



City of La Habra

Bill Assistance Program (BAP)

American Rescue Plan Act (ARPA)



Program Guidelines

July 2022



1.0 INTRODUCTION

In response to the Coronavirus Pandemic (COVID-19), Congress approved the Coronavirus State and Local Fiscal Recovery Funds (SLFRF), a part of the American Rescue Plan. The SLFRF delivered \$350 billion to state, local, and Tribal governments across the country to support their response to and recovery from the COVID-19 public health emergency. The SLFRF program ensures that governments have the resources needed to fight the pandemic and support families struggling with its public health and economic impacts.

To assist La Habra residents respond to the economic hardships created by the COVID-19 pandemic, the City of La Habra has established the Bill Assistance Program – American Rescue Plan (BAP). The program provides grants of \$2,500 to eligible applicants to respond to the impact of COVID-19. The City has made an initial allocation of \$500,000 to fund this program.

Applications will be accepted on a first-come, first-serve basis beginning August 1, 2022 until funds are exhausted.

2.0 ELIGIBILITY AND MINIMUM REQUIREMENTS

Eligible applicants include households that currently live within the City of La Habra city limits and whose gross household income is at or below 65% of the area median income for Orange County, adjusted for household size as published annually by the U.S. Department of Housing and Urban Development (HUD). The current income limits are shown in the table below.

To be eligible for the BAP, the following minimum requirements must be met:

- a. The household must live in La Habra city limits.
- b. The gross household income for all persons 18 years of age and older must not exceed 65% of the area median income for Orange County.
- c. The applicant submits qualified bills for payment.

| # People in Household | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 |
|--------------------------------|----------|----------|----------|----------|----------|-----------|-----------|-----------|
| Maximum Gross Household Income | \$61,500 | \$70,450 | \$79,300 | \$88,100 | \$95,150 | \$102,200 | \$109,250 | \$116,300 |

**65% Area Median Income for Santa Ana/Anaheim/Irvine MSA (FY2022)*

The City will not provide grant assistance in situations where it is determined that any representation, warranty or statement made in connection with the BAP application is incorrect, false, misleading or erroneous in any material respect. In the event assistance has already been provided prior to the discovery of incorrect, false, or misleading representation, the City may initiate legal action to recover the funds and its attorneys' fees and costs in doing so.

SLFRF funded BAP grants are limited to one per residential address and one per household.

Income Eligibility

As defined at 24 CFR 5.403, “family” includes, but is not limited to, the following, regardless of actual or perceived sexual orientation, gender identity, or marital status: 1) A single person, who may be an elderly person, displaced person, disabled person, near-elderly person, or any other single person; or 2) A group of persons residing together, and such group includes, but is not limited to a family with or without children (a child who is temporarily away from the home because of placement in foster care is considered a member of the family); an elderly family; a near-elderly family; a disabled family; a displaced family; and the remaining member of a tenant family.

Therefore, family member information must include, at a minimum, the following:

- Full names and ages of all family members living in the residence; and
- Signature of all adult family members age 18 or over, certifying that the information provided related to the annual family income and family composition is correct.

The City will use the Section 8 definition of “Annual Income” as defined in 24 CFR, Part 5, Subpart F and Exclusions defined in Subpart F. Based in this, “Annual Income” which is defined as all amounts, monetary or not, which go to the family head or spouse (even if temporarily absent) or to any other family member, or are anticipated to be received from a source outside the family during the 12-month period following submission of the Program Application. Exhibit 1 provide the list of included and exclude types of income.

The CARES Act Economic Impact Payment (stimulus check) is not considered an income payment.

Income shall be annualized for qualification purposes based on present income received. If it is not feasible to anticipate a level of income over a 12-month period (e.g., seasonal or cyclic income), or the City believes that past income is the best available indicator of expected future income, the City may annualize the income anticipated for a shorter period, subject to a redetermination at the end of the shorter period.

