



Public Works Services Department

Address: 11800 Goldring Rd., Arcadia, CA 91006, Phone: (626) 254-2700, Email: wb@ArcadiaCA.gov,
Business Hours: Monday -Thursday 7:30 a.m. - 5:00 p.m., Alternate Fridays 7:30 a.m. - 4 p.m.

Drop off or mail completed application along with copies of required documents. Please allow 4-6 weeks to process your application.

WATER SERVICE DISCOUNT APPLICATION

- Applicant must be primary account holder **AND** live on the property.
- The applicant must be a resident of a **single family dwelling unit** within the City of Arcadia.
- Applicant name **MUST** match account holder and appear on the Municipal Utility Bill.
- **Discounts CANNOT be combined.**

APPLICANT INFORMATION

Name:	Account Number:
Address:	Primary Phone Number:
Email Address:	Secondary Phone Number:

AVAILABLE DISCOUNT PROGRAMS AND REQUIREMENTS (CHOOSE ONLY ONE)

Senior - 10% Discount

- Applicants must be 62 years or older
- Copy of a valid government issued ID as proof of residency
- Applies to only Tier 1 and Meter Service Charge

Senior and Low Income - 10% and UUT Exemption

- Applicants must be 62 years or older
- Must **renew** yearly
- Copy of a valid government issued ID as proof of residency
- Household income must be at or below 50% of Los Angeles County median income level
- Everyone in the household must provide copies of:
 - **IRS Tax Return Transcripts** as proof of your current household income: www.irs.gov/individuals/get-transcript, SSI Statement, OR Disability Income Statement

APPLICATIONS WILL NOT BE PROCESSED WITHOUT PROPER PROOF OF INCOME

Please fill in your account number for each utility that you use. Write "NONE" in the space below if you do not use a service or if you're not the account holder.

SoCal Edison Account Number: _____
SoCal Gas Account Number: _____

Veteran - 10% Discount

- Applicant served in branch of the US Armed Forces
- Applicant must provide a copy of the DD Form 214, Certificate of Release or Discharge from Active Duty
- Copy of valid government issued ID as proof of residency
- Applies to only Tier 1 and Meter Service Charge

Low Income - 3 units/month & UUT Exemption

- Copy of a valid government issued ID as proof of residency
- Must **renew** yearly
- Household income must be at or below 50% of Los Angeles County median income level
- Everyone in the household must provide copies of:
 - **IRS Tax Return Transcripts** as proof of your current household income: www.irs.gov/individuals/get-transcript, SSI Statement, OR Disability Income Statement

APPLICATIONS WILL NOT BE PROCESSED WITHOUT PROPER PROOF OF INCOME

Please fill in your account number for each utility that you use. Write "NONE" in the space below if you do not use a service or if you're not the account holder.

SoCal Edison Account Number: _____
SoCal Gas Account Number: _____

INCOME LIMITS FOR LOW INCOME PROGRAMS (2024)

Source: HUD 2024 Income Limits

Name	Age	Annual Income	Number of Persons in Household	Total Annual Income
		\$	1	\$48,550
		\$	2	\$55,450
		\$	3	\$62,400
		\$	4	\$69,350
		\$	5	\$74,900
		\$	6	\$80,450
		\$	7	\$86,000
		\$	8	\$91,550

I declare, under penalty of perjury, that the information I have provided in this application is true and correct. I agree to provide of eligibility. I agree to inform the City of Arcadia if I no longer qualify to receive the discount and I understand that if I receive the discount without qualifying for it, I will be required to reimburse the City for all ineligible amounts.

Signature: _____ Date: _____

OFFICE USE ONLY

<input type="checkbox"/> Approved <input type="checkbox"/> Denied <input type="checkbox"/> Renewal	Reason:
By:	Effective Date: