



ST. TAMMANY PARISH  
PATRICIA P. BRISTER  
PARISH PRESIDENT

**PARISH TRANSPORTATION AND DRAINAGE IMPACT FEES  
ADMINISTRATIVE APPLICATION FOR FEE EXEMPTION REQUEST**

Property owners that are considered at the very lowest level of household income pursuant to the Housing and Urban Development's (HUD'S) income threshold limits, are eligible to qualify for an exemption of the Parish's Transportation and Drainage Impact Fees.

The following items are required to be submitted in order to make application for a request for an exemption of the impact fees:

- a.) A cover letter from the property owner requesting the exemption and the reasons why the exemption of the impact fees are needed.  
*(A standard form cover letter is attached for your convenience and use.)*
- b.) An affidavit declaring who in the household will be income producers, and the names of those persons whom shall reside in the home.  
*(A standard form affidavit is attached for your convenience and use.)*
- c.) Proof of income from all sources for all income producers residing in the new residence is required to be remitted in order determine income level status. The applicant shall submit, in order of priority, the following documentation to prove current income level status:
  - A copy of the ***two (2) most recent paycheck stubs***.
  - If paycheck stubs are not available, a ***letter from the employers payroll agent*** is required to be submitted stating current yearly gross income to date.
  - ***If self-employed***, a letter from your accountant stating current yearly gross income to date; an affidavit stating gross income for the current year to date; or lastly, a copy of your most recent 1099 form filed with the IRS.
  - ***If currently unemployed***, A W-2 form from the previous year earnings, or a copy of the most recent Federal Income Tax Filing Form.
  - ***If on social security***, a signed letter from the Social Security Office stating monthly or yearly gross income benefits.
  - ***If on a pension***, documentation stating monthly or annual gross income benefits.

**PLEASE ALLOW ONE (1) TO FIVE (5) BUSINESS DAYS FOR US TO REVIEW THE APPLICATION AND RENDER A DECISION FOR THE IMPACT FEE EXEMPTION. IF YOU HAVE ANY QUESTIONS, PLEASE CALL US AT 985-898-2529.**

Date: \_\_\_\_\_

Mr. Ron Keller and/or Helen Lambert  
St. Tammany Parish Department of Development  
P.O. Box 628  
Covington, LA 70434

Re: Request for An Exemption of the Parish's Transportation and Drainage Impact Fees

Dear Mr. Keller:

I \_\_\_\_\_, being the owner of the property located at \_\_\_\_\_ am  
petitioning the Parish to request an exemption of the parish's impact fees due to the following reasons:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Please find attached the documentation requested for determining whether I can qualify for the impact fee exemption. Please advise me as soon as possible regarding said exemption request.

If you have any questions, please call me at \_\_\_\_\_.  
(Phone Number)

Sincerely,

\_\_\_\_\_  
(Signature)

\_\_\_\_\_  
(Print Name)

\_\_\_\_\_  
(Street or P.O. Box Mailing Address - Print)

\_\_\_\_\_  
(City, State & Zip Code - Print)

**AFFIDAVIT**

I, \_\_\_\_\_, hereby declare that there shall be a total of \_\_\_\_ persons residing in my new residence at \_\_\_\_\_  
(Mailing Address, *or Street location*) (City) (State) (Zip Code)

Their names and income status are as follows (*also include your name on the lines below*):

\_\_\_\_\_  
(First Name) (Middle Initial) (Last Name) Income producer: Yes \_\_\_ No \_\_\_

\_\_\_\_\_  
(First Name) (Middle Initial) (Last Name) Income producer: Yes \_\_\_ No \_\_\_

\_\_\_\_\_  
(First Name) (Middle Initial) (Last Name) Income producer: Yes \_\_\_ No \_\_\_

\_\_\_\_\_  
(First Name) (Middle Initial) (Last Name) Income producer: Yes \_\_\_ No \_\_\_

\_\_\_\_\_  
(First Name) (Middle Initial) (Last Name) Income producer: Yes \_\_\_ No \_\_\_

\_\_\_\_\_  
(First Name) (Middle Initial) (Last Name) Income producer: Yes \_\_\_ No \_\_\_

I further declare that I have attached all relevant documentation requested for all forms of income for each income producer, including myself, that will reside in my new residence.

My current address is: \_\_\_\_\_  
(Mailing Address) (City) (State) (Zip Code)

\_\_\_\_\_  
SIGNATURE DATE

I, Notary, hereby certify that the above sworn statement was duly taken and subscribed in my presence on this \_\_\_\_\_ day of \_\_\_\_\_, in the year \_\_\_\_\_.

\_\_\_\_\_  
NOTARY PUBLIC