3.0 INELIGIBLE RESIDENTS

The following applicants are ineligible for participation in the BAP:

- a. Applicants that do not have a valid social security number
- b. Property owners with open Code Enforcement cases

4.0 ELIGIBLE USES OF PROGRAM FUNDS

Grants are restricted to the following eligible costs:

| | |
|--|--|
| <ul style="list-style-type: none">• Rent including late fees• Mortgage principal and interest• Utility bills (gas, electric and water)• Telephone and cellphone bills | <ul style="list-style-type: none">• Credit card bills• Car payment• Student loan payment |
|--|--|

| | |
|---|--|
| <ul style="list-style-type: none"> • Cable, internet, Dish Network | <ul style="list-style-type: none"> • Streaming services (Netflix, Hulu, YouTube TV, etc.) |
|---|--|

At the time of application, grant recipients will need to provide documentation to support the request for grant funding. Documentation must be for bills listed in 3.0 that are in the name of Applicant that are either:

- a. Paid within 30 days prior to the date the applicant is submitted; or
- b. Due within 30 days after the date of the submittal of the application.

5.0 APPLICATION AND SELECTION PROCESS

Applications will be accepted on a first-come, first-serve basis beginning August 1, 2022 until funds are exhausted. Applicants will be required to complete an initial application, including a copy of the following documents:

1. Documents for all persons in the household who are 18 years of age and older

- Copy of State ID/ Driver’s license
- 2021 federal income tax return (all pages – all schedules). If not filed, 12 months of personal bank statements (January 1, 2021 through December 31, 2021).
- Birth Certificate for newborns that are not listed on the 2021 federal income tax return
- Copy of recent paycheck stub
- Copy of recent social security benefits statement
- Copy of recent pension statement
- Copy of most recent government aid statement (AFDC, Cal-Fresh, etc.)

2. Documents from the Applicant (only)

- W-9 form (attached)
- Bills showing the Applicant name, amount paid and/or the amount due totaling up to \$2,500.

NOTE: Applicants are encouraged to submit bills that exceed the grant of \$2,500. Applicant’s will not be permitted to submit any bills after the application is submitted. Although, only \$2,500 in bills will be paid by the City, submitting more than \$2,500 will better ensure that the applicant will be paid the full amount of the grant.

The City reserves the right to request additional information upon receiving the application. Applications may be submitted online, by mail or hand delivered to the City of La Habra.

City of La Habra Community Development Department
 Attn: Bill Assistance Program (BAP)- ARPA
 110 East La Habra Boulevard
 La Habra, CA 90631

***PLEASE NOTE – If your application is approved by the City, it will take up to 45 days from the approval date to receive actual funding.**

6.0 ALLOWABLE REQUESTS

Once the review is complete and the applicant is confirmed to be eligible, the City will send an agreement to the applicant. The applicant is required to provide two original copies of the agreement to the City. Upon execution of the agreement, the City will distribute funds to the Applicant via check.

If there is evidence that the grant funds were fraudulently obtained, the applicant shall be required to re-pay a portion of or all of the grant funds to the City.

The City of La Habra and/or its representative will be responsible for the administration of the program:

- Originate grant funds
- Market the grant program
- Accept and process applications
- Review and underwrite grant requests
- Ensure timely disbursement of funds
- Maintain documents and fiscal records
- Administer grants and locally sourced funds used for this program
- Ensure compliance with program guidelines as they relate to the funding sources
- Report program metrics to the City Council, the Department of Treasury and other interested parties.

7.0 RECORD KEEPING AND REPORTING

In accordance with 31 CFR Part 35, the City is responsible for maintaining all documents and records used in its assessment of the eligibility of the bill assistance grant.

8.0 ENVIRONMENTAL REVIEW

NEPA regulations require an Environmental Review Record (ERR) to be submitted for each applicant funded with CDBG monies prior to award or approval of funds. The ERR level of review is based on the type of project proposed.

This review will be completed by the City of La Habra prior to the award of funds.

