

# Shasta Metro E-Zone Hiring Tax Credit Eligibility & Documentation

**Reference: Barclays Official  
California Code of Regulations HCD  
Implemented 1/26/07**

(Smart Business Resource Center - Resources & Linkages - Shasta County Only)  
(Revised January, 2012 CP)

ELIGIBILITY FACTOR	ACCEPTABLE DOCUMENTATION
<p><b>A. Eligible/enrolled in the CalWORKs Program immediately preceding employment (90 days)</b></p>	<p>Signed Smart Center “Verification &amp; Release of Information Form” from new hire</p> <p style="text-align: center;"><b>AND</b></p> <p>a. Verification provided by Shasta County Dept of Social Services staff</p>
<p><b>B. Eligible for, or enrolled in a Workforce Investment Act (WIA) through Smart Center, etc.:</b></p> <p>a. Core B</p>	<p>Signed Smart WIA Application (May 2008 to current) and: RTW docs, Selective Service Verification (if applicable) or Smart Program Exit Form</p>
<p><b>C. WOTC (or WTW) Work Opportunity Tax Credit</b></p>	<p>EDD WOTC or WTW Employer Certification DE 8727, copy of</p>
<p><b>D. Economically Disadvantaged/Income Individual 14 years of age or older</b></p>	<p>Must complete the <i>Income Verification Worksheet</i> provided with the State of California EZone Voucher Application packet</p> <p style="text-align: center;"><b>AND</b></p> <p>Additional support documentation, if requested and/or required – see Page 7 of this guide</p>

ELIGIBILITY FACTOR	ACCEPTABLE DOCUMENTATION
<p><b>E. Dislocated Worker</b></p> <p><b>1. Terminated, laid off, received notice of termination or layoff, &amp; eligible for or has exhausted unemployment benefits, &amp; is unlikely to return to his previous industry or occupation.</b></p>	<p><b>Applicant to provide at least <u>one item from each</u> of subdivisions (1), (2), &amp; (3) below:</b></p> <p><b>(1) To document that an employee has been terminated, laid off, or received a notice of termination or layoff:</b></p> <p><b>(A) Copy of a termination notice or other company documentation of employee’s termination or layoff.</b></p> <p><b>(B) Employer or union rep letter identifying the employee’s termination date</b></p> <p><b>(C) Photocopy or printed media article or announcement, including the name and date of the publication, describing the layoff, along with a copy of the employee’s last payroll check prior to hire by the applicant.</b></p> <p><b>(D) Separation or Termination Report, or equivalent, signed by the employee’s former employer.</b></p> <p><b>(E) Document showing that the employee is eligible for or has exhausted entitlement to unemployment insurance benefits as specified in subdivision below.</b></p> <p><b>(2) To document that the employee is eligible for or has exhausted entitlement to unemployment insurance benefits:</b></p> <p><b>(A) Unemployment insurance records.</b></p> <p><b>(B) Statement by an Unemployment Insurance rep.</b></p> <p><b>(3) To demonstrate that the employee is unlikely to return to his or her previous industry or occupation.</b></p> <p><b>(A) Screen print of California Employment Development Department LMI Division screens that indicates limited opportunities for employment in the same or similar occupation such that the employee is unlikely to return to that occupation.</b></p> <p><b>(B) Doctor’s statement indicating employee’s inability to return to previous industry/occupation due to physical limitations.</b></p> <p><b>(C) Vocational rehab counselor’s statement indicating the employee’s inability to return to previous industry/occupation due to physical limitations.</b></p> <p><b>(D) Other third-party documentation that demonstrates the unavailability of similar employment in the employee’s previous industry or profession.</b></p>

