

PLAY IT SAFE- CAR SEAT/BOOSTER SEAT PROJECT



Steuben County Sheriff's Office

Telephone: (607) 622-3911

FAX: 607-776-7671

In collaboration with:
Steuben County Public Health
Healthy Families of Steuben



Funded by the National Highway Traffic Safety Administration with a grant from the New York State Governor's Traffic Safety Committee

FREE convertible car seats, forward-facing car seats (with harness straps) and booster seats are made available for income-eligible families living in Steuben County. Income eligible families are those meeting WIC, DSS, SS, Medicaid, Food Stamps, or Head Start income guidelines (see attached).

Families interested in obtaining a seat may fill out the attached application and return it to Steuben County Sheriff's Office.

Families must be willing to commit to the following:

- Plan to come to the distribution site to pick up their car seat and receive training on proper usage (having the vehicle that the seat will be installed into and the child is preferred). The child needs to be present for proper installation.
- One child seat per child is allowed.

Mail or fax completed application and direct any questions to:

Steuben County Sheriff's Office

Attn: Sgt. Matthew Sorge
7007 Rumsey Street Extension
Bath, NY 14810
Main Number: (607) 622-3911
Toll Free: 1-800-724-7777
FAX: (607) 776-7671

PLAY IT SAFE PROJECT

INCOME GUIDELINES

Income verification is required to determine eligibility to receive Car Seats and Booster Seats. If the parent is eligible for the following programs they are eligible for one free seat per child:

Public Assistance, Medicaid, WIC, Food Stamps, SSI or Headstart

Or if their gross income falls below 200% of the Federal Poverty guidelines (use paystubs):

# of People in Family	Yearly Income (Gross)*	Monthly Income (Gross)
1	\$24,280	\$2,023
2	\$32,920	\$2,743
3	\$41,560	\$3,463
4	\$50,200	\$4,183
5	\$58,840	\$4,903
6	\$66,940	\$5,578
7	\$76,140	\$6,345
8	\$84,760	\$7,063

*2019 Poverty Guidelines, confirmed 1/3/19

2019

Car Seat/Play It Safe Project for Income-Eligible Clients

Name Parent/Guardian: _____ Date: _____

Relationship to Child: Parent Guardian Foster Parent

Street Address: _____

City: _____ State: _____ Zip: _____

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 PLAY IT SAFE Project? _____

Income Verification: (Please check ALL that apply)

DSS Client: TANF SNAP Medicaid Foster Care CPS Other: _____

Please provide DSS Caseworker name: _____ Phone#: _____

Non-DSS: Pay stubs Head Start Services WIC Other: _____

Signature of person completing this application:

Name _____ Date: _____

Return this form to: **Sgt. Matthew Sorge**
Steuben County Sheriff's Office
7007 Rumsey Street Extension, Bath New York 14810
Or fax to 607-776-7671