9. CONFLICT OF INTEREST

In accordance with 2 CFR 200.318(c) (General Procurement Standards), no employee, officer, or agent may participate in the selection, award, or administration of a grant made through this program if he or she has a real or apparent conflict of interest. Such a conflict of interest would arise when the employee, officer, or agent, any member of his or her immediate family, his or her partner, or an organization which employs or is about to employ any of the parties indicated herein, has a financial or other interest in or a tangible personal benefit from a grant provided through this program.

10.0 APPLICANT CONFIDENTIALITY

Employees of the City will not disclose any of the applicant or household member's personal confidential information as part of the grant process. Financial information supplied by the applicant, including but not limited to tax information, personal and business financial account information, and similar data are considered to be confidential. All confidential information of the applicant and household member(s) will only be disclosed to persons required to view the information as part of grant review and approval. All personal and business confidential information of grant applicants will be kept in a locked secured storage facility or password protected electronic files and unavailable to persons outside of the program. At all times the City will abide by all requirements stated within the Privacy Act of 1974 as amended. If the City receives a request for public records related to a grant application, only non-confidential information, as verified by the City Attorney, will be provided.

11.0 EQUAL OPPORTUNITY COMPLIANCE AND DISCRIMINATION

In accordance with the City of La Habra's policies and program guidelines, this program will be implemented in ways consistent with the City's commitment to State and Federal equal opportunity laws. No person or business shall be excluded from participation in, denied the benefit of, or be subjected to discrimination under any program or activity funded in whole or in part with ARPA program funds on the basis of his or her disability, family status, national origin, race, color, religion, sex, marital status, medical condition, ancestry, source of income, age, sexual orientation, gender identity, gender expression, genetic information, or other arbitrary discrimination.

12.0 PROGRAM GUIDELINES CHANGES AND MODIFICATIONS

Minor changes to these Implementation Guidelines involving administrative procedures or accommodations to adapt to unique applicant situations or opportunities, or regulatory changes may be performed with the approval of the Director of Community and Economic Development Director or his/her designee. Federal regulatory requirements for the SLFRF program are not subject to modification or revision.

13.0 APPEALS

Appeals of the determination of the Director of Community and Economic Development or his/her designee shall be made in writing within 15 days to the Planning Commission. The decision of the Planning Commission will be final.

Attachment A - Section 8 Definition of Annual Income - 24 CFR, Part 5, Subpart F (Section 5.609)

§ 5.609 Annual Income.

(a) *Annual income* means all amounts, monetary or not, which:

(1) Go to, or on behalf of, the family head or spouse (even if temporarily absent) or to any other family member; or

(2) Are anticipated to be received from a source outside the family during the 12-month period following admission or annual reexamination effective date; and

(3) Which are not specifically excluded in paragraph (c) of this section.

(4) Annual income also means amounts derived (during the 12-month period) from assets to which any member of the family has access.

(b) Annual income includes, but is not limited to:

(1) The full amount, before any payroll deductions, of wages and salaries, overtime pay, commissions, fees, tips and bonuses, and other compensation for personal services;

(2) The net income from the operation of a business or profession. Expenditures for business expansion or amortization of capital indebtedness shall not be used as deductions in determining net income. An allowance for depreciation of assets used in a business or profession may be deducted, based on straight line depreciation, as provided in Internal Revenue Service regulations. Any withdrawal of cash or assets from the operation of a business or profession will be included in income, except to the extent the withdrawal is reimbursement of cash or assets invested in the operation by the family;

(3) Interest, dividends, and other net income of any kind from real or personal property. Expenditures for amortization of capital indebtedness shall not be used as deductions in determining net income. An allowance for depreciation is permitted only as authorized in paragraph (b)(2) of this section. Any withdrawal of cash or assets from an investment will be included in income, except to the extent the withdrawal is reimbursement of cash or assets invested by the family. Where the family has net family assets in excess of \$5,000, annual income shall include the greater of the actual income derived from all net family assets or a percentage of the value of such assets based on the current passbook savings rate, as determined by HUD;

