



# City of Adelanto

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

## *Water and Sewer Senior/Disabled Low Income Exemption*

On August 12, 2009, The Adelanto Public Utility Authority Board approved a Senior Low Income rate schedule for Water and Sewer utilities. The Senior 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 2021 based on information developed annually by U.S. Department of Housing and Urban Development (HUD) for San Bernardino County.

### **Maximum Household Income**

Number of Persons In Household	Total Combined Gross Annual Income
1	\$27,650
2	\$31,600
3	\$35,550
4	\$39,500
5	\$42,700
6	\$45,850
7	\$49,000
8	\$52,150

To receive the Senior 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. Annual recertification is required.

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

- **CURRENT PROOF OF INCOME (MOST RECENT PAY STUB DATED WITHIN THE LAST 30 DAYS) FOR EACH ADULT IN THE HOUSEHOLD.**
- **COPY OF FULL TIME CLASS SCHEDULE FOR UNEMPLOYED STUDENTS OVER 18 YEARS OF AGE.**
- **CURRENT PROOF OF UNEMPLOYMENT BENEFITS OR CURRENT UNEMPLOYMENT BENEFIT DENIAL LETTER FOR UNEMPLOYED ADULTS (NON-STUDENTS) IN THE HOUSEHOLD DATED WITHIN THE LAST 30 DAYS.**
- **MOST RECENT FEDERAL TAX RETURN.**
- **COPY OF VALID GOVERNMENT ISSUED 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.



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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>NOTE: 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 (ID Card)	Proof of Income	Proof of Residency (Water Bill)

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