



# City of Adelanto

11600 Air Expressway | Adelanto, CA 92301 | (760) 246-2300

## *Water and Sewer Low Income Exemption*

On August 12, 2009, The Adelanto Public Utility Authority Board approved a Low Income rate schedule for Water and Sewer utilities. The Low Income rate schedule is for households that have total household incomes that meet the U.S. Department of Housing and Urban Development (HUD) guidelines for San Bernardino County.

Below are the income requirements for 2015 based on information developed annually by U.S. Department of Housing and Urban Development (HUD) for San Bernardino County.

<b><u>Maximum Household Income</u></b>	
Number of Persons In Household	Total Combined Gross Annual Income
1	\$21,750
2	\$24,850
3	\$27,950
4	\$31,050
5	\$33,550
6	\$36,050
7	\$38,550
8	\$41,000

To receive the Low Income Exemption the utility service must be in the name of the applicant. Proof of total income is required including income verification for all adults (over the age of 18) in the household. Proof of Federal, State or County assistance income is required for the calculation of total income. Foster Care stipends are included in the calculation of total income.

Low Income Exemptions expire on December 31 of each year automatically. Renewal applications must be submitted 30 days prior to expiration or the customer will be automatically charged the normal customer rates.

### **The following information must be attached to the application:**

- **Proof of Residency- Water bill or Lease agreement.**
- **Proof of Income (most recent pay stub and most recent annual Federal Tax Return) for each adult in the household.**
- **Proof of unemployment benefits or unemployment benefit denial letter for unemployed adults in the household.**
- **Copy of Photo ID for each adult in the household.**
- **All Low-Income exemptions expire on December 31. Application must be re-submitted 30 days prior to expiration. If you do not re-apply or are found ineligible, you will be billed normal customer rates.**

Should you have any questions or need additional information, please contact us at (760) 246-2300 Ext. 3040.

Please return the form and all attachments to the City of Adelanto Water Department.



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Name of Applicant		Date of Birth
Co-Applicant		Date of Birth
Address		Phone
City	State	Zip
Number of Persons In Household		
	Adults:	Children:
Additional Adult and Age		
Additional Adult and Age		
Additional Adult and Age		
<p>I hereby certify (or declare) under penalty of perjury under the law of the State of California that all information submitted with this application is true and correct. I am a resident of the property listed above and I am head of household (i.e. I am not listed as a dependent for the state or Federal Income Taxes by any other person).</p>		
Print Name	Signature	Date
Co-Applicant	Signature	Date
<p><b>NOTE:</b> Exemptions are not automatic. In order to receive an exemption, this form must be completed, filed with the City of Adelanto, and approved by the Finance Director.</p>		
For Office Use Only		
Please attach the following forms :		
Proof of Age for all adults (ID Card)	Proof of Income for all adults	Proof of Residency (Water Bill)