



CLEAN START

SEWER PROGRAM

APPLICANT *(Must own and occupy the home)* _____

Service Address _____ **City** Hattiesburg **State** MS **Zip** _____

Mailing Address *(if different from above)* _____ **City** _____ **State** _____ **Zip** _____

Phone _____ **Birthdate** _____

HOUSEHOLD MEMBERS List ALL other persons living in the home. Do not include yourself. *Continue list on back if needed.*

Name	Birthday	Relationship to Applicant

INCOME Eligibility is based on the total GROSS income for ALL household members. Check each type of income that you and anyone living in your home currently receive. Then list the income in the blanks below.

- Wages/Salary/Tips
- Retirement/Pension
- Unemployment
- Interest Income
- Social Security
- Alimony/Child Support
- Workers' Comp
- Rental Income
- Disability
- Self-employment
- Sick Park
- Cash Assistance
- Veterans Benefits
- Railroad Benefits
- Military Allotment
- Other *(explain below)*

Household Member Receiving Income	Source of Income	Monthly Amount

DOCUMENTATION Submit the following documents with this application. Proof of income is required for ALL household members. Provide a written explanation for adults with no income.

- Proof of Income**
 - Copy of recent IRS income tax return and all applicable documents/schedules
- OR -
 - Recent annual Social Security Benefits Statement
- OR -
 - Three most recent consecutive months of income source documentation that lists GROSS income (Bank statements are not considered acceptable documentation since they do not specify gross or net income.)
- Copy of Property Deed** in the applicant's name
- Property Tax Receipt** Not to be confused with a personal property tax receipt (vehicle), a property tax receipt will show that the taxes on your home are paid in full.
- If applicable, Heir Property or 16th Section Land Lease holders (Proof of Residency)

Describe any known issues with the sewer service line at this location:

CERTIFICATION My signature below certifies that I understand the following:

- I own and occupy the property as my primary residence, or otherwise eligible as defined by the program's owner eligibility requirements.
- The City vendor must determine the service line is defective and in need of repair or replacement.
- By failing to provide proof of income for all household members, a property deed, and property tax receipt, my application is incomplete and shall be considered ineligible.
- If approved, the program will only cover the costs outlined in the contract fee schedule. Landscaping and site redressing are not covered.

Applicant Signature

Date

This project is undertaken in connection with the settlement of an enforcement action, United States et al. v. City of Hattiesburg, taken on behalf of the U.S. Environmental Protection Agency and the Mississippi Department of Environmental Quality to enforce the Clean Water Act and the Mississippi Air and Water Pollution Control Law.

CONTACT US

For questions or assistance, please call (601) 545-4640. The application and attachments may be submitted by:

MAIL

Engineering Department
ATTN: Clean Start Hattiesburg
P.O. Box 1898
Hattiesburg, MS 39403-1898

IN PERSON

Engineering Department
212 W Front St
Hattiesburg, MS 39401

EMAIL

cleanstartSEP@hattiesburgms.com