CITY OF HAYWARD LOW INCOME DISCOUNT / WAIVER APPLICATION

(Please see the other side for additional information)

Name:	Hayward Water System Account #: Emergency Services Facilities Tax (Excise Tax) Account #: Date moved in: Date moved out:
Address:	Administrative Hearing Case #:
Phone number:	Waste Mgmt of Alameda Co (must reside within Hayward City Limits) Account #:
Number of persons in household, including applicant, family members & roommates:	Utility User Tax exemptions (must include these account numbers for exemption) **PG&E** #: **Comcast** #:

Resident Information (applicant, family members, roommates)			Total Gross Income* *(Enter monthly amount; **documentation for each income source is required**)*						
Name	Age	Relationship to applicant	Gross Wages	Interest / Dividends	SSI Benefits	Pensions	Public Assistance	Rental Income & Other income	Total
							Total Monthly Income		
							Total Annual Income		

I certify under penalty of perjury that the information supplied on this document is true and correct. I request a refund of any credit balance that may result from this application.

Head of Household Signature *Date*

Please remember to include documentation for each source of income or this application will be returned.

For office use only		
Approved	Date Entered	Date ET Adjusted
Approved By	Entered by	Adjusted by

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Garbage Collection Fee Discount: The Hayward City Council passed a mandatory trash collection ordinance requiring all Hayward residents to subscribe to garbage collection service. Approved applicants must reside within the Hayward city limits to receive this discount.

Hayward Water System Discount: Approved applicants receive a discount on their Meter Service Charge each billing period.

Emergency Services Facilities Tax Exemption: The ESFT is a general tax levied on all residences and businesses in the City of Hayward. Approved applicants are exempt from this tax.

Administrative Hearing Deposit Waiver: Approved applicants have the hearing deposit requirement waived.

Utility User Tax Exemption: The tax is waived on participating agencies (an annual UUT Exemption Refund request may be necessary)

When calculating the total gross income*, it must include the total income for everyone residing at the address and include documentation for each person's income. **Your application will not be processed without the documentation verifying your gross income**.

Acceptable forms of documentation may include:

- Copy of IRS return for the previous year (first page only showing income)
- Copy of AFDC or Welfare Aid Verification with amount of benefit
- Copy of disability check or statement for amount of benefit
- Copy of a recent SSI and/or Social Security check or copy of a recent Bank Statement (if you have direct deposit)
- Copy of a recent pay stub

These are examples of documentation; we do not need one of each. All that is necessary is enough documentation that will verify the amount of income you list on the reverse side of the application. Please do not send original documents, they will not be returned.

Completed applications may be brought or mailed to:

City of Hayward Revenue Division
777 B Street
Hayward Ca 94541

Phone (510) 583-4610 TDD (510) 247-3347

*GROSS INCOME REQUIREMENTS**		
$32,750 per year – **1** Person Family	**$46,750** per year – **4** Person Family	**$58,000** per year – **7** Person Family
$37,400 per year – **2** Person Family	**$50,500** per year – **5** Person Family	**$61,750** per year – **8** Person Family
$42,100 per year – **3** Person Family	**$54,250** per year – **6** Person Family	**$3,740** for each additional person

*Gross income is the **total income of every person residing at the address (family and roommates),** from whatever source before deductions, whether taxable or non-taxable, including but not limited to wages, salaries, interest, dividends, spousal or child support payments, public assistance, social security, pensions, and any income from self employment, including rental property income.