Fire Service Fee Hardship Exemption Request

Year _____ Ticket # _____ Acc.# _____ Date _____

Name of Property Owner: _____

Mailing Address: _____

City, State, Zip Code: _____

Phone number: _____

Present this form along with at least two months of income verification for all the members that live in the household to:

Sheriff of Randolph County

4 Randolph Ave, Suite 100

Elkins WV 26241

Income guidelines: How many live in the household _____

# of persons in household	125% Poverty Guidelines	Monthly Income
1	$16,988.00	$1,416.00
2	$22,888.00	$1,907.00
3	$28,788.00	$2,399.00
4	$34,688.00	$2,891.00
5	$40,588.00	$3,382.00

Submitted by: _____ Date: _____

_____

President, Randolph County Commission Date

If you have any further questions please contact Lutecia at 304-630-6158 or firefee@rcsowv.org

Revised 2/2022