

Sacred Heart/Sackett Tract

The Community Initiatives Program – Mini-Grant Application – Investor Owner

Mini-Grants apply to exterior improvements only. The program is available regardless of income, on a first come, first served basis.

Please complete the following application to the best of your ability. Return the completed application and all required documents to Home HeadQuarters, Inc. at 990 James Street, Syracuse, NY 13203

Fax: 474-0637; Phone: 474-1939

PLEASE PRINT

Name of Applicant _____

Name of Co-Applicant _____

Applicant Mailing Address (Street, Zip) _____

Address of Property to be improved (Street, Zip) _____

Home Phone _____ Work Phone _____

Cell Phone _____ Email Address _____

Property Deed in Name of _____

Number of Units _____

Including yourself, please list all persons in your household and provide the information below. **PLEASE NOTE:** Income is only required for reporting purposes – this is not an income-based program.

<i>Name</i>	<i>Date of Birth</i>	<i>Total Gross Annual Earnings</i>	<i>Source of Income</i>
1. _____	_____	_____	_____
2. _____	_____	_____	_____
3. _____	_____	_____	_____
4. _____	_____	_____	_____
5. _____	_____	_____	_____

Do you reside at the above address? _____ Do you have homeowners insurance? _____

Are your property taxes paid to date? _____ Is your water bill paid to date? _____

PLEASE NOTE:

- *If you are tax delinquent, you may still apply, however you must be up to date before receiving mini-grant funds.
- * Grant up to \$2,500.00
- *Investor-Owner must match 100% or 1:1 of grant for a possible total investment of \$5,000
- *For exterior improvements only
- *Contractor must use lead safe work practices



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INFORMATION FOR GOVERNMENT MONITORING PURPOSE

The following information is requested by the Federal Government for certain types of loans related to a dwelling in order to monitor the lender's compliance with equal credit opportunity, fair housing and home mortgage disclosure laws. You are not required to furnish this information, but are encouraged to do so. The law provides that a Lender may not discriminate either on the basis of this information, or on whether you choose to furnish it. If you furnish the information, please provide both ethnicity and race. For race, you may check more than one designation. If you do not furnish ethnicity, race, or sex, under Federal regulations, this lender is required to note the information on the basis of visual observation and surname if you have made this application in person. If you do not wish to furnish this information, please check the box below. (Lender must review the above material to assure that the disclosures satisfy all requirements to which the lender is subject under applicable state law for the particular type of loan applied for.)

BORROWER <input type="checkbox"/> I do not wish to furnish this information	CO BORROWER <input type="checkbox"/> I do not wish to furnish this information
Ethnicity <input type="checkbox"/> Hispanic or Latino <input type="checkbox"/> Not Hispanic or Latino	Ethnicity <input type="checkbox"/> Hispanic or Latino <input type="checkbox"/> Not Hispanic or Latino
Race <input type="checkbox"/> American Indian, Alaskan Native <input type="checkbox"/> Black or African American <input type="checkbox"/> Native Hawaiian or Other Pacific Islander <input type="checkbox"/> Asian American <input type="checkbox"/> White	Race <input type="checkbox"/> American Indian, Alaskan Native <input type="checkbox"/> Black or African American <input type="checkbox"/> Native Hawaiian or Other Pacific Islander <input type="checkbox"/> Asian American <input type="checkbox"/> White
Sex <input type="checkbox"/> Male <input type="checkbox"/> Female	Sex <input type="checkbox"/> Male <input type="checkbox"/> Female

Before submitting this application:

- Provide a copy of your property deed & proof of homeowner's insurance
- Don't forget to sign the application

I certify that all statements made in this application are true and are made for the purpose of requesting home improvement services. I understand that it may be 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 provision of the United States Criminal Code.

This Request For Service in no way guarantees or implies funding and/or service through Home HeadQuarters, its agents and/or assignees.

Applicant's Signature _____ Co-Applicant's Signature _____

Next Steps: Completed application will be reviewed by Home HeadQuarters staff. Once you have been approved, a construction inspector will contact you to make an appointment to review the work you want to have completed. They will then prepare a scope of work for you to give to potential contractors to obtain cost estimates. The inspector will work with you to maximize the work to be done.

