## BAY RESTORATION FUND <u>RESIDENTIAL EXEMPTION REQUEST FORM</u> LAVALE SANITARY COMMISSION

Residents must **FIRST** meet the **Income Eligibility Standards** as outlined below:

<i>Effective July 1, 2023 – June 30, 2024*</i>		
Household Size	Monthly Gross Income is less than	
1	\$2.430.00	
2	\$3,287.00	
3	\$4,143.00	
4	\$5,000.00	
5	\$5,857.00	
6	\$6,713.00	
7	\$7,570.00	
8	\$8,427.00	
Additional persons	Add \$857 each	

## AND

Then meet at least one (1) of the following conditions - Check all boxes that apply

• Receiving energy assistance subsidy	
• Receiving public assistance:	
Supplemental security income	
Food stamps	
• Receiving Veterans or Social Security Disability benefits	

Residents will be required to provide proof for each item checked above (*list of information needed is attached to this form*).

The exemption is valid for  $\underline{one}$  (1) year only. Any subsequent exemptions must be reprocessed and verified.

## PLEASE PRINT

Name:		
Mailing Address:		
City, State, Zip:		
Phone Number:		
Date:		
Signature:		
FOR OFFICE USE ONLY		
Account #	<u>APPROVED</u>	<u>DENIED</u>
Approved By:		
Date:		

## **INFORMATION YOU WILL NEED TO BRING WITH YOU**





 $\checkmark$  Proof of residence

- $\checkmark$  Copies of social security cards for all household members (including Children)
- Proof of ALL your household's TOTAL GROSS income for the last 30 days (from all sources of income)

 $\checkmark$  If you rent, a copy of lease or rent receipt

\*Source: Maryland Department of Human Resources/Office of Home Energy Programs - http://dhr.maryland.gov/office-of-home-energy-programs/how-do-you-apply/