(4) The full amount of periodic amounts received from Social Security, annuities, insurance policies, retirement funds, pensions, disability or death benefits, and other similar types of periodic receipts, including a lump-sum amount or prospective monthly amounts for the delayed start of a periodic amount (except as provided in paragraph (c)(14) of this section);

(5) Payments in lieu of earnings, such as unemployment and disability compensation, worker's compensation and severance pay (except as provided in paragraph (c)(3) of this section);

(6) *Welfare assistance payments.*

(i) Welfare assistance payments made under the Temporary Assistance for Needy Families (TANF) program are included in annual income only to the extent such payments:

- (A) Qualify as assistance under the TANF program definition at 45 CFR 260.31; and
- (B) Are not otherwise excluded under paragraph (c) of this section.

(ii) If the welfare assistance payment includes an amount specifically designated for shelter and utilities that is subject to adjustment by the welfare assistance agency in accordance with the actual cost of shelter and utilities, the amount of welfare assistance income to be included as income shall consist of:

- (A) The amount of the allowance or grant exclusive of the amount specifically designated for shelter or utilities; plus
- (B) The maximum amount that the welfare assistance agency could in fact allow the family for shelter and utilities. If the family's welfare assistance is ratably reduced from the standard of need by applying a percentage, the amount calculated under this paragraph shall be the amount resulting from one application of the percentage.

(7) Periodic and determinable allowances, such as alimony and child support payments, and regular contributions or gifts received from organizations or from persons not residing in the dwelling;

(8) All regular pay, special pay and allowances of a member of the Armed Forces (except as provided in paragraph (c)(7) of this section).

(9) For section 8 programs only and as provided in 24 CFR 5.612, any financial assistance, in excess of amounts received for tuition, that an individual receives under the Higher Education Act of 1965 (20 U.S.C. 1001 *et seq.*), from private sources, or from an institution of higher education (as defined under the Higher Education Act of 1965 (20 U.S.C. 1002)), shall be considered income to that individual, except that financial assistance described in this paragraph is not considered annual income for persons over the age of 23 with dependent children. For purposes of this paragraph, "financial assistance" does not include loan proceeds for the purpose of determining income.

(c) Annual income does not include the following:

(1) Income from employment of children (including foster children) under the age of 18 years;

(2) Payments received for the care of foster children or foster adults (usually persons with disabilities, unrelated to the tenant family, who are unable to live alone);

(3) Lump-sum additions to family assets, such as inheritances, insurance payments (including payments under health and accident insurance and worker's compensation), capital gains and settlement for personal or property losses (except as provided in paragraph (b)(5) of this section);

(4) Amounts received by the family that are specifically for, or in reimbursement of, the cost of medical expenses for any family member;

(5) Income of a live-in aide, as defined in 24 CFR § 5.403;

(6) Subject to paragraph (b)(9) of this section, the full amount of student financial assistance paid directly to the student or to the educational institution;

(7) The special pay to a family member serving in the Armed Forces who is exposed to hostile fire;

(8) (i) Amounts received under training programs funded by HUD;

(ii) Amounts received by a person with a disability that are disregarded for a limited time for purposes of Supplemental Security Income eligibility and benefits because they are set aside for use under a Plan to Attain Self-Sufficiency (PASS);

(iii) Amounts received by a participant in other publicly assisted programs which are specifically for or in reimbursement of out-of-pocket expenses incurred (special equipment, clothing, transportation, child care, etc.) and which are made solely to allow participation in a specific program;

(iv) Amounts received under a resident service stipend. A resident service stipend is a modest amount (not to exceed \$200 per month) received by a resident for performing a service for the PHA or owner, on a part-time basis, that enhances the quality of life in the development. Such services may include, but are not limited to, fire patrol, hall monitoring, lawn maintenance, resident initiatives coordination, and serving as a member of the PHA's governing board. No resident may receive more than one such stipend during the same period of time;

