

Application

Applicant Information:

Name of Home Owner: _____

Address of Property: _____

Phone: Home _____ Work _____ Cell _____

Which Number do you prefer to be used to contact you? _____

How long have you lived at this address? _____

Number of dwelling units _____ Approximate age of the home _____

Is this home a Manufactured or "Mobile" Home? YES / NO

Household Size: Adults _____ Dependent Children _____

Do any Children residing at this property have an elevated blood lead level? YES / NO

Is the Head of the Household over 62 years of age? YES / NO

Is the Head of the Household? MALE / FEMALE

The following information is requested by the State of New York for statistical purposes only. Minority data will not be considered in determining the applicant's eligibility for assistance. This data is OPTIONAL.

Applicant is (circle one):

Caucasian African American Native American Hispanic Asian Other

Eligibility Information:

Income eligibility guidelines are based on the Area Median Income and Household Size. The current Income Limits for this Program are:

	Total Persons in Applicant Household (including all Children)							
60% AMI	1 Person	2 Persons	3 Persons	4 Persons	5 Persons	6 Persons	7 Persons	8 Persons
Annual Income:	\$36,300	\$41,250	\$46,680	\$51,840	\$56,040	\$60,180	\$64,320	\$68,460

What is your expected Annual Household Income for this year (estimated)? \$ _____

Do you expect your total Annual Income to fall below these Limits for **2018**? YES / NO

Please attach copies (or submit separately) the following applicable documents:

- Signed copy of most recent Federal Income Tax Return (including all Schedules)
- Copy of most recent W-2 Statement(s) from all employers regarding wages
- Copy of at least **four (4) most recent Pay Stubs** regarding wages earned by any Household member age 18 or older
- Bank Statements (most recent month for checking, savings, and investment accounts)
- Copy of current award letter(s) concerning Social Security, Disability, Workers' Compensation, VA or retirement pensions, unemployment insurance, or other regular benefits received by all Household members
- Copy of the recorded Deed for the property
- Proof of Insurance for the Property (Homeowner's Policy)
- Property Tax Receipts (Town and County, Village, School)
- Copy of paid Village Water and Sewer Receipts
- Mortgage Statement – Last 2 months

Please note that your Application is not complete without proof of all applicable income sources, which are not all listed above, and review of all other Application materials. Incomplete Applications will not be processed.

Are there any outstanding Mortgages, Liens, or Judgments against the property? YES / NO

Current Mortgage Financing

- Bank _____ Amount _____

Have you received Notice from a lender regarding a pending **Foreclosure**? YES / NO

Have you ever filed for personal **Bankruptcy**? YES / NO

Have you previously received **any** state or federal home improvement assistance (such as Saratoga County Weatherization or Town or other Village grants? YES / NO

Certification and Authorization:

All the information I have given in this Application is true and correct to the best of my knowledge. I understand that the Village of Corinth reserves the right to verify the information and retain this Application whether or not the Application is considered further or approved for assistance. I hereby authorize the Village of Corinth or its program representative(s) to verify all information as a condition of this Application.

Applicant Signature

Date

Co-Applicant Signature

Date

Note to all Applicants: Signing this Application does NOT obligate you to participate in the HOME Improvement Program. Your signature is required only to verify your voluntary interest in the Program. Participation is contingent upon funding availability and applicant eligibility. Submitting an Application does NOT entitle you or guarantee any funding award from the Village of Corinth at any time.

Program Disclaimer

The following factors are important to understand when applying for this Program. To ensure that all Home Owners are aware of these factors before your Application moves forward, this form must be read and signed by all adult Household Members. Feel free to ask questions.

1. To be eligible for grant assistance, the property must be owned by an adult who lives in the property as his or her primary **year-round residence**, and the property cannot exceed four (4) housing units total, including the owner's unit.
2. Applicants will be considered for assistance to solve major problems and health and safety threats found in their homes, in accordance with local guidelines and state and federal regulations. The amount of grant assistance provided to each applicant will be different, and most projects will **NOT receive the maximum amount** of funding due to individual project needs and budget limitations.
3. Any apartments in the property must be **occupied** by a qualified Tenant prior to completion of the Project. **Rent limits** apply to assisted apartments in the property, without exclusion, and are subject to verification on a regular basis by the Village.
4. Owners will be responsible for all costs associated with repairs and improvements to apartments that do NOT meet tenant income or rent guidelines. All health and safety concerns in **all units** of a property must be addressed through this Program, and the **Owner may need to pay cash for that work if the apartment(s) is ineligible.**
5. Owners must remain in the home as their primary residence for **five (5) years** after the Project is completed, or a portion of the grant must be paid back to New York State.
6. Each Project takes a different amount of time to complete from the beginning documentation to completion of work by a Contractor hired by the Owner. **Date of application does NOT reserve or guarantee the approval of any grant funds.**
7. The Village of Corinth is **NOT** hiring any Contractors or performing any Work on private properties eligible for assistance under this Program.

Please expect the Application process to take at least 3 to 6 months, or longer.
The Village appreciates your patience.

Owner _____ Date _____

Owner _____ Date _____