

Gun Liability Insurance Attestation Form

Section 1: Description

To be compliant with the Gun Harm Reduction Ordinance, gun owners and those in possession of guns must have a current homeowner's, renter's or gun liability insurance policy for their firearm(s) and ensure that the policy covers losses or damages resulting from accidental use of the firearm, including but not limited to death, injury, or property damage. Exemptions are listed below.

Gun owners and those in possession of guns in the City of San José must complete the below insurance attestation form by January 1, 2023. The form must be accurately completed and kept with the firearm(s) at all times. It does not need to be submitted to the City.

Non-compliance may result in fines. For more information about San José's Gun Harm Reduction Ordinance, and City Manager issued regulations, go to: <https://www.sjpd.org/records/documents-policies/gun-harm-reduction-ordinance>

Description of exemptions:

- A. Those persons designated as peace officers pursuant to Chapter 4.5 of Title 3 of Part 2 of the California Penal Code (§830 et seq.), including sworn peace officers, active reserve peace officers and retired peace officers. *(Need to provide proof of eligibility for the exemption - show ID from issuing agency upon request; police to verify employment upon contact)*
- B. Those persons who have a license to carry a concealed weapon issued pursuant to California Penal Code § 26150 or § 26155, for as long as these statutes are legally enforceable. *(Need to provide proof of eligibility for the exemption – show CCW license upon request)*
- C. Those persons for which compliance with this Part would create a financial hardship. (See back side of form)

Section 2: Exemptions

I claim the following exemption because: (Please select one)

- A. I am designated as a peace officer pursuant to Chapter 4.5 of Title 3 of Part 2 of the California Penal Code (§830 et seq.), including sworn peace officers, active reserve peace officers and retired peace officers. *(I will show ID from issuing agency upon request)*
- B. I have a license to carry a concealed weapon pursuant to California Penal Code § 26150 or § 26155, for as long as these statutes are legally enforceable. *(I will show CCW license upon request)*
- C. This requirement would create a financial hardship. *(I attached proof of income)*

Section 3: Insurance Coverage

Name of firearm owner:

Name of Insurance Company (issuing the policy):

Address of Insurance Company:

Phone:

Insurance Policy Number:

Effective Date:

Expiration Date:

Section 4: Acknowledgment

I do, hereby attest that this information is true and I will provide proof of compliance (sign the form under penalty of perjury and keep form with firearms where they are stored or transported).

Signature

Date

Section 5: Financial Hardship Exemption Worksheet

An individual qualifies for financial hardship if their household income is at or below the extremely low-income threshold for Santa Clara County, adjusted for household size, according to the Area Median Income (AMI) calculations released annually by the California Department of Housing and Community Development (HCD). (The extremely low-income threshold is set at 30% of AMI.)

To claim the financial hardship exemption, complete the required information below, including stating your household size and gross household income.

Number of persons in my household:

Gross household income:

To qualify for a financial hardship exemption your gross household income cannot exceed 30% of AMI adjusted for your household size. Please review the information in the table below to determine if you qualify.

If your income is at or below the allowed limit, you may claim a Financial Hardship Exemption in Section 2 of this form. You must provide proof of financial hardship and attach a copy of your current Federal Income Tax Return (form 1040) to this Attestation Form. **The Social Security number on the form 1040 should be redacted.**

Household Size	Area Median Income (AMI) 30%
1 Person	\$ 35,400
2 Person	\$ 40,450
3 Person	\$ 45,500
4 Person	\$ 50,550
5 Person	\$ 54,600
6 Person	\$ 58,650
7 Person	\$ 62,700
8 Person	\$ 66,750
9 Person household and larger	For every additional person over 8, add \$4050 to the income threshold for 8 person households