

VILLAGE OF BRADLEY HOUSING REHABILITATION PROGRAM APPLICATION

NOTICE OF CONFIDENTIALITY: The information provided by the applicant is for the confidential use in determining eligibility for the Village of Bradley's housing rehabilitation grant under the Community Development Block Grant Program. No other organization or agency is entitled to the information disclosed without specific authorization from the named applicant.

PLEASE COMPLETE FORM LEGIBLY AND IN ITS ENTIRETY

Complete Sections I through V and Attach Required Documentation:

**Write N/A for Sections Not Applicable to the Applicant*

- ☐ Driver's License or ID Card for all Household Members
- ☐ Birth Certificates for all Household Members
- ☐ Income: Three recent Pay Stubs for all Household Members
- ☐ Income: Employment Verification Letter
- ☐ Income: Social Security Benefit Statement (most recent)
- ☐ Income: Social Security Disability Benefit Statement (most recent)
- ☐ Income: Public Aid Benefit Statement (most recent)
- ☐ Income: Pension/Retirement Statements
- ☐ Income: Interest Income Statements
- ☐ Income: Proof of 'other' income sources
- ☐ Home Ownership: House Title or Deed
- ☐ Home Ownership: Mortgage Statement
- ☐ Home Ownership: Mortgage Payment History
- ☐ Home Ownership: Paid Property Tax Bill (Escrow Proof Paid Statement ok)
- ☐ Home Ownership: Property Insurance(s)

DATE Submitted to Village of Bradley: _____

I. DATA ON HOUSE

A. Owner Information Phone #: _____

1. Owner's Name _____

2. Owner's Address _____
3. City, Zip _____
4. Length of Time at Current Address: _____ Years Months _____
5. Age(s) of Owners _____ Disabled: Yes _____ No _____
6. Tax Parcel Number of Property (PIN): _____
7. Female Head of Household: Yes _____ No _____

B. Existing Debt on Property

1. Mortgage Type: (Circle Correct Letter)
- a. Conventional b. USDA Rural Development c. VA d. Contract
- e. Other (Describe) _____
2. Mortgage/Seller's/Lender's Name: _____
- Address, City, State, Zip: _____
3. First Mortgage Date _____ Interest Rate _____
- Initial Mortgage Amount _____ Term in Years _____
- Current Balance Due _____ Monthly Payment _____
- Existing Liens - Name: _____
- Address, City, State, Zip: _____

C. Insurance on Property

(Copy of certificate may be attached in lieu of the following information.)

1. Insurance Company _____
2. Agent's Name _____

3. Agent's Address, City, State, Zip: _____
4. Type of Insurance _____
5. Value of Insurance or Premium Coverage _____

II. OWNER INCOME INFORMATION

A. Employment and Financial Record

1. Employer _____
2. Address _____
3. City, State, Zip _____
4. No. of Yrs. Employed _____
5. Gross Monthly Income _____

Employment (Spouse)

1. _____
2. _____
3. _____
4. _____
5. _____

B. Other Income

1. Social Sec. Benefits _____ Monthly
2. Soc. Sec. Number _____
3. Soc. Sec. Office Address
- _____
- _____
- _____
4. VA Benefits _____ Monthly
5. VA Account No. _____
6. VA Office Address
- _____

Other Income (Spouse)

1. _____ Monthly
2. _____
3. Soc. Sec. Office Address
- _____
- _____
- _____
4. _____ Monthly
5. _____
6. VA Office Address
- _____

7. Pension _____ Monthly

7. _____ Monthly

8. Pension No. _____

8. _____

9. Name & Address of Pension Office

9. Name & Address of Pension Office

C. Additional Monthly Income

Additional Monthly Income (Spouse)

1. Annuities _____

1. _____

2. Bonds/Securities _____

2. _____

Bank Name and Address

Bank Name and Address

3. Interest Income _____

3. _____

Account, Source and Address

Account, Source and Address

4. ADC Amount _____ Source

5. Alimony Amount _____ Source

6. Child Support _____ Source Case # _____

7. Rental Income _____

8. Other income (describe) _____

III. MONTHLY HOUSING EXPENSES

A. Mortgage, Utilities and Insurance

1. Monthly Mortgage Payment _____

2. Annual Insurance Premium _____

3. Average Electric Bill _____ Average Gas Bill _____

Account No. _____ Account No. _____

Company Name and Address _____ Company Name and Address _____

IV. HOUSEHOLD SIZE

A. Total Number of Persons in Household _____

B. Number of Minors (under age 18) in Household _____

V. DESCRIPTION / LIST OF UNSAFE / HAZARDOUS / MAJOR PROBLEMS

End of Application 6 Pages.