

APPLICATION FOR PWD DISCOUNT AVAILMENT

Name: _____ Acct. No. _____

Address: _____

Date of Birth: _____

DOCUMENTARY REQUIREMENTS FOR SUBMISSION:

- PWD ID
- PROOF OF RESIDENCE (Barangay Certification)
- AUTHORIZATION LETTER OF THE REPRESENTATIVE (if necessary)

CONDITIONS FOR THE AVAILMENT:

1. A minimum of five percent (5%) discount is granted relative to the monthly utilization of water households with PWD pursuant to Republic Act (RA) Nos. 9442 and 10754, also known as The Magna Carta for Persons with Disability and An Act Expanding the Benefits and Privileges of Persons with Disability (PWD).
2. A Person with Disability must apply for the discount personally or thru a representative. There shall be annual renewal of application to Infanta (Quezon) Water District.
3. The discount only applies up to 30 cm³ of water consumed.
4. The privilege is granted per hosuehold regardless of the number of PWDs residing therein.
5. Meter Registration should be in the name of the PWD or his/her representative within the period of one year.

SIGNATURE OVER PRINTED NAME

DATE

Evaluated by:

Approved by:

RAMON A. ESCARECES
Customer Service Asst. D

ENGR. ALEJO G. GONIO
General Manager/O.I.C.

- = FOR IQWD RECORDS = -

Encoded by:

PEDRITO V. AUDITOR
Admin Services Aide

Date: _____
(mm/dd/yyyy)

Life goes well