

SECTION 1: IDENTIFICATION	
Please provide <b>ONE</b> of the following:	
☐ Current Florida ID	
☐ Current Driver's License	
☐ For applicants not eligible to obtain a Florida ID: an alterna	ative government-issued ID must be provided
SECTION 2: ELIGIBILITY	
If you are a US citizen or legal resident for 5 years or more	
AND you are 65 years or older, OR receiving disability benefits, OR have any dependents children under 18 years old in	
your household, you MUST provide <b>ONE</b> of the following documents:	
☐ Proof of Medicaid Application <b>prior</b> to applying for this pro	gram
☐ Medicaid Denial Letter	LL DD OWARD DIOTRICT
PROOF OF RESIDENCE IN SOUTH BROWARD DISTRICT	
The following documents <b>MUST</b> be addressed to <b>you or your spouse</b> :	
SECTION 2A	
Please provide <b>ONE</b> of the following:	AND <b>ONE</b> of the following:
☐ Current FPL bill	□ Current Mortgage Statement
☐ Current Water bill	☐ Homestead Exemption
☐ Current Sewer bill	☐ Property Tax Statement
<ul> <li>☐ Current Home Phone bill</li> <li>☐ Current Cable bill</li> </ul>	<ul><li>□ Property Deed</li><li>□ Lease Agreement*</li></ul>
☐ Current Internet bill	☐ Current Auto Registration
☐ Current Satellite TV bill	□ Notarized Proof of Address
	☐ Sublet Lease Agreement
*If the lease agreement states that the utilities are included in the rent, two pieces of business or government correspondence addressed to you are required in addition to the lease agreement	
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If SECTION 2A is completed, you may skip SECTION 2B and 2C and continue to SECTION 3 and 4.	
If you are unable to submit the TWO documents from SECTION 2A, you MUST complete SECTION 2B and 2C first.	
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SECTION 2B	
If you sublet or rent a room, or do not pay for your own living arrangements, you MUST provide <b>TWO</b> of the following:	
<ul> <li>□ Business Correspondence: Credit card statement, Bank statements, Car loan statement, Any personal bill</li> <li>□ Government Correspondence: Food Stamps letter</li> </ul>	
☐ Declaration of Domicile form from the Broward County Governmental Center	
☐ Proof of Rent Payments	vernmental Genter
☐ School Schedule	
SECTION 2C	
If you do not pay for your living arrangements, you MUST provide <b>ALL</b> of the following in addition to the documents listed	
in SECTION 2B:	· — · · · · · · · · · · · · · · · · · ·
☐ A Notarized Letter of Support from the person who is helping OR a Notarized Homeless Affidavit from a South	
Broward District Homeless Shelter (Letter must not be older than 30 days)	
☐ Proof that you are the child, parent or sibling of the supporter OR that the supporter claims you for federal income	
tax purposes OR Proof of enrollment in an appropriate, recognized, social service program for the homeless in	
the South Broward District	
☐ For applicants providing a Letter of Support: a copy of you	r supporter's photo ID must also be provided

SECTION 3: PROOF OF CITIZENSHIP/ IMMIGRATION STATUS	
Non-citizens and visitors:  MUST provide ONE of the following for each member of the household:  Work Authorization card  Proof of residence in South Broward County  Florida ID or Social Security card  Passport with Visa and I-94	
SECTION 4: PROOF OF INCOME	
Legally married or unmarried partners with children <b>MUST</b> provide income for all family members	
Please provide <b>ONE</b> of the following:  □ Paycheck stubs showing gross income for the last 6 consecutive weeks for you, your spouse or domestic partner and all family members even if employment ended within the last three months.  □ A dated letter from your employer, on company letterhead, stating hours worked and gross pay  □ For self-employed applicants: a completed Declaration of Income Form may be accepted for the last 8 consecutive weeks even if no wages earned.	
Please provide ALL that apply:  Aid to Family with Dependent Children Alimony Child Support Disability Income Social Security Income Unemployment Compensation Pensions Dividend Income Annuities Worker's Comp	
Please provide <b>ONE</b> of the following:  □ Last 3 consecutive statements for ALL personal (checking, savings, IRAs, CDs, money market, and bonds) AND business bank accounts for you, your spouse (or Domestic Partner), and dependents <b>(all pages)</b> .  □ Applicant and/or supporter's proof of payment for all monthly expenses for the last 3 months (i.e., money orders, cash receipts, cancelled checks)	
Please provide <b>ONE</b> of the following:  All pages must be provided including 1040 forms, W-2 forms, 1099's and all schedules  Current income tax return – if filing separately, both Tax Returns must be provided <b>(all forms/pages)</b> Personal and business income tax returns for you, your spouse, and all other family members <b>(all forms/pages)</b> 4506-T Form: Request for Transcript of Tax Return <b>(Call IRS at 1-800-908-9946 for free copy of transcripts)</b> If you are self-employed, you MUST provide the entire Income Tax Return form <b>(all forms/pages)</b>	

Additional information/documentation may be requested to complete your application. All information is subject to verification. For additional eligibility questions, please contact Customer Service at (954) 276 5501.