



2026

WATER & SEWER BASE RATE DISCOUNT PROGRAM APPLICATION

CONTACT INFORMATION

Name of Applicant _____

Property Owner Name _____

Physical Address _____

Billing Address (if different) _____

Phone Number _____

Email _____

REGISTRATION MUST BE RENEWED ANNUALLY.

To register for the program, you must be a natural person, utility customer, reside in city limits, and meet at least one of the following qualifications.

(Please check all that apply)

YES NO Are you permanently disabled?
If yes, provide a letter from your physician.

YES NO Are you enrolled in a federal or state financial assistance
program? If yes, provide proof of enrollment.

YES NO Have you maintained your primary residence in Craig city limits
for at least the last ten years and are you 65 years of age or
older? If yes, provide proof of residency, and a copy of your
driver's license.

I hereby certify, under penalty of perjury, in compliance with the Craig Municipal Code, that the foregoing is true and correct.

Applicant Signature _____

Date _____

Application and proof of eligibility can be emailed to finance@cityofcraig.org, dropped off at City Hall, or mailed to 300 W 4th Street, Craig, CO 81625.

OFFICIAL USE ONLY

Calculation of Discount <div style="border: 1px solid black; height: 150px; width: 100%;"></div>
Calculated discount applied to base rate for water and sewer: _____
Staff Recommendation <input type="checkbox"/> APPROVED <input type="checkbox"/> DENIED

Finance Director Approval _____

Date _____