

HOME WATER CONSERVATION PROGRAM

The Home Water Conservation Program aims to help low-to-moderate income homeowners reduce water waste, increase efficiency, and save money on their water bills. Project Home does this by evaluating household needs for potential water-saving improvements, including fixing plumbing leaks, or the installation of a high-efficiency toilet and/or other water-saving devices.

Conservation improvements done by Project Home are at minimal to no cost to the homeowner. Participants must be Madison Water Utility customers. Following submittal of your application, Project Home will contact you to conduct a brief orientation.

Your Name: _____ Date: _____
 Address: _____ ZIP: _____
 Phone: _____ Alternate Phone: _____

HOUSEHOLD INCOME

Please **list each member of your household**, the **type of income** each household member receives, and the **total amount earned annually** (before taxes and deductions) for each household member.

Examples of income include: Wages, Self-employment, Unemployment, Child Support, Alimony, Social Security, Social Security Disability, SSI, Pension, Retirement, Veterans benefits, Rental income, Interest income, Dividends, etc.

Name	Income Type	Gross Annual Income (Before Taxes)
		\$
		\$
		\$
		\$
Total Yearly Household Income:		\$

HOUSEHOLD DEMOGRAPHIC INFORMATION

What is the total annual gross income (combined) for all members of your household? \$ _____

How many people are in your household? _____

Head of household gender? Female___ Male___ Non-Binary___

Is anyone in your household 62 years old or older? YES___ NO___

Is anyone in your household 6 years old or younger? YES___ NO___

Does anyone in your household have a permanent disability? YES___ NO___

Is anyone in your household Hispanic? YES___ NO___

Is anyone in your household a veteran? YES___ NO___

Please indicate the race of each person in your household below. For each race, indicate the number of household members belonging to that race:

- ___ American Indian and Alaska Native
- ___ Asian
- ___ Black or African American
- ___ Native Hawaiian and Other Pacific Islander
- ___ White
- ___ Multiracial / Mixed-Race
- ___ Other Race (Not Listed)

I certify that the above information is complete and correct to the best of my knowledge. I understand that providing false information will disqualify me from the Home Water Conservation Program.

Applicant signature _____ Date _____