(v) Incremental earnings and benefits resulting to any family member from participation in qualifying State or local employment training programs (including training programs not affiliated with a local government) and training of a family member as resident management staff. Amounts excluded by this provision must be received under employment training programs with clearly defined goals and objectives, and are excluded only for the period during which the family member participates in the employment training program;

(9) Temporary, nonrecurring or sporadic income (including gifts);

(10) Reparation payments paid by a foreign government pursuant to claims filed under the laws of that government by persons who were persecuted during the Nazi era;

(11) Earnings in excess of \$480 for each full-time student 18 years old or older (excluding the head of household and spouse);

(12) Adoption assistance payments in excess of \$480 per adopted child;

(13) [Reserved]

(14) Deferred periodic amounts from supplemental security income and social security benefits that are received in a lump sum amount or in prospective monthly amounts.

(15) Amounts received by the family in the form of refunds or rebates under State or local law for property taxes paid on the dwelling unit;

(16) Amounts paid by a State agency to a family with a member who has a developmental disability and is living at home to offset the cost of services and equipment needed to keep the developmentally disabled family member at home; or

(17) Amounts specifically excluded by any other Federal statute from consideration as income for purposes of determining eligibility or benefits under a category of assistance programs that includes assistance under any program to which the exclusions set forth in 24 CFR 5.609(c) apply. A notice will be published in the FEDERAL REGISTER and distributed to PHAs and housing owners identifying the benefits that qualify for this exclusion. Updates will be published and distributed when necessary. **[Federally Mandated Exclusions listed below]**

Federally Mandated Exclusions from Annual Income

Following is the list of benefits that currently qualify for this income exclusion. The list includes those relevant exclusions that may be applicable to the IHBG program.

1. The value of the allotment provided to an eligible household under the Food Stamp Act of 1977 (7 U.S.C. 2017(b))
2. Payments to Volunteers under the Domestic Volunteer Service Act of 1973 (42 U.S.C. 5044(f)(l), 5058)
3. Certain payments received under the Alaska Native Claims Settlement Act (43 U.S.C. 1626(c))
4. Income derived from certain submarginal land of the United States that is held in trust for certain Indian tribes (25 U.S.C. 459e)
5. Payments or allowances made under the Department of Health and Human Services' Low-Income Home Energy Assistance Program (42 U.S.C. 8624(f))
6. Income derived from the disposition of funds to the Grand River Band of Ottawa Indians (Pub. L. 94-540, section 6)
7. The first \$2000 of per capita shares received from judgment funds awarded by the Indian Claims Commission or the U.S. Claims Court, the interests of individual Indians in trust or restricted lands, including the first \$2000 per year of income received by individual Indians from funds derived from interests held in such trust or restricted lands (25 U.S.C. 1407)

Please note the recipient may need to examine certain per capita shares to determine whether the proceeds are covered by this provision, such as bingo and gambling proceeds.

Although some gaming funds are called "per capita payments", the National Indian Gaming Commission's General Counsel and the Solicitor's office of the Department of the Interior confirmed that the proceeds of gaming operations regulated by the Commission are not funds that are held in trust by the Secretary for the benefit of an Indian tribe, therefore, they do not qualify as per capita payments within the meaning of the Per Capita Distribution Act.

Also, if a tribal member receives the Form 1099-Misc, Miscellaneous Income, from the tribe for reporting Indian gaming profits, this payment does not qualify for this provision. These gaming profits are income that must be included as annual income as defined by HUD's Section 8 Program, the Census, and the IRS. Further, the tribal member must report this miscellaneous income on the "other income" line of the Federal Income tax 1040 Form;

