

CITY OF EL MONTE

Public Works ● City Hall West ● 11333 Valley Boulevard ● Phone (626) 580-2058 ● <u>EnvironmentalServices@elmonteca.gov</u> ● Monday - Thursday ● 7:30 a.m. - 5:00 p.m.

Low-Income Permanently Disabled Residential Waste Rate Reduction Application

Approved by Environmental Services Divis		Date				
MMENTS:						
LICATION:	DENIED		APPROVED			
OME:	QUALIFIED			D		
ABILITY VERIFIED:	YES		NO			
FOR OFFICE USE ONLY						
LICANT'S SIGNATURE		PRINT N	AME			
-	•	-	DATE	,		
Executed at the City of El Monte, California, this day .						
information is not true, the undersigned will be required to remit to the City of El Monte's residential waste						
APPLICATION. (See reverse)						
PHOTOCOPY OF PROOF OF INCOME, PROOF OF PERMANENT DISABILITY AND COPY OF TRASH BILL SHOWING THE APPLICANT AS THE CUSTOMER MUST BE PROVIDED WITH THE						
WASTE HAULER:		VALLEY VISTA SERVICES				
VALET SERVICE REQUESTED:	Yes		No 🗌			
REQUESTED:	96 GALLON	1 <u></u>		35 GALLON		
NUMBER OF PERSONS N HOUSEHOLD:						
Provide photocopy of dri- icense or I.D.	ver's Number			-		
DENTIFICATION:						
LELEPHONE NUMBER	:					
ADDRESS, CITY, ZIP CO	DDE:					
APPLICANT'S NAME:						
	ADDRESS, CITY, ZIP CONTELEPHONE NUMBER DENTIFICATION: Provide photocopy of driving icense or I.D. NUMBER OF PERSONS IN HOUSEHOLD: CONTAINER SIZE REQUESTED: WASTE HAULER: PTOCOPY OF PROOF OF SH BILL SHOWING TOWN TOWN TOWN TOWN THE SHOWING TOWN TOWN TOWN THE SHOWING TOWN TOWN TOWN THE SHOWING TOWN TOWN THE SHOWING THE SHOWING TOWN THE SHOWING THE SH	ADDRESS, CITY, ZIP CODE: CELEPHONE NUMBER:	ADDRESS, CITY, ZIP CODE: CELEPHONE NUMBER:	MDDRESS, CITY, ZIP CODE: CELEPHONE NUMBER: Driver's License CA I.D.	ADDRESS, CITY, ZIP CODE: DENTIFICATION:	

LOW-INCOME PERMANENTLY DISABLED RESIDENTS RESIDENTIAL WASTE AND RECYCLING SERVICE RATE REDUCTION PROGRAM

Qualified low-income permanently Disabled Residents are eligible for a 50% reduction in residential waste collection, recycling and disposal service rates for the residential franchise. The following are requirements for the rate reduction:

- 1. Applicant must be a full time occupant of the residence for which a rate reduction is requested. The waste service must be billed to the applicant.
- 2. Proof of permanent disability must be confirmed by:
 - a. Department of Motor Vehicle placard information card with applicants name, or
 - b. Social Security Permanent Disability Benefits Award Statement
- 3. The annual household income for the applicant's residence must be equal to or less than "Low Income" as defined by the United States Department of Housing and Urban Development (HUD). Verification of income must be submitted by all applicable members of the household. Income must be confirmed by:
 - a. Most recent income tax return; or
 - b. Social Security or Disability Annual Financial Statement (If Social Security/Disability payments are directly deposited into applicant's bank account, a current copy of a bank statement showing such deposit is acceptable)

The adjusted income limits, effective year 2021 are as follows:

One person household	\$66,250
Two person household	\$75,700
Three person household	\$85,150
Four person household	\$94,600
Five person household	\$102,200
Six person household	\$109,750
Seven person household	\$117,350
Eight person household	\$124,900

Inadequate information will result in a delay or disapproval of the application. The City reserves the right to deny the application if proper documentation verifying residency, disability or income of the applicant and their household is not provided.