GLOUCESTER TOWNSHIP

JOIN THE EXCITEMENT

Dear Resident:

Enclosed, please find an application to be completed and returned to The Gloucester Township Sewer Utility Department, P.O. Box 216, Glendora NJ 08029.

The Gloucester Township Sewer Utility Department offers a 25% discount on your Quarterly Sewer Bill to those who are eligible. In order to qualify for the discount you will need to be at least one of the following:

- 65 Years of Age or Older and Meet Certain Income Criteria
- Permanently Disabled and Meet Certain Income Criteria
- 100 Percent Disabled Veteran and Meet Certain Income Criteria

Please carefully read and complete the enclosed application. Make sure you submit supporting documents. The Sewer Utility Department will not return any application for re-submittal.

If you need help in completing your paperwork or you need additional applications, please feel free to contact 856-227-8666.

Sincerely,

The Gloucester Township
Sewer Utility Department

1261 Chews Landing-Clementon Rd., at Hider Lane • P.O. Box 8, Blackwood, New Jersey 08012
(856) 228-4000 • FAX: (856) 374-3527 (Clerk) • FAX: (856) 374-3528 (Finance)
www.glotwp.com

Senior & Disabled Citizens Discount for GT Sewer Utility Department Customers

To qualify for the 25% Discount you and your spouse must be:

A non-delinquent, current GT Sewer Utility Department customer with combined gross income earnings of $10,000 or less, excluding social security, and must have resided at the property in 2023. **Discount is on the primary residence only.**

Check one:

_____Husband and wife must be 65 years of age or older by 12/31/23
(Submit proof of age (copy of Driver's License, or Medicare card, Birth Certificate or PAAD card)

_____Permanently disabled by 12/31/23
(Submit proof of disability onset – copy of award letter, or Medicare card, or PAAD card)

_____100 percent disabled Veteran by 2023
(Submit copy of discharge papers or Veteran's card)

GT Sewer Department Account # | Last Name | First Name (Joint Filers, Enter First Name of Each)

Your Social Security # | Your Birth Date

Home Address | City, Town, Zip | Phone #

Spouse's Social Security # | Spouse's Birth Date

Proof of Income – Please submit the following proof of income for 2023 (COPIES ONLY)
PAAD card or
Form SSA-1099 (Social Security Benefit Statement) AND 2023 Federal Income Tax Return (if filed)

Under Penalty of Perjury, I/we declare that I/we have examined this application. I/we acknowledge that it is true, correct and complete that my/our income did not exceed $10,000. Social Security is not included.

For Official Use Only

_____
_____
_____

Your Signature: _____

Spouse's Signature: _____

Date: _____

Send completed application along with requested documentation to:
The Gloucester Township Sewer Utility Department, P.O. Box 216, Glendora NJ 08029
Questions : Call (856) 227-8666 Fax (856) 227-5668

Make a copy for your records