

## City of Visalia

707 W Acequia  
PO Box 5078  
Visalia CA 93278



## Finance Division

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Telephone (559) 713-4439  
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Dear Customer:

The City of Visalia has two discount programs for senior citizens. The programs allow seniors, who meet specific requirements, to reduce the amount paid for refuse and sanitary sewer services. The household may participate in either or both programs.

The discounted sanitary sewer program allows households, which meet the below mentioned requirements, to reduce their sanitary sewer rate to **\$13.25** per month (Res. 09-25). The reduced refuse program allows households, which meet the below mentioned requirements, to reduce their refuse rate to **\$12.75** (Res. 09-25) per month.

Requirements for both programs are:

1. The principal resident in the household, whose income pays the bills, is **60** or older. In the case of couples, either person may qualify as the principal resident.
2. The annual household *gross* income is below :  
**\$32,480** ceiling for the program for a 1-2 person household
3. Two or fewer residents occupy the household.

An application for the two programs is enclosed. If you are interested in the discounted sanitary sewer program and/or the reduced refuse program, return the completed application and income verification to:

City of Visalia  
Utility Billing  
PO Box 5078  
Visalia CA 93278

Approximately three weeks after receiving your application, the utility billing office will contact you regarding your use of the program.

If you have questions please call the Utility Billing office at 713-4439.

Utility Billing Office  
City of Visalia

Enclosure: 1

## Application for Discounted Refuse and Sewer Services

## for Senior Citizens

The City of Visalia has approved two discount programs for senior citizens with limited incomes. The sanitary sewer services program reduces sanitary sewer rates to **\$13.25** (Res. 09-25) per month. The refuse services program reduces refuse collection rates to **\$12.75** per month (Res. 09-25).

Before being accepted into the program, your household must meet specific requirements that consider age, income, service level, and number of persons residing in the household.

APPLICATION FOR (please check one): ____ Discounted Refuse only ____ Discounted Sewer Only ____ <b>BOTH</b>	FOR CITY OFFICE USE ONLY  ACCOUNT# : _____
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Service Address : \_\_\_\_\_

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

Name: \_\_\_\_\_ Age: \_\_\_\_\_

Spouse's Name: \_\_\_\_\_ Age: \_\_\_\_\_

Other Household Members :

Name: \_\_\_\_\_ Age: \_\_\_\_\_

Name: \_\_\_\_\_ Age: \_\_\_\_\_

Telephone Number: \_\_\_\_\_

\*Household's Income:

Social Security: \_\_\_\_\_/per month\*

Retirement Income: \_\_\_\_\_/per month\*

Income from Current Employment & Hobbies \_\_\_\_\_/per month\*

Rents and Royalties: \_\_\_\_\_/per month\*

Interest Income & Stock Dividends: \_\_\_\_\_/per month\*

Other Income: \_\_\_\_\_/per month\*

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

***\*Please provide income verification (monthly or annual Social Security payment notification, most recent tax return, W2 or 1099 statements, pay stubs or other verification). Applications received without income verification will not be accepted.***

***\*\* By signing this application, I agree to allow the City of Visalia to share my contact information with Tulare County Weights and Measures for the sole purpose of ensuring that I receive the reduced rates.***

**SIGNATURE:** \_\_\_\_\_ **DATE:** \_\_\_\_\_

**Please note: Rates are subject to change per Resolution 09-25**