

2009-2010
APPLICATION
HOME REHABILITATION PROGRAM

Name of Applicant: _____
(Head of Household)

Address: _____

City: _____ Victoria, Texas _____ Zip Code: _____

Home # _____ Cell # _____ Work # _____

Alternate Contact: _____ Their # _____

**COMPLETE THE FOLLOWING INFORMATION
ABOUT EACH HOUSEHOLD MEMBER**

Name	Date of Birth	Sex M/F	Race/ Ethnicity*	U.S. Citizen Yes/No	Disability Yes/No

* This information is voluntary. It is requested to ensure assistance is provided without regard to race or national origin.

Please attach one copy of each of the following items:

1. **PROOF OF IDENTITY:** Driver's License, Social Security card, or Texas ID card;
2. **PROOF OF ALL INCOME/EMPLOYMENT:** 3 pay periods of payroll check stubs, current award letter from Social Security, or other indication of income such as rent property;
3. **PROOF OF FINANCIALS:** 2 months of bank statements and statements for IRA's, 401K plans, certificate of deposits, savings, or other assets;
4. **PROOF OF PROPERTY TAX STATUS:** CURRENT property tax receipt showing NO TAXES OWED ON PROPERTY (includes current and all past years);
5. **PROOF OF HOME OWNERSHIP:** CLEAR Title, and must reside in the home; and
6. **PROOF OF ENERGY COST:** CURRENT gas, water and electricity bills.

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HOME INFORMATION SURVEY

1. Do you live in a Mobile Home (Trailer) *not eligible for the program*
 Frame (Wood) Home
 Brick Home
 Other Kind of Home

2. Is your roof leaking? yes no
If your roof leaks, in how many rooms? _____

3. Are there any holes in the floors? yes no
Does your home have a good foundation? yes no

4. How many windows does your home have?
Are your windows wood or aluminum?
Do you think the windows need to be replaced? yes no

5. Do your walls have sheetrock or paneling
Are there large holes in your walls? yes no

6. Are there large holes or cracks in your ceilings? yes no

7. What do you use for heat in the winter?
 Space Heater / How many? _____
 Electric Heater / How many? _____
 Wall Furnace
 Kitchen Stove
 Wood Stove
 Other

8. In your opinion, what do you think your house needs most?

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CURRENT PROPERTY INFORMATION:	
Mortgage	
Taxes	
Insurance	
Utilities	
TOTAL HOUSING EXPENSES	

After all assessments and inspections are complete, a determination will be made to see if your household is eligible to receive Program Assistance. The City of Victoria Development Services staff will determine if your home is feasible for rehabilitation activities and certify a priority rating score.

EARNED HOUSEHOLD INCOME: <i>(wages and/or salaries for any member of the family 18 years of age or older)</i>		
Name of Person Working	Employer's Name, Address and Phone Number	Monthly Income

OTHER HOUSEHOLD INCOME:	
If any household members receive any of the following types of unearned income or benefits, check the type of benefit received. Where the space is provided, enter the dollar amount of assistance received.	
* DO NOT INCLUDE FOOD STAMPS AS INCOME.	
TYPE OF INCOME	AMOUNT PER MONTH
AFDC/TANIFF	
SSI	
SOCIAL SECURITY	
VETERAN'S BENEFITS	
RETIREMENT BENEFITS	
CHILD SUPPORT	

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* DO NOT INCLUDE FOOD STAMPS AS INCOME.	
TYPE OF INCOME	AMOUNT PER MONTH
HUD UTILITY SUPPLEMENT	
MILITARY ALLOTMENTS	
UNEMPLOYMENT COMPENSATION	
WORKMAN'S COMPENSATION	
CONTRIBUTIONS	
OTHER (specify)	

APPLICANT'S AUTHORIZATION, UNDERSTANDING AND AGREEMENT

Answers to all of the previous questions and the statements I have made are true and correct to the best of my knowledge and belief. I authorize the City of Victoria and their contracted agencies to contact any source in order to solicit or verify information necessary for an eligibility determination. I also agree to provide the City of Victoria and their contracted agencies with any information necessary to verify my eligibility. I authorize the City of Victoria and their contracted agencies to solicit or verify information on my housing costs to the extent information is used only to provide data.

If I am eligible for Program Assistance, I give my permission to allow an on-site inspection to be performed on my property. I will cooperate fully to verify all necessary information and also understand that I will voluntarily move myself and everything out of the house during the time the work is being completed.

I have been advised and understand that this application will be considered without regard to race, color, religion, creed, national origin, familial status, sex, disability or political belief.

PENALTIES FOR FRAUD

Whoever obtains or attempts to obtain assistance for which he/she is not entitled, by means of willful statement or other fraudulent means, may be considered guilty of a criminal offense and upon conviction may be fined and/or imprisoned.

BEFORE YOU SIGN BE SURE EACH ANSWER IS COMPLETE AND ACCURATE.

Signature - Applicant Date

Signature - Spouse Date

Signature - Witness Date