

Housatonic Resident Water-related Expense Reimbursement Application

Contact Information

Name _____

Home address _____

Mailing address (if different) _____

Phone _____

Email _____

Number of individuals in household _____

****Please submit a copy of your most recent Housatonic Water Works bill****

Expense Information

Each household in Housatonic is eligible for reimbursement of up to \$300, retroactive to January 1, 2018. Only one application may be submitted per household. You must provide a copy of individual receipts for each purchase and total your purchases below.

<u>Expense Category</u>	<u>Total Amount</u>
Water filtration system purchase/installation	\$_____
Bottled water purchase	\$_____
Laundry/cleaning -related expenses	\$_____
Grand Total	\$_____

Please check: I have enclosed my household's ____ Receipts ____ Water bill

Signature _____ Date_____

Please mail, email or drop off your completed application, receipts and water bill to:

Town Manager's Office

Great Barrington Town Hall

334 Main Street

Great Barrington, MA 01230

Email: jrisen@townofgb.org

Applications will be considered on a rolling basis until funding is exhausted. You will be notified by phone or email when your application is approved. Call the Town Manager's Office with questions: 413-528-1619, x2, x9.

For internal use only

Reviewed by _____ Date_____ Approved by _____ Date_____