

INSTRUCTIONS TO APPLY FOR A SOLID WASTE EXEMPTION

READ INSTRUCTIONS AND APPLICATION BEFORE FILLING OUT

- I. A. Fill out application COMPLETELY - Applications with inadequate information will not be processed.
- B. Helpful reminders:
1. Name on application should be same name as on Solid Waste bill.
 2. Give SPECIFIC directions to the homesite.
 3. List ALL people living at residence.
 4. Place an X in all sources of income with apply to any person living at residence and place a 0 in all sources of of income which do not apply.
(NOTE: Interest on Savings Accounts MUST BE included as a source of income.)
 5. List any other sources of income such as rental houses, aid from agencies, etc.
 6. In general - income from working for wages, working "on the side", or any other income which should be reported to the IRS shall be included.

II. If Social Security or SSI is all or part of the household income:

- A. Contact the Social Security Office at 1-800-772-1213 and request an "AWARD LETTER WITH THE DATE OF ENTITLEMENT" to be sent to your residence. THIS LETTER MUST BE RECEIVED WITH THE APPLICATION OR YOUR APPLICATION CANNOT BE PROCESSED!

- III. When you receive the "Award Letter" send this letter and the Exemption Application to:

City of Red Bay
P.O. Box 2002
Red Bay, AL 35582

Or bring both to the Red Bay City Hall located at 112 Fifth Avenue Southeast in Red Bay.

NOTE: New Applications/Approvals may be requested at any time from the City of Red Bay. In General - properly processed approvals will apply for one year.

If you have any questions, feel free to contact this office at 356-4473.

SOLID WASTE COLLECTION FEE HARDSHIP EXEMPTION

NAME OF APPLICANT: _____
 NAME ON SOLID WASTE BILL: _____
 NAME ON ELECTRICAL UTILITY BILL: _____
 ELECTRICAL UTILITY ACCOUNT NUMBER: _____
 MAILING ADDRESS: _____
 PHONE: _____
 EXACT DIRECTIONS TO HOMESITE: _____

HOME: OWN _____ RENT _____

LIST FOLLOWING INFORMATION FOR ALL PEOPLE LIVING AT RESIDENCE:

NAME	AGE	RELATIONSHIP TO APPLICANT	SOCIAL SECURITY NUMBER
_____	_____	APPLICANT	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

LIST EXACT OR ESTIMATED TOTAL AMOUNT OF MONTHLY INCOME FOR ALL PEOPLE LISTED ABOVE FOR:

WAGES AND/OR SELF-EMPLOYMENT EARNINGS: _____
 SOCIAL SECURITY BENEFITS: _____
 SSI: _____
 INTEREST EARNED (SAVINGS, CD'S, ETC.): _____
 RETIREMENT/ANNUITIES: _____
 INVESTMENTS, RENTALS, OR OTHER INCOME: _____

I HEREBY CERTIFY THAT THE ABOVE INFORMATION IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND I GIVE MY PERMISSION FOR THE CITY OF RED BAY, ALABAMA OR ITS DESIGNEE TO INVESTIGATE ANY OF THE ABOVE INFORMATION.

DATE: _____ SIGNATURE _____

NOTE: IT IS A CLASS "C" FELONY TO FALSELY COMPLETE A WRITTEN INSTRUMENT REQUIRED BY A PUBLIC OFFICE ACCORDING TO ALABAMA CRIMINAL CODE. SECTION 13-A-9-3.

FOR DEPARTMENTAL USE ONLY:
 RECOMMENDATION: