



**WAKULLA COUNTY  
PLANNING & COMMUNITY DEVELOPMENT**

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**APPLICATION FOR HARDSHIP ASSISTANCE  
FISCAL YEAR 2012-2013  
EXEMPTION OF THE PERFORMANCE-BASED  
SEPTIC SYSTEM REQUIREMENTS**

(PLEASE READ THE ENTIRE APPLICATION FORM CAREFULLY BEFORE SIGNING.)

AUTHORITY

In accordance with Policy 1.3.1 of the Infrastructure Element of the Wakulla County Comprehensive Growth Management Plan and Wakulla County Resolution Number 07-44, the County has created a Hardship Assistance Program to assist residential property owners, who meet the eligibility criteria, with the financial burden created by the imposition of the above referenced Performance-Based Septic System requirements.

REQUIRED INFORMATION

In order to apply for hardship assistance for an exemption to the Performance-Based Septic System requirements under Fiscal Year 2012-13, the applicant shall file with the County this application, under oath, which provides the following required information necessary to demonstrate entitlement to hardship assistance (PLEASE PRINT CLEARLY):

To qualify for Hardship Assistance:

- (1) The accumulated Gross Income of all lawful occupants of the property shall be less than or equal to 50% of the 2012 Income Limits Documentation System established by the U.S. Department of Housing and Urban Development, as adjusted for family size (see chart below):

<b>Very Low (50%) Income Limits</b>	1 Person	2 Person	3 Person	4 Person	5 Person	6 Person	7 Person	8 Person
	\$21,950	\$25,100	\$28,250	\$31,350	\$33,900	\$36,400	\$38,900	\$41,400

- (2) Prior to granting the exemption of the hardship assistance, the applicant shall file with the County Administrator, or his designee, an application under oath demonstrating entitlement to hardship assistance. Such application shall include the following:

- 1. Name and address of all Owners of the Property:

Owner Name: \_\_\_\_\_ Owner Address: \_\_\_\_\_  
Owner Name: \_\_\_\_\_ Owner Address: \_\_\_\_\_

- 2. Telephone Number, Property Physical Address and Tax Parcel ID #

Telephone Number: \_\_\_\_\_  
Property Physical Address: \_\_\_\_\_  
Tax Parcel ID #: \_\_\_\_\_

3. Name of all occupants of the residential property, including all dependents giving their names, addresses, ages, relationships and employment:

Occupant 1: \_\_\_\_\_

Occupant 2: \_\_\_\_\_

Occupant 3: \_\_\_\_\_

Occupant 4: \_\_\_\_\_

Occupant 5: \_\_\_\_\_

4. Proof of the cumulative gross income of all occupants 18 years of age and older of the residential property. Substantive documentation must include: Pay Stubs, Unemployment Income, Social Security Income Statements, AFDC Benefit Statement, or IRS Income Tax Returns. Applications submitted without proper documentation may be denied.
5. By signing below, owners indicate that they are entitled to the hardship assistance.
6. The applicant shall furnish such other information relating to the application as may be reasonably requested.

**APPROVAL PROCEDURE**

Eligibility for hardship assistance will be submitted to the County Administrator, or his designee, and a determination will be based upon the attached information. The County Administrator, or his designee, may grant an exemption to the Performance-Based Septic System requirements for a parcel of residential property whose Owner satisfactorily demonstrates by affidavit that the criteria is met.

**AFFIDAVIT**  
**APPLICANT CERTIFICATION**

All information provided in this application is true and complete to the best of my knowledge and belief. I/We consent to the disclosure of such information for the purpose of income verification related to my/our application for financial assistance. I/We understand that any willful misstatement of material fact will be grounds for disqualification. The applicant(s) understand(s) that the information provided is needed to determine assistance eligibility and in no way assures qualification for assistance. I/We are aware that all information and documents provided in this application are a matter of public record.

\_\_\_\_\_  
Owner Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Owner Signature

\_\_\_\_\_  
Date

**SUBMIT COMPLETED APPLICATION and SUPPORTING DOCUMENTS TO:**

Wakulla County Board of County Commissioners  
Attn: Planning and Community Development  
3093 Crawfordville Highway  
Crawfordville, FL 32327  
(850) 926-3695

Or by email to Melissa Corbett, [mcorbett@mywakulla.com](mailto:mcorbett@mywakulla.com)