



APPLICATION FOR LOW-INCOME SENIORS WATER/WASTEWATER REBATE

Application must be completed each year and received by our office by **May 1** to apply for the previous year's rebate. Note: to qualify for this rebate, the annual water/wastewater consumption must be 100m³ or less for the prior year. Please submit proof of income with application. Rebate will be applied to your water/wastewater account upon approval.

Part A Property (Property for which the application is being made)

Property
Address:

Income Tax Year:

Water
Account No:

Part B Applicant

Owner: Date of Birth
(YYYY/MM/DD):

Spouse (if
applicable): Date of Birth
(YYYY/MM/DD):

Phone: Email:

Part C Declaration

I declare the following to be true, to the best of my knowledge:

- a) I, or my spouse, is 65 years of age or older; and
- b) I, or my spouse, have been assessed as owner(s) of a residential property in the City of Welland for at least one year preceding the application; and
- c) I, or my spouse, use the property referred to in Part "A" for the purposes of a personal residence; and
- d) I, or my spouse, am in receipt of a monthly Guaranteed Income Supplement pursuant to Part II of the Old Age Security Act (Canada).

☐ I have attached either a copy of my Guaranteed Income Supplement Entitlement letter or a copy of my T4OAS Statement for the prior year. I understand my application will be denied if not attached.

Year / Month / Day

Signature of Applicant

In-Person/

Mail: 60 East Main Street, Welland, ON L3B 3X4 **Attention: Finance Division**

E-Mail: finance@welland.ca

Fax: 905-732-1919

Part D Verification

FOR OFFICE USE ONLY

Ownership Confirmed full Year: ☐ YES ☐ NO Date Letter Mailed: _____

Date Account Adjusted: _____