

Swancreek Water District

5565 County Road D Delta, OH 43515

Phone: 419-822-3656

Email: Office@swancreekwd.org

Memo

TO:

Senior Residents

DATE:

April 1,2025

RE:

Senior Discount Annual Renewal

The Board of Trustees passed Resolution 2021-21That the Board of Trustees of the Swancreek Water District herby rescinds resolution 2014-37 and replace it to mirror O.R.C. 6119.091 that allows the district to establish eligibility requirements for their Senior Discount Policy that seniors may receive a 10% discount on their water rate so as long as they meet the requirements of the County's homestead exemption guidelines. Please read the criteria below to determine if you are still eligible. If you are, please submit the application WITH proof of your 2024 income by June 1st in the return envelope, email, or bring your paperwork into the office.

Fulton County Homestead exemption qualifications:

- The applicant must be 65 years or older. It doesn't matter what date you turn 65, as long as it is sometime in the year.
- Applicants that have been certified as permanently and totally disabled, as of the first day of the year of application, by an agency that has this authority.
- You must own and occupy your home or mobile home by January 1st of the application year.
- New Homestead applicants are subject to an income means test. Applicants for the 2024 tax year must have a total household adjusted gross income of \$38,600 or less. This amount is derived from line 3 of your 2024 State of Ohio income tax return + any business income from Schedule A line 11 of Ohio IT 1040.
- Applicants turning 65 in 2024 would need to meet the income requirement based on Ohio Modified
 adjusted gross income from their 2024 State of Ohio income tax return (line 3) + any business income
 from Schedule A line 11 of Ohio IT 1040. This amount must be under \$38,600. for household combined
 to qualify.

Please Note:

We need a copy of your 2024 Ohio Income Tax Return <u>OR</u> a copy of your Social Security Benefit Statement (SSA-1099) along with any other qualification criteria necessary.

The rate will be increased to the regular rate if the paperwork is not received by June 1st. If you have any questions, please contact the office at: 419-822-3656

Thank you!

Dawn Hoffman Office Manager

OVER-APPLICATION IS ON THE BACK



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Documentation Required to Qualify for Senior Water Discount Program (SWDP)

You will need to supply: Proof of home owne Proof of Household Tax Forms - SSA-1 Photo ID	income (prev		Tax Return) <u>OR</u> Social Security
Are you the home owner	<u>AND</u> occup	ant? Yes □ No □ (i	f No, you do not qualify)
		PLEASE PRINT	
Applicant's Name	Applid	cant's Date of Birth	SSN
Name of Spouse	Spou	se's Date of Birth	SSN
Current Address (number and	street, including	g route)	Apt. #
City and State		Zip Code	Ohio County
Home Phone Number		Cell Phone Number	Ohio Adjusted Gross Income
	osely descril -Family		you live in. (Check one box only) ⊒Mobile Home
I declare under penalty of pe examined this application, an complete.	rjury that (1) I Id to the best	occupy this property as i of my knowledge and bei	my principal place of residence, (2) I have lief, this application is true, correct and
Signature of Applicant		Signatu	ure of Spouse
Date		E-Mail	Address (if applicable)