



Child Passenger Safety Seat Distribution Program for Income-Eligible Clients

Name Parent/Guardian: Relationship to Child: Street Address: City: State: Zip: Date:

Phone Number: Very important for setting up an appointment for car seat(s)

Home phone: Cell phone: Work phone: Message:

Please list all children who are under the age of eight. Are you pregnant? Please give due date: Child #1 Name: Age: Weight: Height: Child #2 Name: Age: Weight: Height: Child #3 Name: Age: Weight: Height:

Automobile seat will be used in: Make Model Year

How did you hear about the CPSS Program ?

Income Verification: (Please check ALL that apply)

- TANF SNAP Medicaid Foster Care CPS Other: Pay stubs Head Start Services WIC Other:

Signature of person completing this application:

Name Date:

Return this form to: AJ VanCuren PHE Seneca County Health Department 2465 Bonadent Drive, Suite 3 Waterloo, NY 13165 Or fax to 315-539-9493





## Seneca County CPSS Program Low Income Distribution 2018 Income Guidelines for Federal Poverty Level



# Seneca County

## Health Department

|   | 100%     | 133%     | 138%     | 150%     | <b>200%</b>     |
|---|----------|----------|----------|----------|-----------------|
| 1 | \$12,140 | \$16,146 | \$16,753 | \$18,210 | <b>\$24,280</b> |
| 2 | \$16,460 | \$21,892 | \$22,715 | \$24,690 | <b>\$32,920</b> |
| 3 | \$20,780 | \$27,637 | \$28,676 | \$31,170 | <b>\$41,560</b> |
| 4 | \$25,100 | \$33,383 | \$34,638 | \$37,650 | <b>\$50,200</b> |
| 5 | \$29,420 | \$39,129 | \$40,600 | \$44,130 | <b>\$58,840</b> |
| 6 | \$33,740 | \$44,874 | \$46,561 | \$50,610 | <b>\$67,480</b> |
| 7 | \$38,060 | \$50,620 | \$52,523 | \$57,090 | <b>\$76,120</b> |
| 8 | \$42,380 | \$56,365 | \$58,484 | \$63,570 | <b>\$84,760</b> |

Add \$4,320 for each person over 8



**Public Health**  
Prevent. Promote. Protect.  
**Seneca County, NY**