8. Amounts of scholarships funded under title IV of the Higher Education Act of 1965 (20 U.S.C. 1070), including awards under federal work-study programs or under the Bureau of Indian Affairs student assistance programs (20 U.S.C. 1087uu).
9. Payments received from programs funded under title V of the Older Americans Act of 1965 (42 U.S.C. 3056g)
10. Payments received on or after January 1, 1989, from the Agent Orange Settlement Fund (Pub. L. 101-201) or any other fund established pursuant to the settlement in In Re Agent Orange Liability Litigation, M.D.L. No. 381 (E.D.N.Y.)
11. Payments received under the Maine Indian Claims Settlement Act of 1980 (Pub. L. 96-420, 25 U.S.C. 1721)
12. The value of any child care provided or arranged (or any amount received as payment for such care or reimbursement for costs incurred for such care) under the Child Care and Development Block Grant Act of 1990 (42 U.S.C. 9858q)
13. Payments by the Indian Claims Commission to the Confederated Tribes and Bands of Yakima Indian Nation or the Apache Tribe of Mescalero Reservation (Pub. L. 95-433)
14. Allowances, earnings and payments to AmeriCorps participants under the National and Community Service Act of 1990 (42 U.S.C. 12637(d))
15. Any amount of crime victim compensation (under the Victims of Crime Act) received through crime victim assistance (or payment or reimbursement of the cost of such assistance) as determined under the Victims of Crime Act because of the commission of a crime against the applicant under the Victims of Crime Act (42 U.S.C. 10602(c))
16. Allowances, earnings and payments to individuals participating in programs under the Workforce Investment Act of 1998 (29 U.S.C. 2931(a)(2))
17. Any amount received under the Richard B. Russell School Lunch Act (42 U.S.C.1760(e)) and the Child Nutrition Act of 1966 (42 U.S.C. 1780(b)), including reduced-price lunches and food under

the Special Supplemental Food Program for Women, Infants, and Children (WIC)

18. Payments, funds, or distributions authorized, established, or directed by the Seneca Nation Settlement Act of 1990 (25 U.S.C. 1774f(b))
19. Payments from any deferred Department of Veterans Affairs disability benefits that are received in a lump sum amount or in prospective monthly amounts as provided by an amendment to the definition of annual income in the U.S. Housing Act of 1937 (42 U.S.C. 1437A) by section 2608 of the Housing and Economic Recovery Act of 2008 (Pub. L. 110- 289). This exclusion will apply when an IHBG recipient adopts the Section 8 definition of annual income.
20. A lump sum or a periodic payment received by an individual Indian pursuant to the Class Action Settlement Agreement in the case entitled *Elouise Cobell et al. v. Ken Salazar et al.*, 816 F. Supp. 2d 10 (Oct. 5, 2011 D.D.C.), as provided in the Claims Resolution Act of 2010 (Pub. L. 111-291). This exclusion will apply for one year from the time that payment is received.
21. Major disaster and emergency assistance received by individuals and families under the Robert T. Stafford Disaster Relief and Emergency Assistance Act (Pub. L. 93-288, as amended) comparable disaster assistance provided by States, local governments, and disaster assistance organizations shall not be considered as income or a resource when determining eligibility for or benefit levels under federally funded income assistance or resource-tested benefit programs (42 U.S.C. 5155(d)).





CITY OF LA HABRA

BILL ASSISTANCE PROGRAM (BAP) AMERICAN RESCUE PLAN ACT (ARPA) APPLICATION

REQUIRED DOCUMENTS APPLICATION SUPPORT DOCUMENT CHECKLIST

THE FOLLOWING DOCUMENTS MUST BE PROVIDED WITH THE APPLICATION.

If any of these documents are missing, your application will be rejected.

Applicants will be required to complete an initial application, including a copy of the following documents:

1. Documents for all persons in the household who are 18 years of age and older

- Copy of State ID/ Driver's license
- 2021 federal income tax return (all pages – all schedules). If not filed, 12 months of personal bank statements (January 1, 2021 through December 31, 2021).
- Birth Certificate for newborns that are not listed on the 2021 federal income tax return
- Copy of recent paycheck stub
- Copy of recent social security benefits statement
- Copy of recent pension statement
- Copy of most recent government aid statement (AFDC, Cal-Fresh, etc.)
- Sole Proprietor
 - 2021 business tax return
 - 2022 profit and loss statement

2. Documents from the Applicant (only)

- W-9 form (attached)
- Bills showing the Applicant name, amount paid and/or the amount due totaling at least \$2,500.