ELIGIBILITY FACTOR	ACCEPTABLE DOCUMENTATION
<p><b>E. Dislocated Worker</b></p> <p><b>2. To demonstrate that immediately preceding the commencement of employment with Applicant, an employee is a qualified employee as a dislocated worker due to plant, facility, or enterprise closure.</b></p>	<p><b>Applicant shall provide at least <u>one item from each</u> of subdivision (1) &amp; (2) below:</b></p> <p><b>(1) To document that there has been a permanent plant, facility, or enterprise closure or substantial lay off:</b></p> <p><b>(A) Bankruptcy docs, if declared under chap 7.</b>  Notice of Foreclosure or similar doc provided by financial institution when such doc clearly shows a closure or mass layoff will occur.</p> <p><b>(B) Copy of printed media article –announcement, include name and date of publication, describing the closure &amp; mass layoff.</b></p> <p><b>(C) Statement from employer or union rep.</b></p> <p><b>(D) Statement from the employer’s bank official, attorney, supplier, or accountant.</b></p> <p><b>(E) WARN notice</b></p> <p><b>(2) To document that an employee has been terminated, laid off, or received a notice of termination or layoff, the applicant shall provide one of the following docs verifying that the employee was employed at the plant, facility, or enterprise identified in above.</b></p> <p><b>(A) Copy of a notice of termination or layoff or other company documentation of employee’s termination.</b></p> <p><b>(B) Employer or union rep letter identifying the employee’s termination date.</b></p> <p><b>(C) Separation or termination report, or equivalent signed by the employee’s former employer.</b></p> <p><b>(D) Evidence that the employee is or was employed by the plant, facility, or enterprise identified in subdivision.</b></p> <p><b>(E) WARN Notice</b></p>

ELIGIBILITY FACTOR	ACCEPTABLE DOCUMENTATION
<p><b>E. Dislocated Worker</b></p> <p><b>3. To demonstrate that an employee is a qualified employee as a dislocated worker as long-term unemployed and has limited opportunities for employment or reemployment in the same or a similar occupation in the area in which the individual resides.</b></p>	<p><b>Applicant shall provide at least <u>one item from each</u> of subdivisions (1) &amp; (2) below:</b></p> <p><b>(1) To document that the employee is long-term unemployed, one of the following dated at least 15 weeks prior to commencement of employment with the applicant.</b></p> <p><b>(A) Proof of receipt of unemployment benefits for at least 15 weeks prior to commencement of employment or proof that UI benefits were exhausted.</b></p> <p><b>(B) UI Benefits verification (records)</b></p> <p><b>(C) UI award letter with claim history</b></p> <p><b>(D) Workers Investment Act (WIA) displaced workers unit verification.</b></p> <p><b>(E) Statement by UI rep.</b></p> <p><b>(F) Doc that qualifies the employee as a dislocated worker due to plant, facility, or enterprise closure, showing long-term unemployment for at least 15 prior to commencement of employment.</b></p> <p><b>(2) To document that there is limited opportunities for employment or reemployment in the same or similar occupation:</b></p> <p><b>(A) EDD LMI screen print that indicates limited opportunities for employment in the same or similar occupation.</b></p> <p><b>(B) Doctor’s statement indicating employee’s inability to return to previous industry/ occupation due to physical limitations.</b></p> <p><b>(C) Voc Rehab counselor’s statement indicating the employee’s inability to return to previous industry/occupation.</b></p> <p><b>(D) Other third party doc that demonstrates the unavailability of similar employment in the employee’s previous industry or occupation.</b></p>

ELIGIBILITY FACTOR	ACCEPTABLE DOCUMENTATION
<p><b>E. Dislocated Worker</b></p> <p><b>4. To demonstrate that immediately preceding employment an employee is a qualified as a dislocated former self-employed worker. Combination of the following documents or other documents sufficient to demonstrate that the employee was self-employed and unemployed prior to employment due to economic conditions in the community/or natural disaster:</b></p>	<p><b>(4) No longer self employed due to economic conditions or natural disaster, examples of support documentation:</b></p> <p><b>(A) Bankruptcy docs</b>  <b>(B) Business Lic or permit listing employee's name.</b>  <b>(C) Articles of incorp or docs of dissolution</b>  <b>(D) Prior's year's tax returns.</b></p>
<p><b>E. Dislocated Worker</b></p> <p><b>5. Former Department of Defense civilian employee at a military installation</b></p> <p><b>6. Active member of the armed forces or National Guard as of September 30, 1990</b></p> <p><b>7. Seasonal Unemployment</b></p> <p><b>8. Clean Air Act compliance</b></p>	<p><b>Reference Guide for acceptable documentation:</b>  <b>Barclays Official California Code of Regulations</b>  <b>Title 25. Housing &amp; Community Development (1/26/07)</b></p>

