

PO BOX 2168

Anniston, AL 36202 GARBAGE FEE EXEMPTION APPLICATION

Application for exemption from payment of monthly garbage fee, levied under City of Anniston Ordinance 90-0-02. I understand that if I am granted my exemption it is ONLY GOOD FOR THE CURRENT YEAR and that I am responsible for renewing it each May. If my financial situation changes I must notify the City of Anniston, in writing, as soon as possible.

Name:	Phone:	Email	
Address:			
(CIRCLE ONE) 1	AM THE HOMEOWNER / TENAN	T OF THIS PROPERTY (CIRCLE ONE)	
misrepresentation made by m		household and that I reside at the residence le by the City of Anniston Ordinance 90-0-02 court appearance and fines.	-
SIGNATURE		DATE	
COMPLETE THE SECTION ON	I THE NEXT PAGE FOR EACH PER	SON THAT RESIDES IN THE HOME, INCLUDE	ALL
SOURCES OF INCOME AND SOC	IAL SECURITY NUMBERS. COPIE	S (NO ORIGINALS) OF ALL SOCIAL SECURITY	CARDS
AND INCOME VERIFICATION DO	CUMENTS MUST BE SUBMITTED	WITH APPLICATION FOR EACH PERSON LIST	TED. IF
APPLICATION IS RECEIVED INC	OMPLETE, ONLY THE APPLICATION	ON WILL BE RETURNED TO YOU. ALSO, IF YO)U DO
1	Municipal Use Only – <u>Do Not</u>	Write In This Box	
Date:		Grant Garbage Exemption	
Total Household Income \$ _	/ Month	Reject Garbage Exemption	
Application Complete: YES	S NO		

REPORT OF INCOME:

	I FOR THE HOUSE(S) \$ IOUNT HERE \$	IF YOU HAVE SAVINGS OR RECEIVE INTEREST, LI
1)	,	Social Security #
±)		SSI \$
		Retirement or Pension \$
		ADC / FDC \$
	Job Income \$	
2)	Name	Social Security #
	Social Security \$	SSI \$
	VA \$	Retirement or Pension \$
	Child Support \$	ADC / FDC \$
	Job Income \$	
3)	Name	Social Security #
	Social Security \$	SSI \$
	VA \$	Retirement or Pension \$
	Child Support \$	ADC / FDC \$
	Job Income \$	
4)	Name	Social Security #
	Social Security \$	SSI \$
	VA \$	Retirement or Pension \$
	Child Support \$	ADC / FDC \$
	Job Income \$	
5)	Name	Social Security #
	Social Security \$	SSI \$
	VA \$	Retirement or Pension \$
	Child Support \$	ADC / FDC \$
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