NOTE: Applicants are encouraged to submit bills that exceed the grant of \$2,500. Applicant's will not be permitted to submit any bills after the application is submitted. Although, only \$2,500 in bills will be paid by the City, submitting more than \$2,500 will better ensure that the applicant will be paid the full amount of the grant.





City of La Habra
Bill Assistance Program (BAP) – American Rescue Plan Act (ARPA)

APPLICATION

PROGRAM DESCRIPTION

The City of La Habra is offering a one-time grant to current residents of the City of La Habra for the payment of bills in the name of the Applicant **ONLY** that are either paid within 30 days prior to the date the applicant is submitted or due within 30 days after the date of the submittal of the application. One grant is provided for each residential property address and applicant. Eligible households must currently live in the City of La Habra city limits and have a household income at or below 65% of the area median income, adjusted for household size as follows:

| No. Persons in Household | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 |
|--------------------------|----------|----------|----------|----------|----------|-----------|-----------|-----------|
| Maximum Income | \$61,500 | \$70,450 | \$79,300 | \$88,100 | \$95,150 | \$102,200 | \$109,250 | \$116,300 |

APPLICANT

Name: _____

Address: *Street:* _____

City: _____ *State:* _____ *Zip Code:* _____

CONTACT INFORMATION

Telephone: () _____ Email: _____

QUESTIONNAIRE

Please answer the questions below. The answers will determine if you are eligible to apply for the program.

| | Yes | No | <i>Check the appropriate box next to each question.</i> |
|--|--------------------------|--------------------------|--|
| Do you currently live in the City of La Habra? | <input type="checkbox"/> | <input type="checkbox"/> | If you answered NO, STOP HERE you are not qualified. |
| Is your combined household income for all persons 18 years of age and older at or below the income shown in the chart above? | <input type="checkbox"/> | <input type="checkbox"/> | If you answered NO, STOP HERE you are not qualified. |
| Do you or any member of your household (family) have a conflict of interest? | <input type="checkbox"/> | <input type="checkbox"/> | If you answered YES, STOP HERE you are not qualified. Refer to conflict of interest statement in the box below. |

Conflict of Interest - Applicants for bill assistance shall not be an employee, agent, consultant, officer or elected official or appointed official of the City who exercises or have exercised any function or responsibilities with respect to activities relating to this Program or who are in a position to participate in a decision-making process or gain inside information with regard to these activities, may obtain a financial interest or financial benefit from this Program, or the proceeds from such activity, either for themselves or those with whom they have business or immediate family ties, during their tenure or for one year thereafter.

HOUSEHOLD COMPOSITION

List all persons who live in your home at the time of application, including applicant. Give the relationship of each family member to the head of household.

| Member No. | Full Name of Family Member | Relationship | Date of Birth | SS # | Working | Retired | Disabled |
|------------|----------------------------|--------------|---------------|------|--------------------------|--------------------------|--------------------------|
| 1 | | | | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 2 | | | | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 3 | | | | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 4 | | | | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 5 | | | | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 6 | | | | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 7 | | | | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 8 | | | | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

Please check the ethnic group which describes your household (optional):

- | | | |
|--|---|--|
| <input type="checkbox"/> White | <input type="checkbox"/> Black/African American | <input type="checkbox"/> Native Hawaiian/Other Pac Islander |
| <input type="checkbox"/> Asian | <input type="checkbox"/> American Indian/Alaskan Native | <input type="checkbox"/> American Indian/Alaskan Native & Black/African American |
| <input type="checkbox"/> Asian & White | <input type="checkbox"/> Black/African American & White | <input type="checkbox"/> American Indian/Alaskan Native & White |
| | | <input type="checkbox"/> Hispanic |
| | | <input type="checkbox"/> Non-Hispanic |

