

The **3 steps** to applying:

Review Eligibility Criteria.
to: (See Information sheet on
reverse side)

Fill out form and attach
additional information to be
submitted with application.



Mail or drop off
PO Box 70
1800 Main Street
Geraldton, ON POT 1M0
(Original Only – faxed copies are not
acceptable)



I am applying as:

- A Senior 65 years of age or older A Person with a Disability

I am applying for: (Please check the program you are applying for)

- Water Credit Program

Sample Utility Invoice

Water Account Number: _____

Service Address: _____

MUNICIPALITY OF GREENSTONE
P.O. BOX 70 1800 MAIN STREET
GERALDTON ON POT 1M0
Phone / Tél.: (807) 854-1100
Fax: (807) 854-1947

UTILITY INVOICE



Account # / Compte: 000 00000000 000
Service Address / Adresse de service: 123 ANY STREET

Property and Applicant Information:

Property address:	Last name:
Box Number	First name:
Town:	Postal Code:
Telephone Number:	Date of birth: (dd/mm/yyyy)

Please complete the Spousal and Additional Owner Information below if you have a spouse, and/or if the property is also owned by another person. If there is more than one additional owner, please attach a list with the first name, last name, date of birth, and signature of all additional owners and their spouses not listed on this form.

Spousal and additional owner information:

Spouse's last name:	Additional owner's last name:
Spouse's first name:	Additional owner's first name:
Date of birth: (dd/mm/yyyy)	Date of birth: (dd/mm/yyyy)

Additional information required:

Please Check The Appropriate Box:

- Low-Income Person with a Disability (Please attach proof of receipt of assistance paid under the Ontario Disability Support Program Act.)
 Low-Income Senior (receipt of an increment paid under the Guaranteed Income Supplement (GIS)). Please attach.

I occupy residential property in the Municipality of Greenstone and have been assessed as Owner of such property for at least one year immediately preceding the date of this application.

I acknowledge this property is my principal residence.

I agree to notify the Municipality of any changes which would affect my eligibility for the water credit program, such as disposing of the residential property or no longer occupying the residential property as your personal residence.

I certify to the best of my knowledge that the information provided is correct.

I hereby authorize the Municipality of Greenstone to take any means required to verify all information included in this application.

_____ Date Applicant's signature Spouse/additional owner's signature

**WATER AND SEWER RATE RELIEF PROGRAM FOR LOW-INCOME SENIORS
AND LOW-INCOME PERSONS WITH DISABILITIES**

INFORMATION SHEET

Low-income seniors and low-income persons with disabilities who qualify may apply for an annual reduction of 10% of the standard residential water and sewer rates imposed by the Municipality.

Do you qualify? Please review the following eligibility criteria.

Seniors:

A low-income senior must be 65 years of age or older and in receipt of an increment paid under:

- The Guaranteed Income Supplement (GIS) (copy to be provided).

Applications including all supporting documentation must be received by the due date in order to qualify.

Persons with Disability:

A low-income person with a disability must be in receipt of:

- An increment paid under the Ontario Disability Support Program Act on or before the 31st day of December in the year in which the owner makes application for the utility rate reduction.

Applications, including all supporting documentation, must be received by the due date in order to qualify.

How the program works:

- Applications must be received by the 15th day of a month to have the discount start on the 1st of the following month to allow time for processing.
- Applicant's tax and water accounts cannot be in arrears when applying.
- Applicants must be owners of residential property within the Municipality of Greenstone for a period of one (or more) year(s) preceding the application.
- The Property must be your principal residence.
- The Property must be classified in the Residential tax classification.
- Each owner or their spouse must meet the eligibility criteria above in order to qualify for the program.
- If you qualify for a water credit, a credit amount of 10% of the standard residential water and sewer rates will be applied to your water account.

Note: when an owner ceases to be qualified for the utility rate reduction, then such owner shall forthwith pay to the Municipality, an amount equal to that portion of the utility rate reduction to which the owner ceased to be eligible. Yearly applications are required.

