



KITSAP PUBLIC UTILITY DISTRICT  
1431 FINN HILL RD  
PO BOX 1989  
POULSBO, WA 98370  
OFFICE 360-779-7656  
FAX 360-779-3284

Enclosed is the reduced basic service charge application packet for Low Income Senior Citizens and Low Income Disabled persons. Eligibility is based on your qualifying information during the assessment year – the prior tax year. You must meet the following criteria:

1. **Disposable Income** – Gross annual income equal to or less than **\$35,000**: and
2. **Age or Disability** – Age 62 or older; or Disabled from substantial gainful activity
3. **Ownership and Residency** – Own and/or physically occupy the residence

Senior/Disabled rates will not apply to rental properties you own. If you own rental properties, the tenants residing on those properties must qualify for the senior/disabled rate. The application and all supporting documents can be submitted at any time during the year.

**Applications must be complete with backup documentation. Any incomplete applications will be returned. Once application has been processed you will be notified by our office. Accepted applications are valid for upto two (2) years and are re-evaluated in May every two (2) years.**

Please return the completed application packet by mail, fax, or in person to our office. No appointment is necessary. Office hours are Monday – Friday 8:00 – 4:30.

**Mailing address: Kitsap PUD  
PO Box 2910  
Poulsbo WA 98370**

If you have any questions, or need assistance, please contact our office at 360-779-7656 or you may send an email to [customerservice@kpud.org](mailto:customerservice@kpud.org).

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## **REDUCED BASIC SERVICE CHARGE FOR LOW INCOME SENIOR CITIZEN AND LOW INCOME DISABLED PERSONS**

**REDUCED RATES:** Low income senior citizens and low income disabled persons who meet the criteria of State Statute will be allowed a reduced Basic Service Charge for residential water service equal to seventy percent (70%) of the normal Basic Service Charge.

**FILING PERIOD:** The claim for exemption must be filed with Public Utility District No. 1 of Kitsap County to initiate the reduction. Renewal letters will be mailed to participants during the month of May every two years.

**AGE AND DISABILITY:** To qualify for the Low Income Senior citizen Discount, a person must be 62 years of age or older at the time of filing. To qualify for the Low Income Disabled Persons Discount the applicant must be retired from regular gainful employment by reason of physical disability. Proof of disability must be furnished.

**OWNERSHIP AND RESIDENCY:** A person must own and/or occupy the qualifying primary residence during the assessment year(s). A person must physically occupy the home more than 6 months a year to continue eligibility status. However, if you are confined to a hospital, nursing home, assisted living or adult care facility, the home may still be considered the primary residence.

**If the home is a rental property the tenant must apply and qualify for the rate.**

**INCOME:** A person must have an annual gross income equal to or less than the qualifying dollar amount under RCW-84.36.381(5)(b)(i). This includes the combined disposable income of the claimant, spouse/domestic partner and any co-tenants. A co-tenant is a person who has ownership interest and resides in the primary residence.

Disposable income means all gross taxable and non-taxable income, including (but not limited to) social security, retirement, disability pension, veterans/military benefits (except service connected disability), interest, dividends, wages, capital gains, rental income, State cash and food assistance, etc. A person cannot deduct depreciation or losses. Non-reimbursed costs for prescription drugs, Medicare premiums (other health insurance, Medicare supplemental, or Medigap are not eligible), in-home care, or nursing home expenses for the claimant or spouse/domestic partner can be deducted from income.

**SIGNING CLAIM:** The claim may be signed by the person entitled to the reduction, by his/her attorney in fact, or a duly authorized agent or guardian, or other person charged with the care of the person or his/her property.

**CHANGE OF STATUS REPORT:** If income or disability status changes, a report must be filed with Public Utility District No. 1 of Kitsap County.

**APPEAL ON DENIAL OF CLAIM:** If the applicant does not meet the qualifications as provided by District guidelines, the claim shall be denied. Denials may be appealed to the Public Utility District Board of Commissioners.

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### **APPLICATION PROCEDURE:**

1. Obtain an application packet from the Kitsap PUD's office any time during the year.
2. Complete application and any other necessary forms. Copies of income documents and proof of age or disability and residency are required with your application.
3. Submit application in person, mail, email or fax.
4. KPUD will process the application and notify you of qualification status.

**QUESTIONS OR APPLICATION REQUESTS:** Please contact our office at 360-779-7656 or email [customerservice@kpud.org](mailto:customerservice@kpud.org) if you have any further questions.