GROSS MONTHLY

| INCOME SOURCE <small>(All persons 18 years of age and older)</small> | APPLICANT | Member 2 | Member 3 | Member 4 | Member 5 | TOTAL <small>(Add all income in the row)</small> |
|--|-----------|----------|----------|----------|----------|---|
| Wages from employer | \$ | \$ | \$ | \$ | \$ | \$ |
| Social Security | \$ | \$ | \$ | \$ | \$ | \$ |
| Disability | \$ | \$ | \$ | \$ | \$ | \$ |
| Retirement <small>(401K distributions etc.)</small> | \$ | \$ | \$ | \$ | \$ | \$ |
| Pension | \$ | \$ | \$ | \$ | \$ | \$ |
| Interest From Savings, CD's, Bonds, Stocks, etc. | \$ | \$ | \$ | \$ | \$ | \$ |
| Alimony | \$ | \$ | \$ | \$ | \$ | \$ |
| Child Support | \$ | \$ | \$ | \$ | \$ | \$ |
| Foster Care | \$ | \$ | \$ | \$ | \$ | \$ |
| Rental Income | \$ | \$ | \$ | \$ | \$ | \$ |
| Unemployment | \$ | \$ | \$ | \$ | \$ | \$ |
| AFDC | \$ | \$ | \$ | \$ | \$ | \$ |
| Other: | \$ | \$ | \$ | \$ | \$ | \$ |
| TOTAL GROSS MONTHLY HOUSEHOLD INCOME: <small>(Add all MONTHLY income above together)</small> | | | | | | \$ |
| | | | | | | x 12 |
| TOTAL ANNUAL INCOME: | | | | | | \$ |

ACKNOWLEDGMENT, AGREEMENT AND CERTIFICATION

IMPORTANT - READ BEFORE SIGNING:

Right to Financial Privacy - This is a notice to you, as required by the Right to Financial Privacy Act of 1978, that the City of La Habra or its agents or designees have a right of access to financial records held by any financial institution in connection with the consideration or administration of the Bill Assistance Program for which you have applied. Financial will be available to the City of La Habra, federal oversight agencies such as the Department of Treasury, the City of La Habra’s agents or designees without further notice or authorization but will not be disclosed or released to another Government agency or department without your consent except as required or permitted by law.

Reimbursement Documentation – Only receipts or other evidence of bills that you are requesting reimbursement for submitted as part of this application will be used to calculate your total grant. Additional receipts will not be accepted after your application is submitted.

Acknowledgment - I/We understand that this grant is being provided by the City of La Habra based solely upon the information that you have provided in this application.

I/We acknowledge that a material misstatement or omission made by me/us in any statement or application by me/us in connection with my/our application for the City of La Habra Bill Assistance Program funded through Coronavirus State and Local Fiscal Recovery Funds (SLFRF) funds will be grounds (at the discretion of the City) for immediate revocation by the City of the grant made to me/us in conjunction with the Bill Assistance Program and will result in the immediate demand for repayment of all grant funds provided conjunction with the City of La Habra Bill Assistance Program.

In addition, I/we hereby acknowledge and understand that any false pretense, including any false statement or representation; or the fraudulent use of any instrument, facility, article, or other valuable item or service pursuant to my/our participation in any programs(s) administered by the City, may be subject to both civil and criminal prosecution and immediate disqualification from the City's Bill Assistance Program.

Certifications - I/We certify that the information provided in this application is true and complete to the best of my knowledge as of the date set forth opposite my/our signature(s) in this application and acknowledge my/our understanding that any intentional or negligent misrepresentation(s) of the information contained in this application may result in civil liability and/or criminal penalties.

I/We certify that I/we have read and understood the provisions in this document and that I/we wish to proceed with the application for the City of La Habra Bill Assistance Program.

By signing below, I certify that the above statements are true and correct to the best of my knowledge. I understand that a false statement may disqualify me from benefits.

Name of Person Signing

Signature

Date

Name of Person Signing

Signature

Date

Name of Person Signing

Signature

Date

Name of Person Signing

Signature

Date

Name of Person Signing

Signature

Date