



COLLEGE STATION COMMUNITY DEVELOPMENT APPLICATION FOR MINOR HOME REPAIR PROGRAM

1. APPLICANT:

Name _____ Address _____ City _____ Zip _____

Social Security # _____ Driver's License # _____

Home Phone _____ Cell Phone _____ E-Mail Address _____

Rent _____ Own _____ Number of Years _____ Mortgage Payment \$ _____

Unmarried _____ Married _____ Separated _____ Widowed _____ Female Headed Household _____

Name of Employer _____ Address _____

Position _____ Years on Job _____ Work Phone _____

Salary: \$ _____ per hour Hours worked weekly: _____ OR Annual Salary: \$ _____

2. CO-APPLICANT:

Name _____ Address _____ City _____ Zip _____

Social Security # _____ Driver's License # _____

Home Phone _____ Cell Phone _____ E-Mail Address _____

Rent _____ Own _____ Number of Years _____ Mortgage Payment \$ _____

Unmarried _____ Married _____ Separated _____ Widowed _____ Female Headed Household _____

Name of Employer _____ Address _____

Position _____ Years on Job _____ Work Phone _____

Salary: \$ _____ per hour Hours worked weekly: _____ OR Annual Salary: \$ _____

3. HOUSEHOLD INFORMATION: List all persons living in your household, including yourself first.

Last Name	First Name	Relationship	Date of Birth	Sex	Social Security Number

4. HANDICAP ACCESSIBILITY: If any member of your household has a mental or physical handicap requiring special housing accommodations, please list their information below:

Household Member	Type of Handicap	Special Housing Needs

5. INFORMATION ABOUT YOUR HOME: Complete the information below as fully as possible. It is essential for our record keeping and it may affect what kind of work is done on your house.

Year Constructed	Number of Years You Have Lived There	Number of Bedrooms	Number of Bathrooms

6. **ADDITIONAL INFORMATION ABOUT YOUR HOME:**

Have you ever submitted an application in the past to this office for housing assistance? _____

If yes, did this office provide you housing assistance? _____

If not, please explain why: _____

If yes, what year were the repairs made? _____ How much of the project cost did you pay? _____

What was the cost of the project? _____ Who was the contractor for the project? _____

What repairs does your house need now? _____

What emergency repairs (life or health threatening) are needed? _____

7. **OWNERSHIP:**

Do you share title to your property with your spouse, other relatives, or any other individuals? _____

If yes, please give the names of all other owners: _____

8. **SOURCES OF INCOME:** Income includes wages, child support, alimony, AFDC, SSI, Social Security benefits, interest earned from assets and all other income for any and all household members.

Name	Source of Income	Annual Amount Received

9. **ASSETS:** List all assets for any and all household members. Assets include balances of bank accounts, IRAs, gas or oil royalties, rental income, cash value of stocks or bonds, value of automobiles, and any other assets.

Name	Type of Asset	Value of Asset

ADDITIONAL INFORMATION:

1. You must provide copies of the Social Security Cards for all household members (copy the front and back of each card).
2. Applicant and Co-Applicant, if applicable, must present Driver's License when application is presented.
3. You must provide a copy of the last two months' paycheck stubs.
4. You must provide copies of your last six months bank statements for all accounts (except retirement or pensions).
5. If you pay or receive child support or alimony, you must provide a copy of the divorce decree.
6. If you are self-employed, an independent contractor, or a commissioned salesperson, you must provide income tax returns and bank deposit statements for the previous two years in addition to your current Verification Of Employment form.
7. You must provide a copy of the most recent deed or title report, if available.
8. You must provide a copy of Homeowner's Hazard Insurance Policy.

INFORMATION FOR GOVERNMENT MONITORING PURPOSES:

Borrower: (Select one)

- American Citizen
- U.S. Non-Citizen National
- Qualified Alien

1.) **Ethnicity** (Select one)

Is your ethnicity:

- Hispanic or Latino or
- Not Hispanic or Latino

2.) **Race** (Select one)

Is your race:

- American Indian or Alaskan
- Asian
- Black or African American
- Native Hawaiian or other Pacific Islander
- White
- American Indian or Alaskan & White
- Asian and White
- Black or African American & White
- American Indian or Alaskan & Black or African American
- Race combination not included in above categories

Co-Borrower: (Select one)

- American Citizen
- U.S. Non-Citizen National
- Qualified Alien

1.) **Ethnicity** (Select one)

Is your ethnicity:

- Hispanic or Latino or
- Not Hispanic or Latino

2.) **Race** (Select one)

Is your race:

- American Indian or Alaskan
- Asian
- Black or African American
- Native Hawaiian or other Pacific Islander
- White
- American Indian or Alaskan & White
- Asian and White
- Black or African American & White
- American Indian or Alaskan & Black or African American
- Race combination not included in above categories

AGREEMENT:

The undersigned applies for the program indicated in this application, represents that the property will not be used for any illegal or restricted purpose, and that all statements made in this application are true and are made for the purpose of obtaining the assistance. Verification may be obtained from any source named in this application. The City will retain the original of this application, even if the assistance is not granted.

CERTIFICATION:

Under the penalties of perjury, I/We certify that the Social Security Number(s) and other information provided on this form are true, correct and complete.

I/We fully understand that it is a federal crime punishable by fine or imprisonment, or both, to knowingly make any false statements concerning any of the above facts as applicable under the provisions of Title 18, United States Code.

I have read and I understand the actions the City can take in the event that I fail to meet my scheduled payments in accordance with the terms and conditions of my agreement. I also agree that I have provided accurate and complete information regarding my income and eligibility for the program. In addition, I give permission for the City of College Station to obtain and review any and all information regarding my credit history.

WARNING

Section 1001 of Title 18 of the U.S. Code makes it a criminal offense to make willful false statements or misrepresentations to any Department or Agency of the United States Government as to any matter within its jurisdiction.

Applicant's Signature

Date

Co-Applicant's Signature

Date