

APPLICATION MUST BE RETURNED BY **MAY 31, 2018**, TO:
PINE HILL MUA
907 TURNERVILLE ROAD
PINE HILL, NJ 08021

PINE HILL MUNICIPAL UTILITIES AUTHORITY

CLAIM FOR REDUCTION IN ANNUAL SEWER SERVICE CHARGE ON A
RESIDENTIAL DWELLING HOUSE BY A PERSON AGED 65 YEARS OR
OVER, OR PERMANENTLY AND TOTALLY DISABLED

MUNICIPALITY:

COUNTY:

I, _____, hereby make claim for a reduction in the Pine Hill MUA annual sewer service charge pursuant to N.J.S.A. 14B-22.1, with respect to such charges for the fiscal year 20__ on the real property described below, and make the following declaration in support of such claim:

1. Date of Birth _____
(Proof of age is required; see Instruction 3 on attached page)
2. As of August 1, 20 __ (insert the present year) I was:
 - (a) Single _____
Married _____
Surviving Spouse _____
Surviving Civil Union Partner _____
Legally separated or divorced _____
 - (b) A resident of the Borough of Pine Hill for not less than one year immediately prior to the date indicated in #2 above (for definition of "resident", see Instruction 8 on attached page).
 - (c) My address in the Borough of Pine Hill is:
Street Address: _____
Block No.: _____ Lot No.: _____
 - (d) Telephone Number: _____
3. As of the August 1 date indicated above, I was, or my spouse and I, or my civil union partner and I, as tenants by the entirety were, the sole owner (s) of the property described above. (If claimant or claimant and spouse, or claimant and civil union partner, as tenants by the entirety were not the sole owners of the

property, complete Schedule I on the next page. For definition of "tenancy by the entirety", see Instruction 9 on the attached page.)

4. I reasonably anticipate that the income to be received by me (including the income of my spouse or civil union partner) during the next year from August 1, 20__ to July 31, 20__, will not exceed the applicable income limitation, which is \$10,000.00 (Annual Income excludes Social Security). (For explanation of "proof of income" and "applicable income" see Instruction 5 and 6). *Annual Income excludes Social Security.
5. (COMPLETE THIS SECTION IF CLAIM IS ONLY FOR A REDUCTION BASED ON AGE 65 YEARS OR OVER)
As of August 1, 20__, (insert present year) I was age 65 years or over. (See instructions 1 and 3 on attached page).
6. (COMPLETE THIS SECTION ONLY IF CLAIM FOR REDUCTION IS BASED ON A PERMANENTLY AND TOTALLY DISABLED PERSON)
As of August 1, 20__, (insert present year) I was permanently and totally disabled. (See Instruction 7 on attached page, which requires you to attach either a Physician's Certification or copy of Social Security Award Certificate Form SSA-30.

I, hereby certify that the foregoing statements made by me are true to the best of my knowledge and belief and fully understand that such statements will be considered as if made under oath, and as to a false declaration shall be subject to the penalties as provided by law for perjury and cause for denial of a reduction of the annual sewer service charge of the Pine Hill MUA.

SIGNATURE OF CLAIMANT

DATED:

SIGNATURE OF SPOUSE/CIVIL UNION PARTNER

RESERVED FOR OFFICIAL USE

The within claim for a reduction is approved in the sum of \$_____ on the property referenced on this application.

OFFICIAL SIGNATURE

DATED:

PINE HILL MUNICIPAL UTILITIES AUTHORITY

SCHEDULE 1 (Complete the following information if Claimant is not the sole owner of the property on which a reduction is being sought).

The names of all persons who are owners of said property with claimant and the respective interest in the property is set forth as follows:

NAME OF OTHER OWNER	INTEREST IN PROPERTY
NAME OF OTHER OWNER	INTEREST IN PROPERTY

INSTRUCTIONS

Please read these instructions carefully even if you are the sole owner of the property.

1. Filing Date – This application may be filed with the PINE HILL MUA not later than the last working day of **MAY** of each year in order to be considered for a reduction of the annual sewer service charge in the Authority’s next fiscal year.
2. Date for Establishing Deduction Status – Every fact essential to support a claim for a deduction shall exist on August 1 of the year preceding the MUA fiscal year of August 1, with respect to which the deduction is claimed.
3. Proof of Age – A claimant must furnish satisfactory proof of age. Whenever possible, such proof should be attached to this application. The following types of records or documents, whether in original or Photostat copy form, are examples of proof which the Authority may accept: Birth certificate, baptismal record, family Bible, official census records, marriage certificate, court record, social security record, military record, immigration documents, military discharge, insurance policy and any other proof which may help to establish claimant’s age.
4. Proof of Ownership – Claimant should be prepared to furnish, on request of the Authority, proof of ownership of the property for which a deduction is claimed.
5. Proof of Income – ANTICIPATORY INCOME
 - (a) For the purpose of anticipating whether income during the Authority fiscal year will not exceed \$10,000 (**Annual Income excludes Social Security**), claimant shall include in his/her income, all income received, including, but not limited to salaries, wages, interest, dividends, realized capital gains, income from rents, business income, pension annuity and non governmental retirement benefits. Dividends, interest, realized capital gains, annuities, pensions and non-governmental retirement benefits must be included in full without deductions even though they may be wholly or partially exempt for Federal income tax purposes.

- (b) Except for claimant's spouse and/or civil union partner, the income of the claimant shall not be combined with the income of other members of claimant's family for the purpose of determining whether claimant's income during the applicable income period exceeds \$10,000. IT IS IMPORTANT TO NOTE THAT A REDUCTION WILL NOT APPLY TO PROPERTIES WHERE AT LEAST ONE OF THE LEGAL OWNERS IS LESS THAN 65 YEARS OF AGE.
6. Income Period – The “income period” with respect to the Authority Fiscal Year for which a reduction is claimed is the fiscal year beginning August 1.
 7. Proof of Permanent and Total Disability – A claim for a reduction by a person, who is permanently and totally disabled, shall include a physician's certificate verifying the claimant's permanent and total disability, or a copy of the Social Security Award Certificate Form No. SSA-30.
 8. Definition of “Resident” means a person legally domiciled within the Borough of Pine Hill for a period of one year on or before August 1 of the year in which the application is filed. Mere seasonal or temporary residency within the Borough of Pine Hill of whatever duration shall not constitute a resident within the Borough for the purpose of this application. Absence from the Borough of Pine Hill for a period of 12 months shall be evidence of abandonment of residency in the Borough. The burden of establishing legal residency within the Borough shall be upon the claimant. Please note that the application for reduction only applies to residential property ownership.
 9. Tenancy by the Entirety – “Tenancy by the Entirety” means ownership of real property by both a husband and wife, or civil union partners by virtue of title acquired by them jointly.
 10. Reduction Period – The reduction approved is for a one- (1) year time period and will be reflected in the Claimant's annual sewer service bill effective August 1 each year, which is the start of the Authority fiscal year.