



**AOC PUMPOUT APPLICATION  
For Low-Income Households**

Name (please print): \_\_\_\_\_

Physical Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Mailing Address (if different): \_\_\_\_\_

Phone: (\_\_\_\_) \_\_\_\_\_ Email: \_\_\_\_\_

What is your Annual Adjusted Household Income \$ \_\_\_\_\_

(Please Attach REQUIRED Proof of Income) Federal 1040 Income Tax Form or call 417-739-5001 for options

Household Size (How many people, including yourself, are you claiming in your household)? \_\_\_\_\_

**Please answer as best you can. If you don't know, please enter a (?)**

How old is your septic system? \_\_\_\_\_ years. What is the size of your septic tank? \_\_\_\_\_ gallons.

How many people live in this house? \_\_\_\_\_ Is there an access to the tank? \_\_\_\_\_

How long has it been since your septic tank was last pumped or inspected? \_\_\_\_\_

Are you aware that proper maintenance of your septic tank helps protect water quality? Yes No

Are you aware that not maintaining your septic system could potentially cause back-ups into your home or problems to your lateral field? Yes No

Applicant Signature: \_\_\_\_\_

Date: \_\_\_\_\_

**Return this form, with proof of income to:**

**Ozarks Water Watch  
PO Box 636, Kimberling City, MO 65686**

**Phone: 417-739-5001**

**Fax: 417-739-9889**

[ronna@ozarkswaterwatch.org](mailto:ronna@ozarkswaterwatch.org)

in person: 11 Oak Drive, Kimberling City, MO 65686

**INCOME ELIGIBILITY**

Household Size	Maximum Annual Income
1	\$18,210
2	\$24,690
3	\$31,170
4	\$37,650
5	\$44,130
6	\$50,610
7	\$57,090
8	\$63,570