

City of Alvin

Application for 100% Disabled Veteran's Exemption for EMS Fees

GENERAL INSTRUCTIONS: This application is for use in claiming an exemption from the City of Alvin EMS fee for account holders by a 100% Disabled Veteran with a service connected disability. A qualified account holder is entitled to an exemption of one property the account holder designates. This application applies to address of the account holder from the date of the application.

FILING INSTRUCTIONS: Each account holder must furnish all information and documentation required by this application to determine whether the qualifications for the EMS fee exemption have been met. This document and all supporting documentation must be filed with the City of Alvin Utility Billing office' located at 216 W. Sealy Street, Alvin, Texas, 77511. Do not file this document with the County, or any other agency as it only relates to the City of Alvin Emergency Medical Services department.

APPLICATION REQUIREMENTS: The completed application and supporting documents must be submitted to the City of Alvin and is effective from the date of submittal. An application must be submitted by the account holder who is a 100% disabled veteran with a rating designated as such. A qualified account holder is entitled to the EMS fee waiver of one property the account holder applicant owns or resides at. The exemption will apply to all members who have verification that they reside at the address. The application is effective the day is it submitted and cannot be retroactively backdated. For mailed in, emailed, and faxed applications, the date sent or submitted shall be used as the application date. If that day is on a holiday, or a non-City business day, then the date used for the application will be the next business day. The application must be furnished with all information and documentation required so the City staff can determine whether the exemption requirements have been met. This information must be submitted with the application to the City of Alvin Utility Billing Department. Exemption forms that are incomplete must be resubmitted. Missing, incomplete or inaccurate forms will delay the processing and a new date will be used when all of the required documentation has been received. Once this exemption is allowed, an application does not have to be filed again unless the account holder changes or the qualifications for the exemption change.

DUTY TO NOTIFY: The City of Alvin may require a new application to be filed to confirm current eligibility. If eligibility ends or changes, the account holder must notify the City of Alvin in writing as soon as possible. The City may retroactively adjust the waiver in the event the account owner fails to notify the City and the change has occurred for more than 30 days.

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SECTION 1: Property Owner/Applicant

Name of Account Holder _____

Driver's License, Personal I.D. Certificate or Social Security Number _____

Physical Address, City, State, ZIP Code _____

Phone Number *(include area code)* _____

Email Address _____

Mailing Address of Account Holder (if different): _____

Section 2: Type of Exemption and Qualifications

Veteran's Name (account holder) _____

Disability Rating (must be 100 to qualify) _____ (attach letter)

Names of members residing at the address with the account holder:

SECTION 3: Certification and Signature

NOTICE REGARDING PENALTIES FOR MAKING OR FILING AN APPLICATION CONTAINING A FALSE STATEMENT: If you make a false statement on this form, you could be found guilty of a Class A misdemeanor or a state jail felony.

I, _____ (**printed name** of account holder), swear or affirm the following:

1. that each fact contained in this application is true and correct;
2. that the account holder identified in this application meets the qualifications; and
3. that I have read and understand the Notice Regarding Penalties for Making or Filing an Application Containing a False Statement.

**sign
here** ➔

Signature of Account Holder or Authorized Representative

Date

Submit to: City of Alvin
Utility Billing Department
216 W. Sealy Street
Alvin, Texas 77511

or

Email: utilitybilling@cityofalvin.com
Fax: 281-388-7215