How to get an application:


- Pick up at the Municipal Administration Office, 1800 Main Street, Geraldton;
- Any Municipal Ward Office (Beardmore, Longlac, Nakina)
- Download from the Municipality of Greenstone website, www.greenstone.ca

Questions:

Questions about the Water Credit Programs for Low-Income Seniors and Low-Income Persons with Disabilities should be directed to the Municipality of Greenstone, PO Box 70, 1800 Main St, Geraldton, ON P0T 1M0, Telephone (807) 854-1100.

GUARANTEE INCOME SUPPLEMENT EXAMPLES

Example 1: Letter of Approval



Service
Canada

PO BOX / CP 2013
STN / SUCC MAIN
TIMMINS ON P4N 8C8
CANADA

PROTECTED BY (b)(1)

Social Insurance Number

Date July 2022


82

2021 Income	July Payment
\$14846.00	\$957.23

Service Canada has determined that you are entitled to the **Guaranteed Income Supplement** the **Allowance** or the **Allowance for the Survivor** benefit for the period of July 2022 to June 2023

The total amount of your monthly payment is shown above. This amount includes any Old Age Security benefits you may receive.

Example 2: T4A (OAS) Slip – Must have an amount in box 21 to qualify



Canada Revenue
Agency

Agence du revenu
du Canada

Statement of Old Age Security
Relevé de la Sécurité de la vieillesse

T4A(OAS)

Year	18 Taxable pension paid	19 Gross pension paid	20 Overpayment recovered	21 Net supplements paid	22 Income tax deducted	23 Quebec income tax deducted
2022	7,929.75	7,929.75	.	9,539.97	.	.
Année	Versement de pension imposable	Versement brut de pension	Paiement en trop recouvré	Versement net des suppléments	Impôt sur le revenu retenu	Impôt sur le revenu du Québec retenu

Issued by: Service Canada
Émis par: Service Canada

12 Social insurance number

Numéro d'assurance sociale

13 Old Age Security number


Numéro de la Sécurité de la vieillesse

0899447

See the privacy notice on your return
Consultez l'avis de confidentialité dans votre déclaration

T4A(OAS) (22)
SC ISP-0137 nat (2022-10-01)

Attach this copy to your provincial or territorial return
Joignez cette copie à votre déclaration provinciale ou territoriale



E 0899447_2 004894 ESIC-PROD-ISP-01360137T-MARCD-ON-2022-01-08 #P


ONTARIO DISABILITY SUPPORT PROGRAM (ODSP) EXAMPLES

Example 1: Letter of Approval

Ministry of Children, Community and Social Services
 Mailing Address: PO BOX 3399 STN MAIN
 Markham, ON L3R 6J2
 Telephone: 807-473-3130

Toll-free: 1-800-465-5561
 Fax: 807-475-1475
 TTY: 1-800-544-6443

Office Location:
 435 James Street South, Suite 111, Thunder Bay, ON P7E 6S7



April 20, 2023

RE: [REDACTED]

[REDACTED]


Dear [REDACTED]

I am pleased to tell you that we have **approved** your application for income support from the Ontario Disability Support Program (ODSP).

This letter will help you understand:

- how much income support you will receive
- your start date for ODSP
- other ODSP benefits that are available to you
- your reporting responsibilities
- working while on ODSP

Example 2: Cheque Stub



Ministry of Children, Community and Social Services
 Ministère des Services à l'enfance et des Services sociaux et communautaires

ODSP/
POSPH

Statement of Assistance
 Please retain for your records.
 Relevé des prestations
 Veuillez conserver dans vos dossiers.

MEMBER ID CODE D'ID. DE MEMBRE	OFFICE BUREAU	CASE ORG CH. DE CAS	NO./N°	DATE	PERIOD COVERED PÉRIODE ASSURÉE
[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	30Jun23	FROM/DU 01Jun23 TO/AU 30Jun23
BENEFITS / PRESTATIONS		AMOUNT/MONTANT	DEDUCTIONS / DÉDUCTIONS	AMOUNT/MONTANT	
Basic Needs		706.00		0.00	
Shelter		347.12		0.00	
Total		1053.12	Total	0.00	Payment Amount / Montant du paiement 1053.12

How is our service? ontario.ca/SocialAssistanceSurvey