



SISKIYOU COUNTY
COMMUNITY DEVELOPMENT DEPARTMENT
806 South Main Street, Yreka CA 96097
530-841-2100

Application for Waiver of Deposit (Non-Cannabis Citation)

This optional application is to request a waiver of the deposit required for a hearing on an administrative citation. This application must be received by the Community Development Department no later than seven (7) days from the date of the citation and with the Request for Hearing.

Name: _____ Phone No.: _____ E-mail: _____

Mailing Address: _____

Citation Number: _____ Citation Amount: \$ _____ Issuance Date: _____

I declare that I am financially unable to make the advance deposit. My family's total _____ weekly, _____ monthly _____ annual (check one) gross income is \$ _____ and my family's size is _____, including myself. **I have reviewed the income guidelines on page two and have included documentation** to establish my eligibility for the waiver.

I certify (or declare) under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Signature: _____ Date: _____

If the Waiver Is Denied, You Have Seven Days from Notification of the Denial to Deposit the Necessary Amount.

Mail, or deliver, this form, supporting documentation and the request for a hearing to:

County of Siskiyou
Community Development Department
806 South Main Street
Yreka, CA 96097

For use by the Community Development Department Only

Received _____ or post-marked _____

- Deposit waiver granted.
 Deposit waiver denied because... application untimely income does not qualify.

Income Documentation and Guidelines

Documentation

You are required to attach any documentation to establish your claims such as:

- Federal Income Tax Return
- Verification of Social Security Benefits
- Verification of Supplemental Security Income
- Welfare or General Assistance eligibility Notice of Action/Income Verification
- Documentation of Unemployment from Employment Development Department

Income Guidelines

The County uses the [HUD levels of Very Low Income Limits](#) for Siskiyou County to determine eligibility for the waiver.

Persons in Family Annual Income

1	\$20,900
2	\$23,900
3	\$26,900
4	\$29,850
5	\$32,250
6	\$34,650
7	\$37,050
8	\$39,450