



# M E E K E R

C O L O R A D O EST. 1885

345 Market Street  
Meeker, CO 81641  
970-878-5344  
970-878-4513 Fax

## SENIOR CITIZEN WATER PROGRAM CERTIFICATION

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

DATE OF BIRTH: \_\_\_\_\_ AS EVIDENCED BY: DRIVERS LICENSE  / BIRTH CERT.   
(Verified by Town Employee \_\_\_\_\_)

**Fill out if you file Income Tax – Attach Proof** (Verified by Town Employee \_\_\_\_\_)

### HOUSEHOLD MEMBERS (FULL-TIME RESIDENTS OF THE HOUSE)

\_\_\_\_\_  
NAME DATE OF BIRTH 2020 GROSS INCOME

\_\_\_\_\_  
NAME DATE OF BIRTH 2020 GROSS INCOME

\_\_\_\_\_  
NAME DATE OF BIRTH 2020 GROSS INCOME

I HEREBY CERTIFY THAT THE ABOVE INFORMATION IS TRUE AND CORRECT AND UNDERSTAND THAT SHOULD ANY INFORMATION CONTAINED HEREIN BE INCORRECT I MAY BE PERMANENTLY INELIGIBLE FOR THIS PROGRAM.

\_\_\_\_\_  
SIGNATURE DATE

\*\*\*\*\*

### **Fill this Affidavit out if you only have Social Security**

#### AFFIDAVIT

I, \_\_\_\_\_ RECEIVE \$ \_\_\_\_\_ MONTHLY  ANNUALLY

FROM SOCIAL SECURITY AND HAVE NO OTHER INCOME.

\_\_\_\_\_  
SIGNATURE DATE

\_\_\_\_\_  
TOWN ADMINISTRATOR DATE