

Town of Chesapeake Beach, Maryland
Residential Application
Bay Restoration Fee Financial Hardship Exemption

On May 26, 2004, Senate Bill 320 was signed into law, creating the Bay Restoration Fund (“BRF”). The purpose of the bill was to create a dedicated fund financed by wastewater treatment plant users to be used to upgrade Maryland’s wastewater treatment plants with enhanced nutrient removal (ENR) technology. On July 1, 2012, House Bill 446 increased the mandated BRF fee from \$2.50 per month to \$5.00 per month, and required that BRF fee billing authorities develop a financial hardship fee waiver plan for low income households.

Residents of the Town of Chesapeake Beach may apply directly to the Town for an exemption from the fee due to substantial financial hardship. Exemptions are valid for a one year period. Applicants may reapply annually.

Mail completed application along with all supporting documents to:

Town of Chesapeake Beach
Attn: Town Treasurer
P.O. Box 400
Chesapeake Beach, MD 20732

Eligibility:

Proof of residency must be provided by supplying (1) A copy of applicant’s photo identification, **and** (2) a copy of tax bill, current utility bill, or executed lease.

To be eligible for the hardship exemption, you **must** meet at least two of the following conditions.

- Receive energy assistance subsidy. Confirmation on official letterhead is required.
- Receive public assistance - supplemental security income (SSI) or food stamps. Confirmation on official letterhead is required.
- Receive veterans or social security disability benefits. Confirmation on official letterhead is required.
- Meet the income criteria established by the Maryland Department of Human Resources/Office of Home Energy Programs. A copy of the tax return you filed for the prior calendar year is required.

Income Eligibility Limits
Effective July 1, 2012 – June 30, 2013

Household Size	Maximum Gross Monthly Income Standards	Maximum Gross Yearly Income Standards
1	\$1,628.95	\$19,547.50
2	\$2,206.45	\$26,477.50
3	\$2,783.95	\$33,407.50
4	\$3,361.45	\$40,337.50
5	\$3,938.95	\$47,267.50
6	\$4,516.45	\$54,197.50
For each additional person, add	\$577.50	\$6,930.00

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Applicant: _____

Address: _____

City: _____ State: _____ Zip Code: _____

I understand that, if approved, this exemption will apply to the property in which I am living, as identified on the application, and that it will be valid for 12 months from the date of approval. I further understand that this exemption expires in 12 months, and that it is my responsibility to submit an application and the required supporting documentation on an annual basis.

UNDER PENALTIES OF PERJURY, I DECLARE THAT I HAVE PREPARED AND EXAMINED THIS APPLICATION, AND TO THE BEST OF MY KNOWLEDGE AND BELIEF, IT IS TRUE, CORRECT, AND COMPLETE.

Print Name

Signature

Date

For official use only:

Exemption Approved Not Approved (circle one)

By: _____ Date: _____

Printed Name: _____

Title: _____