



Town of Barnstable  
 Transfer Station & Recycling Center  
 July 1, 2017-June 30, 2018  
 Financial Aid Application  
 Low Income Stickers \$72

PLEASE PRINT

_____		_____	
Applicant's Name		Date	
_____		_____	_____
Street		PO Box	Village Zip Code
_____	_____	_____	_____
Village	Zip Code	Phone Number	

Please list **ALL** persons living in this household and their ages- INCLUDING APPLICANT

Applicant name	App age	Name	age
_____	_____	_____	_____
_____	_____	_____	_____

**Applicants must submit a copy of their 2016 FEDERAL INCOME TAX RETURN with any other documentation evidencing assistance currently receiving. All information will be kept confidential.**

GROSS INCOME FOR ALL PERSONS IN HOUSEHOLD

Wages from employment	\$ _____ weekly/monthly
Social Security	\$ _____ weekly/monthly
Social Security Disability	\$ _____ weekly/monthly
Veterans Benefits	\$ _____ weekly/monthly
Pensions	\$ _____ weekly/monthly
Unemployment Benefits	\$ _____ weekly/monthly
Retirements/ Investment Income	\$ _____ weekly/monthly
Food Stamps	\$ _____ weekly/monthly
Housing Assistance	\$ _____ weekly/monthly
Aid to family with dependent children	\$ _____ weekly/monthly
Other _____	\$ _____ weekly/monthly
<b>Total Income</b>	\$ _____ Weekly/Monthly

**\*This application will not be processed unless information above is completed and all documents requested are attached.\***

**\*PLEASE ENCLOSE A VALID REGISTRATION FOR THE VEHICLE WHICH THIS STICKER IS BEING PURCHASED.**

If your car is not registered in Barnstable or is registered to a post office box, you must provide a copy of a tax bill, deed or rental agreement showing your name linked to your Barnstable address with a copy of your current vehicle registration.

If your vehicle is leased, you need a copy of the first page of your lease agreement where your name is linked to this vehicle, registration and proof of residency.

If your vehicle is registered to a business, please include a letter of authorization from the business for personal use of the vehicle or a paystub or business card with company name and your name, registration and proof of residency.

For additional information, please contact the Barnstable Transfer Station at 508-420-2258.

**\*\*Please sign:**

I attest, under penalty of perjury, that the documents attached are genuine and that all information provided is accurate and reflective of my current existing financial situation, and that all sources of income are accounted for herein.

\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_  
Date

**Completed applications are accepted at the  
Barnstable Transfer Station  
Monday through Friday  
7:30am -3:30pm ONLY.**

**Or you may mail your application to:  
Barnstable Transfer Station  
45 Flint Street  
Marstons Mills, Ma 02648**

Applicants will be notified by mail within two to three weeks of receipt of completed application.