IOWN OF HOUSING REHAB PROGRAM HOMEOWNER APPLICATION

A. APPLICANT DA	TA:		DATE:
A.1 NAME			
ADDRESS			
TELEPHONE	Home		Work
			al residence? yes no this address?
A 4 DIST ALL RESH	Dennis, ii	Nejūtji	OING YOURSELF:
NAME	AGE	SEX	SOCIAL SECURITY NUMBER
			`
			·
A.5 Ethnic Backg		***	
Whi	te	_ Huspa	nic Black Other
A.6 Check, if ap	plicable:	Ha	andicapped Female Headed Household
*Section 109 of Title I – I United States shall on th participation in any progra	e ground of	frace, co	nity Development Act of 1974 states that no person in the olor, national origin, religion, or sex, be excluded from

R.	SOURC	ES OF	INCOME
ы.	BULKE	LO OI	

For every member of the household (children under 18 and students over 18 must show evidence of enrollment) list the gross amount (before taxes) each receives from all sources, including wages, rental income, social security, interest and dividends, pensions, AFDC, child support, alimony, etc. All household members must submit their most recent pay stubs (8 weeks) as well as signed and dated tax filing Form 1040 (include all schedules).

NAME	COURCE		GROSS INCOME 12 MONTH PERIOD	

***************************************				*****
SAVINGSINSTITUTIONS		CURRENTS	ALANCE	
Other - Investments (mcl. Retirement - IRA ,etc		CURRENTA	ALUE / BALANCE L	
C. PROPERTY DATA		<u> </u>		
C.1 Is this property	y a single or multi-fa	amily dwelling? _		
C.2 If the property	is a multi-family (a) Number of unit	s	
(b)How many are o	ccupied?	Assessed	Value	
C.3 Age of Home C.4 Briefly descri				
C.4 Briefly descri	be the improvemer	its needed:		
· · · · · · · · · · · · · · · · · · ·				_
				_
				_
				_
C.5 Have you eve	er received or appli	ed for Communi	ty Development Block Gran	nt
(CDBG) assistance o	n this property in th	e past? ye	snoyear	
C.6 If yes, when ar	nd scope of the impr	ovements:		
				_
				_

D. PERSONAL DEBT INFO				
CREDITOR		DAR (0)5	N(0)SXXXX	PASSANTE SE
E. Property Expense Information				
EXPENSES		M	DAYTHI YORAS	YMENTS
Mortgage(s)				
Original Balance \$				
Current Balance \$				
	<u> 10st</u>			
current Mortgage Statement				
Property Tax				
Fuel Oil (est. monthly cost)				
Gas (est. monthly cost) Electric (est. monthly cost)				
Homeowner Insurance				
NOTE: Enclose copy of policy-pg. 16	&2)			
Water/Sewer	~21			
Other (describe)				
F. I/We hereby certify that all of the a of my/our knowledge and belief. I in this application. I understand t determine eligibility for this progra	hereb hat t	y consent to the vibe information the	erification of a	ny information given tion will be used to
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