

PORT CLINTON WATER WORKS



1868 East Perry Street
Port Clinton, OH 43452

Phone 419-734-5522
Fax 419-734-5278
pccityhall@portclinton-oh.gov

Help 2 Others (H2O) Program

(Assistance for Infrastructure Fee Only)

Ordinance 28 – 20 Section 4

Financial Assistance for Port Clinton residents who meet all of the following requirements and have provided required proof:

1. Are you sixty-five (65) years of age or older? Y__ N__ ; **DOB** _____
2. Do you own and occupy your service address as your primary residence? Y__ N__
3. Do you own a second residence? Y__ N__ ; **Address:** _____
**Second residence will cause disqualification
4. Will the infrastructure fee cause you to suffer a financial hardship? Y__ N__
Please state reason for hardship: _____

*****Must renew each year by December 1st to be considered for January waiver*****

Date of Application _____

Applicant Name _____

Phone Number _____

Service Address _____

Account Number _____

Applicant Signature _____

By signing this application, I attest the information provided is true and accurate and any false or fraudulent information will be subject to all penalties provided by law.

For Office Use Only		
Date Received _____	Calendar Year _____	No. Months _____
Safety Service Director or Designee approval _____		
Date Approved/Denied _____	Waiver Given \$ _____	
Safety Service Director or Designee denial _____		
Reason for denial _____		
Informed Customer-Date _____	Letter/Phone/e-mail/Verbal	<input type="checkbox"/> Update Excel Sheet
<input type="checkbox"/> Water Infr Fee Disabled	<input type="checkbox"/> Sewer Infr Fee Disabled	<input type="checkbox"/> Comments (Enrollment Date/Year/Months)