**Office hours: Monday – Friday 8:00 – 4:30, closed Holidays**      **Website: [www.kpud.org](http://www.kpud.org)**  
**Public Utility District No 1 of Kitsap County**      **1431 NW Finn Hill Rd, Poulsbo WA 98370**

**Reduction applies only to the Basic Monthly Service Fee and will take effect for the first billing following KPUD acceptance of this application. This certification is good until the second May following application approval. A new certification must be filed to continue the reduction.**

**Laws and Rules:** RCW 74.38.070, 46.16.381, 74.18.020 (4)

### **Proof of Disability:**

RCW 84.36.383(7) defines “Disability” as “The inability to engage in any substantial gainful activity by reason of any medically determinable physical or mental impairment which can be expected to result in death or which has lasted or can be expected to last for a continuous period of not less than 12 months.”

### **How is disposable income calculated?**

The Legislature gave “disposable income” a specific definition. According to RCW 84.36.383(5), “disposable income” is adjusted gross income, as defined in the federal internal revenue code, plus all of the following that were not included in, or were deducted from, adjusted gross income:

- Capital gains, other than a gain on the sale of a principal residence that is reinvested in a new principal residence;
  - Amounts deducted for losses or depreciation;
  - Pensions and annuities (annuities also include income from unemployment, disability, and welfare);
  - Social Security Act and railroad retirement benefits;
  - Military pay and benefits other than attendant-care, medical-aid payments, veterans' service-connected disability benefits, and dependency and indemnity compensation; and
  - Dividend receipts and interest received on state and municipal bonds
- Income from these sources is included in “disposable income” even when it is not taxable for IRS purposes.**

### **What is combined disposable income?**

RCW 84.36.383(4) defines “combined disposable income” as your disposable income plus the disposable income of your spouse or domestic partner and any co-tenants, minus amounts paid by you or your spouse or domestic partner for:

- Prescription drugs;
- Treatment or care of either person in the home or in a nursing home, boarding home, or adult family home; and
- Health care insurance premiums for Medicare. (At this time, other types of insurance premiums are not an allowable deduction.)

Care or treatment in your home means medical treatment or care received in the home, including physical therapy. You can also deduct costs for necessities such as oxygen, special needs furniture, attendant-care, light house-keeping tasks, meals-on-wheels, life alert, and other services that are part of a necessary or appropriate in-home service.

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**LOW INCOME SENIOR CITIZEN AND LOW INCOME DISABLED CITIZEN  
REDUCED RATE APPLICATION**

CLAIMANT NAME \_\_\_\_\_  
Last First Middle

SPOUSE/CO-TENANT(S) \_\_\_\_\_  
Last First Middle

MAILING ADDRESS \_\_\_\_\_  
Last First Middle

PROPERTY ADDRESS (If different) \_\_\_\_\_

TELEPHONE (\_\_\_\_\_) \_\_\_\_\_

ACCOUNT # \_\_\_\_\_

Type of Residence:

- Single Family Dwelling       Mobile home  
 One Unit of a Multi-Unit       Dwelling

Claimant is Owner      or       Tenant

- I am at least 62 years of age or older as of the date of this application  
(Copy of Driver's License or Washington State Identification)  
 I am retired from regular gainful employment by reason of physical disability  
(Copy of State Disabled Parking Certification or Legal Blindness Certification required.)

**PLEASE COMPLETE INCOME INFORMATION ON REVERSE SIDE**

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**DISPOSABLE INCOME OF CLAIMANT and SPOUSE and/or CO-TENANT(S)**

A. TOTAL ADJUSTED GROSS INCOME FOR CLAIMANT  
Line 37 on IRS 1040 \$ \_\_\_\_\_

B. TOTAL ADJUSTED GROSS INCOME FOR SPOUSE/CO-TENANT  
Line 37 on IRS 1040 (If Applicable) \$ \_\_\_\_\_

C. **TOTAL COMBINED INCOME FOR \_\_\_\_\_(year)** \$ \_\_\_\_\_

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D. EXEMPTIONS:

a. Non-reimbursed Nursing Home Treatment/Care \$ \_\_\_\_\_

b. Other authorized exemptions (please provide documentation) \$ \_\_\_\_\_

c. **TOTAL EXEMPTIONS FOR \_\_\_\_\_(year)** \$ \_\_\_\_\_

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E. **COMBINED DISPOSABLE INCOME FOR \_\_\_\_\_(year)** \$ \_\_\_\_\_  
(C minus D)

**\*Copy of most recent Federal Income Tax return(s) must be attached\***

THIS CLAIM IS SUBJECT TO AUDIT

Any person willfully giving false information on this application shall be subject to the perjury laws of the State of Washington. Any exemption granted through erroneous information shall be subject to the correct fee being assessed, plus a 100 percent penalty. Changes in status must be reported to the Kitsap County Public Utility District when they occur.

\_\_\_\_\_/\_\_\_\_\_  
Signature of Claimant Date