ELIGIBILITY FACTOR	ACCEPTABLE DOCUMENTATION
<p><b>F. Disabled Individual or Service-Connected Disabled Veteran</b></p>	<p>One of these:</p> <ul style="list-style-type: none"> <li>a. Voc Rehab Agency Contact</li> <li>b. Release/Program Completion Papers</li> <li>c. Letter from Rehab Counselor</li> <li>d. Physician's statement</li> <li>e. Social Security disability records</li> <li>f. Social Service records/referral</li> <li>g. DD-214,</li> <li>h. Veterans Admin documentation</li> <li>i. Verification by State Veterans Agency</li> </ul>
<p><b>G. Vietnam Veteran or Recently Separated Veteran - within 48 months (4 years) preceding commencement of employment</b></p>	<p>One of these:</p> <ul style="list-style-type: none"> <li>a. DD 214 (copy of)</li> <li>b. Veterans Admin documentation</li> <li>c. Verification by State Veterans Agency</li> </ul>
<p><b>H. Ex-Offender</b>  An individual who has been convicted of a felony or a misdemeanor offense punishable by incarceration, but placed on probation by a state court without a finding of guilt.</p> <p>“Ex-offender” does not include an individual whose record has been expunged.</p>	<p>One of these:</p> <ul style="list-style-type: none"> <li>a. Letter of Parole</li> <li>b. Letter from Probation Officer</li> <li>c. Court Records</li> <li>d. Police Records</li> <li>e. Background check report signed by a licensed and/or certified (by California or federal law) background check business.</li> </ul>
<p><b>I. Recipient of, or eligible for, Public Assistance: AFCD, SSI, Food Stamps</b></p>	<p>Signed Smart Center “Verification &amp; Release of Information Form” from new hire  AND  a. Verification provided by Shasta County Dept of Social Services staff.</p>
<p><b>J. Native American, Samoan, Hawaiian, or another Group of Native American descent</b></p>	<p>One of these:</p> <ul style="list-style-type: none"> <li>a. Tribal record document</li> <li>b. Bureau of Indian Affairs, CDIB card</li> <li>c. Documentation that the employee is Native American descent.</li> <li>d. Confirmation/verification from local Indian Rancheria healthcare services.</li> </ul>
<p><b>K. Targeted Employment Area (TEA) resident</b></p> <p>See: FFIEC Geocoding for additional TEA approval (Previous 3 years are accessible)</p>	<p>One of these:</p> <ul style="list-style-type: none"> <li>a. W-4 (signed within 30 days of the date of hire) and/or *I-9 (signed within 3 days of the date of hire)</li> <li>b. Driver's License or State ID Card</li> <li>c. Landlord statement</li> <li>d. Lease or rental agreement</li> <li>e. Utility bill</li> </ul> <p>*Not mandatory for I-9 to be provided, but requested for support document to W-4 in case original W-4 has been replaced with employee updated W-4.</p>

ELIGIBILITY FACTOR	ACCEPTABLE DOCUMENTATION
<p>Supplement for Income Eligible (Economically Disadvantaged)</p> <p>NOTE: Documentation should be provided for each applicable income</p> <p>Document that verifies employee’s “age” at time of hire</p>	<p>ALL that apply:</p> <ul style="list-style-type: none"> <li>a. Pay Stubs</li> <li>b. Public Assistance Records</li> <li>c. Tax Records (most recent filed)</li> <li>d. Compensation Records</li> <li>e. Social Security Benefits</li> <li>f. Alimony Agreement</li> <li>g. Pension Statement</li> <li>h. Veterans Benefits Records</li> <li>i. UI printout</li> <li>j. <u>Last Resort:</u> Detailed “Applicant Statement”</li> </ul> <p style="text-align: center;">AND</p> <ul style="list-style-type: none"> <li>a. Driver’s License</li> </ul> <p style="text-align: center;">OR</p> <ul style="list-style-type: none"> <li>b. Federal , state, or local government issued ID card – showing date of birth or age</li> </ul>

Any questions, please call 530-245-1531 or fax 530-244-8006

Cherish Padro  
Smart Business Resource Center

Email: [pcherish@thesmartcenter.biz](mailto:pcherish@thesmartcenter.biz)

Website: [www.thesmartcenter.biz](http://www.thesmartcenter.biz)