

City of Muskegon —Community and Neighborhood Services  
**Water/Sewer Utility Assistance Grant Application**



Applicant Name: \_\_\_\_\_

Address: \_\_\_\_\_

Email: \_\_\_\_\_ Phone: \_\_\_\_\_

Please explain how the COVID-19 pandemic has effected your ability to pay your utility bill:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Are you currently receiving or expecting to receive utility assistance outside of this program?  Yes  No

Please list all members of your household below:

Name	Age	Relationship to Applicant	Income
		Self	

Have you included signed 2020 tax returns for all earning members of the household, including yourself? (Returns signed electronically are not accepted)  Yes  No

(If you checked no, please add documentation before submitting application)

-----

By signing below the applicant certifies that the information provided is true and accurate. The applicant authorizes the City of Muskegon to request any additional information needed for verification. Furthermore, you authorize the City of Muskegon (Community and Neighborhood Services) to make a one-time payment on your behalf for water/sewer service if approved. Failure to give complete and accurate information will disqualify my application for assistance:

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_