



## **2021-2022 Disabled/Senior Citizen Snow Removal Program**

The Reminderville Service Department provides free snow plow services for residents who are 65 years of age or over, or those residents who are classified as physically disabled, who have an annual household income that does not exceed \$40,000, and provided that no able-bodied person residing with the resident is capable of removing snow. Please complete the application and return along with proof of income. A 2020 1040 Tax Form (front page) or a W-2 for 2020 will suffice. We will also need proof of age (driver's license or passport).

You can mail the form in to Village Hall at the address below or drop it off at Village Hall Monday-Friday 8:00-4:00.

No snow plowing will be furnished until the accumulation of snow reaches approximately 3 inches as determined by the Service Director. Driveways will be plowed after Reminderville roadways have been cleared for motorists and determined to be safe for passage. **There are no guaranteed times when your snow removal service will be done.** We ask that you please be patient and courteous. This is not a state-funded program or grant. If you have questions, you can call me at 330-562-1234.

Sincerely,

Stacey Task  
Administrative Assistant  
Reminderville Village Hall 3382 Glenwood Blvd Reminderville, OH 44202

Application for Senior/Disabled Citizen Snow Removal

Name \_\_\_\_\_

Street Address \_\_\_\_\_

Phone # \_\_\_\_\_

Are you a senior citizen (65 years or older)                      Yes    No  
and/or

a person with a physical or medical disability?                      Yes    No

If you are applying to qualify as a senior citizen, please state your date of birth:

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

If you are applying to qualify as a disabled person, please indicate the nature of the disability: \_\_\_\_\_  
\_\_\_\_\_

Please provide medical certification indicating that you have a physical or cognitive limitation which prohibits you from removing snow. Your doctor's office can email certification to Stacey at [stask@reminderville.com](mailto:stask@reminderville.com) or you can include a hard copy with your application.

Are you qualified for the income eligibility?                      \_\_\_\_ Yes    \_\_\_\_ No

Signature \_\_\_\_\_ Date \_\_\_\_\_

**Senior Citizen Applicant**

I, \_\_\_\_\_, hereby certify that I am \_\_\_\_\_ years of age, not gainfully employed, that there is no other person residing with me capable of removing snow and that all of the information supplied by me in this application is true. If this application is accepted by the Village of Reminderville, I agree that the Village of Reminderville, its officers, employees, and contractors have full permission to come upon my premises at the address indicated on front, for the purpose of plowing snow therefrom and I further forever and completely release and discharge the Village of Reminderville, its officers, employees, and contractors from all liability, claims, demands, damages, actions and causes of action whatsoever which I might otherwise have or enjoy as a result of the Village of Reminderville providing the snow plowing services for which I have hereby applied. I further understand and agree that the snow removal program may be discontinued at any time the Village of Reminderville deems necessary and that there shall be no liability or claims arising to the Village of Reminderville as a result of the discontinuance of such program. I have read and understand the requirements and rules of the Village's Senior/Disabled Snow Removal Program and agree hereby to abide and be bound by same.

\_\_\_\_\_  
Signature of Applicant



**Disability Applicant**

I, \_\_\_\_\_, hereby certify that I am disabled, not gainfully employed, am unable to remove snow because of my disability. I further certify that there is no other person resides with me capable of removing snow and that all of the information supplied by me in the application is true. If this application is accepted by the Village of Reminderville, I agree that the Village of Reminderville, its officers, employees, and contractors have full permission to come upon my premises at the address indicated on front, for the purpose of plowing snow therefrom and I further forever and completely release and discharge the Village of Reminderville, its officers, employees, and contractors from all liability, claims, demands, damages, actions and causes of action whatsoever which I might otherwise have or enjoy as a result of the Village of Reminderville providing the snow plowing services for which I have hereby applied. I further understand and agree that the snow removal program may be discontinued at any time the Village of Reminderville deems necessary and that there shall be no liability or claims arising to the Village of Reminderville as a result of the discontinuance of such program. I have read and understand the requirements and rules of the Village's Senior/Disabled Snow Removal Program and agree hereby to abide and be bound by same.

\_\_\_\_\_  
Signature of Applicant