2020 Lawn Cutting Program **APPLICATION**

HOUSEHOLD INFORMATION

Name _____

Address _____

Zip Code _____ Birth Date _____

Phone(s) ( ) _____ ( ) _____

Email _____

ELIGIBILITY

_____ I am 65 years of age or older

_____ I live alone _____ I have other household members *

or

_____ I am **under** the age of 65 and disabled (doctor's note confirming disability should be attached)

_____ I live alone _____ I have other household members *

Please list other household member(s) and their birth date(s):

Name _____ Relationship _____ Birth Date _____

Name _____ Relationship _____ Birth Date _____

Name _____ Relationship _____ Birth Date _____

OPTIONS

This year you have to choose between three (3) options. The cost for Options A or B is $275 ($110 if on HEAP) and the cost for Option C will be determined by the contractor you choose outside of the Brooklyn Heights Senior Lawn Cutting Program.

_____ Option A All Pro Landscaping and Snow Removal LLC

_____ Option B MLS Landscaping

_____ Option C A contractor outside of the Brooklyn Heights Senior Lawn Cutting Program that you choose on your own. If you choose Option C you will receive an $85 rebate from the Village after submitting proof of payment for lawn cutting services. See the 2020 Lawn Cutting Program Outline for additional details.

COST

There will be a charge of **$275** per senior household. Checks payable to "Village of Brooklyn Heights" or exact cash will be accepted. There will be a discount for any senior that has been approved for the federal HEAP program. Proof of participation in the HEAP program must be submitted in the form of your current year acceptance letter and/or a copy of your most current gas bill with the HEAP discount listed. HEAP recipient cost is **$110**.

RELEASE OF LIABILITY

"I realize the contractor is an independent contractor and not an employee of the village and that any Agreement I make with the independent contractor is solely between the two of us and the Village is not a party to this Agreement." I release the Village, its servants, agents and employees from any liability or damage whatsoever which may arise from the lawn cutting service at the above noted property. I certify that the above information submitted is true and accurate. I further understand this is applicable regardless of which choice I make for a contractor.

Signature _____ **Date** _____

Department Use Only:

Date Received _____ *Amount Rec'd* _____ *Ck # / Cash* _____ *HEAP Verified* _____ *CSD Approval* _____ *PC* _____