



## AFFIDAVIT FOR REDUCED UTILITY RATES

Please fill out the form below to apply for reduced utility rates. Bring the completed form to the Water Administration Building at 1111 Shaver Rd. NE, Cedar Rapids, IA 52402. Notaries are available. This form must be notarized before the appropriate changes can be made to your account.

I, \_\_\_\_\_, being duly sworn state that I do meet the income, age and residence guidelines as set out in Section 12.37 of Chapter 12 of the Municipal Code, City of Cedar Rapids, IA for the fiscal year July 1, \_\_\_\_\_ to June 30, \_\_\_\_\_.

My total annual household income sources and amounts are as follows:

Wages and Salaries	\$ _____
Social Security or Railroad Retirement	\$ _____
Pensions and Annuities	\$ _____
Business Income	\$ _____
Other Income	\$ _____
<b>TOTAL</b>	<b>\$ _____</b>

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Address: \_\_\_\_\_

If you are applying under the Disability Provision, Please have the Social Security Office

Sign Here: \_\_\_\_\_

### Notary

Subscribed and sworn to by \_\_\_\_\_

Before me a notary public this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

Notary Public Signature: \_\_\_\_\_

Imprint Seal Here:

For Office Use Only:	<input type="checkbox"/> Over 62
Account # _____	<input type="checkbox"/> Total Disability