



HOUSING PROGRAM APPLICATION
Rehab Loan/Grant

Applicant(s) Full Name:	
Owner: _____	Email: _____
Present Address: _____ County: _____	
Do you own the home where rehab work is needed: Yes ☐ No ☐	
Have you had work done on your house by City in the past: Yes ☐ No ☐	
What type of rehab work is needed at your residence: Roof ☐ Electrical ☐ Heating ☐ Plumbing ☐	
Other: _____	
Marital Status: (circle one)	
Single ☐ Married ☐ Separated ☐ Divorced ☐ Widow ☐	
Home Telephone: _____	Cell Phone: _____
Number of Dependents: _____	Ages: _____ Total Persons in Household: _____
Name and Address of Employer: _____	
Position/Title: _____	

Gross Monthly Income
Attach proof of income and most recent bank statement

Monthly Housing Expense

Income:	Mortgage:
SSI:	Hazard Insurance:
Child Support:	Do you have Homeowner's Insurance: Yes ☐ No ☐
Net rental:	Real Estate Taxes:
Other:	Have you paid your property taxes: Yes ☐ No ☐
TOTAL:	Mortgage Ins:
	Utilities: (Attach copy of recent bill)
	TOTAL:

Agreement: The undersigned applies for the loan/grant indicated in this application to be secured by a first mortgage or deed of trust on the property described herein, and 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 loan. The information reported herein may be disseminated to others for the purpose of verification or other purposes consistent with the North Carolina Freedom of Information Act. All information is maintained, used or disseminated in accordance with the North Carolina Privacy Protection Act. The applicant may refuse to supply information requested by this form, however, such refusal will result in the lender's inability to process the loan application. The lender will retain the original or a copy of this application, even if the loan is not granted.

Any person who knowingly makes a false statement or misrepresentation in this application or causes such false statement or misrepresentation to be made shall be subject to a fine of not more than \$5,000 or by imprisonment for not more than 2 years, or both under provision of the United States Criminal Code.

This application may be shared with other funding agencies providing assistance on this project.

_____	_____
Borrower's Name	Date
_____	_____
Borrower's Name	Date

