

### SAN LEANDRO UNIFIED SCHOOL DISTRICT: MEASURE I Social Security Disability Insurance (SSDI) or supplemental security income (ssi) Exemption Information <u>For Tax Year 2024-25</u>

### For Owner-Occupants Receiving SSDI/SSI

**NOTICE TO ELIGIBLE HOMEOWNERS RECEIVING SSDI or SSI OF June 30, 2024:** Under the provisions of the Measure I Parcel Tax approved by the voters on November 6, 2018, homeowners receiving SSDI who meet the income requirements, may request an exemption from the parcel tax.

# How to Apply for the Measure I SSDI Citizen Exemption

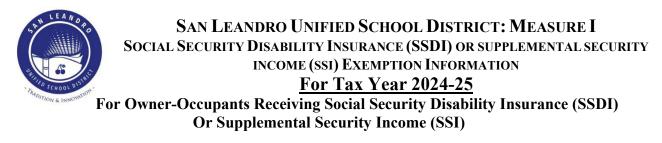
- Complete the Measure I SSDI Exemption Application and include all the following documentation (copies only):
  - Proof of ownership (2023-2024 tax bill)
  - Proof of residence (*electric or cable bill*)
  - Copy of your most recent Form 1040 (IRS Form)
  - Copy of Benefits Verification Letter (A Benefits Verification Letter may be obtained by calling the Social Security Administration at (800) 772-1213 or by visiting a local Social Security Administration Office.)

## How to Apply for the Measure I SSI Exemption

- Complete the Measure I SSI Exemption Application and include all the following documentation (copies only):
  - o Proof of ownership (2023-2024 tax bill)
  - Proof of residence (*electric or cable bill*)
  - Copy of Benefits Verification Letter (A Benefits Verification Letter may be obtained by calling the Social Security Administration at (800) 772-1213 or by visiting a local Social Security Administration Office.)
- Completed applications and required documents are due by <u>June 30, 2024:</u>
  - Mail to: Measure I Exemption, c/o Parcel Tax Administrator, 4745 Mangels Blvd, Fairfield, CA 94534.
  - Email to: Email address: <u>exemptions@sci-cg.com</u>; Subject: Measure I Exemption; or
  - Fax to: Measure I Exemption, c/o Parcel Tax Administrator, (707) 430-4319.

#### NOTE: You may be asked to re-verify your eligibility status once approved.

If you purchase a different home within the district, you must re-file for the SSDI exemption for the new property. Any changes in the SSDI eligibility must be reported to the school district.



An **SSDI or SSI** Exemption from Measure I may be granted to property owners who receive **Social Security Disability Insurance (SSDI) or Supplemental Security Income** regardless of age, who own and reside at the property for which the exemption is claimed. **SSDI** recipient's annual income may not exceed 250% of the 2023 Federal Poverty Guidelines issued by the United States Department of Health and Human Services. If you would like to apply for this exemption, please complete and return the application and verifications of ownership, residence, **SSDI or SSI** and income information by **June 30, 2024** to **Measure I Exemption.** 

**4745 Mangels Blvd. Fairfield. CA 94534.** or by email to: **exemptions@sci-cg.com**, or by fax to (707) **430-4319**. **NOTE:** You may be asked to re-verify your eligibility status once approved.

	SSDI (	Guidelines		
2023 Poverty G	uidelines for the 48 Co	ntiguous State	s and District of	f Columbia
Persons in Fami	ly/Household Pover	ty Guideline	250% of 2023	3 Guideline
1		\$14,580	\$36,	450
2		\$19,720	\$49,	300
3		\$24,860	\$62,	150
4		\$30,000	\$82,	000
5		\$35,140	\$96.	635
6		\$40,280	\$110	,770
7	¢,	\$45,420	\$124	,905
Street Address: Assessor's Parcel Number Email Address (optional):	:	P	none:	
Is the address your princip Total annual income: Januar	INCOME IN	NFORMATION		
Total number of family mem Under penalty of perjury, verifications of residence, So my knowledge.	I hereby declare that	this application	on for exemptio	
Signature of Applicant or DesigneeDate				
Required documents: <u>Ownership Verification</u>	<b>Residence Verificat</b>	<u>ion SSDL/</u> Verific		<u>SSDI Income</u> Verification
□2023-2024 Property Tax Bill	□Electric/Cable Bil	1 🗆 Bene	fits Letter	□Copy of most recent Form 1040

If you have questions about this form or Measure I, please contact the Parcel Tax Administrator by phone at (844) 332-0549 or email at exemptions@sci-cg.com.