cont)**

**Please list all income sources**

**TYPE**

**AMOUNT PER YEAR**

**Public Assistance**

\_\_\_\_\_

**Stock Dividends**

\_\_\_\_\_

**Interest from Investments**

\_\_\_\_\_

**Savings Accounts or Trust Funds**

\_\_\_\_\_

**Real Estate Income**

\_\_\_\_\_

**Other Sources of Income**

\_\_\_\_\_

**Specify: \_\_\_\_\_**

**TOTAL INCOME: \_\_\_\_\_**

**VERIFICATION ON OATH OR AFFIRMATION**

I, \_\_\_\_\_, swear/affirm that I am the person named in the document, and the statements I am making are true and I have been placed under oath by the Notary Public.

**Signature** \_\_\_\_\_

**STATE OF WASHINGTON**

**COUNTY OF** \_\_\_\_\_

**On this day personally appeared before me \_\_\_\_\_, to me known to be the individual(s) who executed the within and foregoing document, and swore that he/she/they signed the document as his/her/their free and voluntary act and deed, for the uses and purposes therein mentioned.**

**Given under my hand and seal of office this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.**

\_\_\_\_\_  
**Notary Public**

**Notary Public residing at** \_\_\_\_\_

**Printed Name:** \_\_\_\_\_

**My Commission Expires:** \_\_\_\_\_