

WATERFORD TOWNSHIP



Senior Chore Assistance Program



In partnership with Oakland County and the Oakland Livingston Human Services Agency (OLHSA), Waterford Township is pleased to provide an ARPA funded grant to create a responsive yard services program to meet the needs of older adults through a chore assistance program for eligible applicants.

Eligible services include:

- Lawnmowing
- Gutter Cleaning
- Snow Removal
- Spring and Fall Yard Cleanup
- Bush Trimming



To be eligible, you must be a low-income, senior Waterford Township homeowner, either 62 years old or older or disabled, and meet income limits as determined by the US Department of Housing and Urban Development (HUD).

Income qualifications are based on household size as indicated below.

HOUSEHOLD SIZE	MAXIMUM INCOME
1 Person	\$53,700
2 Persons	\$61,400
3 Persons	\$69,050
4 Persons	\$76,700
5 Persons	\$82,850
6 Persons	\$89,000
7 Persons	\$95,150
8 Persons	\$101,250



Federal Regulations require us to anticipate income, using the household's current circumstances, to project future income. WE ARE TO ASSUME THAT TODAY'S CIRCUMSTANCES WILL CONTINUE FOR THE NEXT 12 MONTHS. Gross income includes the earnings of all household members 18 year or older plus the benefits of all household members. Benefits include child support, Social Security benefits, alimony, etc.



CHARTER TOWNSHIP OF WATERFORD

Senior Chore Assistance Application

Services Requested

(Select any as necessary)

Grass Cutting
Snow Removal
Yard Cleanup
Gutter Cleaning
Bush Trimming

Applicant Information

Applicant Name _____
(Last) _____ (First) _____ (MI) _____

Property Address _____ Waterford MI _____
(Street) _____ Zip _____

Mailing Address
(if different) _____
(Street) _____ (City) _____ (State) _____ Zip _____

Email Address _____ Phone _____
Emergency Contact _____ Phone _____

Occupant Demographic Information

(Demographic information is collected for reporting purposes and will not impact your application)

Marital Status
(select 1) Married Divorced Widowed Single

Total number of occupants in household _____ Total monthly income of all occupants, 18 and up _____

Household Member	Relationship	Date of Birth	Race	Hispanic	Income Source	Total Monthly Income
Head of Household	Self				Social Security Pension Other	
Other						
Other						
Other						
Other						

Include a copy of a government issued ID and financial statements (W-2, state and federal tax returns, social security benefit letters) for all occupants 18 and older.

I certify that the statements and information contained in this document are true, accurate, and complete.

I understand that the confidential information I am providing on this form will be used for state and federal reporting requirements, program management, quality assurance, public safety, and research. No other use of personal identifying information on this form is intended unless I authorize it or a court orders it.

Signature _____ Date _____

Print Name _____

Please return the completed application to:

Waterford Township Development Services Dept., 5200 Civic Center Dr., Waterford, MI 48329
or by email to salef@waterfordmi.gov