

TO QUALIFY FOR A FILTER:

- ✓ **Your household receives water from a Lead Action Level Exceedance impacted area.**
- ✓ **You and/or your household have NOT already received a water filter from Oakland County Health Division or Michigan Department of Health and Human Services.**
- ✓ **Your household has at least one of the following:**
 - **A child under age 18 living there**
 - **A child under age 18 spending several hours every week at least 3 months of the year there**
 - **A pregnant woman living there**
- ✓ **Your household has at least one of the following:**
 - **Someone receiving WIC benefits and/or Medicaid insurance**
 - **Difficulty affording a filter and replacement cartridges (filters cost about \$35 and replacement cartridges cost about \$15)**