

ENVIRONMENTAL SERVICES GUIDELINES:

# LOW-INCOME SENIOR 30 GALLON REFUSE PROGRAM



**PUBLIC WORKS DEPARTMENT**  
**Environmental Services Section**

125 E College Street, Covina CA 91723  
T (626) 384-5480 F (626) 384-5479  
Website: <http://www.covinaca.gov>  
Email: [info@covinaca.gov](mailto:info@covinaca.gov)  
CITY HALL HOURS: Mon- Thurs 7 am – 6 pm  
CLOSED FRIDAYS

## WHAT YOU NEED TO KNOW

This program is intended for low-income senior citizens who receive single family home trash service in the City of Covina.

**To participate in the program, residents must:**

- be 62 years of age or older; and
- have a valid California driver's license or identification showing proof of age; and
- be living in a single family home residence in Covina; and
- meet low-income requirements set by the U.S. Department of Housing and Urban Development (HUD).

## WHAT YOU NEED TO DO

To participate in the Low-Income Senior 30 Gallon Refuse Program, you must:

- Confirm that your income meets the low-income standards set by HUD (see table on reverse side) for the applicable year.
- Complete and submit an application (on reverse side). Ensure that your application is completely filled out and signed. The Environmental Services Section will gladly assist you in completing this form. For assistance, visit us at the Engineering counter at City Hall, 125 E College Street, or contact us by phone at 384-5480 from 7:00 a.m. – 6:00 p.m. Monday through Thursday.
- Provide proof of age with a copy of a valid California identification card or driver's license.
- Provide proof of low-income status by submitting copies of ALL the following that apply:
  - Professionally prepared Federal and State Income Tax for 2012
  - Form SSA-1099 Social Security Benefit Statement
  - SSI Forms
  - Interest Income
  - Other (see list of "All Types of Income Received Last Year" on reverse)
- Please allow 2 – 4 weeks for processing. You will be notified when your application is approved so that your cans can be swapped for the 30 gallon containers. The 30 gallon billing charge will appear on the next quarterly billing statement mailed out by Covina Disposal.
- For subsequent years, you must renew your participation on or before June 1 to ensure you continue to receive and be billed for the 30 gallon rates that go into effect July 1.



**CITY OF COVINA**

2013 Low-Income Senior Citizen  
30 Gallon Refuse Service Application

**Fill out and return with copies of  
required documents to:  
Environmental Services, City of Covina  
125 E College Street, Covina, CA 91723**

- 1. Name (First Middle Last) \_\_\_\_\_
- 2. Street Address \_\_\_\_\_ 3. City \_\_\_\_\_
- 4. State \_\_\_\_\_ 5. Zip \_\_\_\_\_ 6. Home Phone \_\_\_\_\_ 7. Other Phone \_\_\_\_\_
- 8. Valid CA Drivers License/ID number (attach photocopy) \_\_\_\_\_
- 9. Social Security Number \_\_\_\_\_

10. PLEASE CHECK ONE:  New Application  Renewal Application

11. Do you meet the low-income requirements as stated to the right?

Yes  No

12. Are you 62 years of age or older?

Yes  No

13. Do you live in a single family home residence in the City of Covina?

Yes  No

14. Number of occupants in your household: \_\_\_\_\_

2013 INCOME GUIDELINES	
Household Size	Maximum Income from ALL Sources
1	\$ 29,000
2	\$ 33,150
3	\$ 37,300
4	\$ 41,400
5	\$ 44,750
6	\$ 48,050
7	\$ 51,350
8	\$ 54,650

Source: HUD FY 2012 Income Limits; Dec. 11, 2012

**All Types of Income Received Last Year (2012) Must Be Used In Calculating Your Total Yearly Income For 2013**

- Salary, wages, etc.
- Social Security Benefits
- Pension/Retirement/Annuity/IRA
- Interest Income
- Investment Income
- Other Income
- Supplemental Security Income
- Welfare
- Alimony
- Unemployment Insurance
- Self-employed
- Rental Property

PLEASE NOTE: The City may process a random low-income verification audit of 10% of the applications processed each year. Please keep all documentation for proof of income in case of an audit. Copies of professionally prepared Federal and State Income Tax Returns will be accepted in lieu of all other income documentation required to verify household income.

***I declare under penalty of perjury that the information provided in this application is true, accurate, and complete. I understand that I must renew my application and verify my income annually.***

\_\_\_\_\_  
**Applicant's Signature**

\_\_\_\_\_  
**Date**