

City of Woonsocket, RI

HOMEOWNER'S APPLICATION

Woonsocket Lead Hazard Reduction Program

All information supplied will be kept completely confidential. At any time during the application process, the tenant may contact the City of Woonsocket Lead Hazard Reduction program manager to answer any questions. Please call 401-762-6400 ext. 2963 for all inquiries.

Applicant Name:			
Spouse:			
Mailing Address:		Zip Code:	
Telephone #: Work Telephone #: _			
Email Address:			
PROPERTY TO BE ABATED			
Address:			
Number of Units:	Do you live on the property?		
Owner(s) of property listed on deed:			
Have you accessed funds through the C	City of Woonsocket before? □ YES	S □ NO IF yes, when?	
First mortgage holder:			
Full address of mortgage holder:	□ same as mailing address		
Original amount of mortgage:	\$		
Unpaid balance:	\$		
IS YOUR MORTGAGE A FEDERAL	L HOUSING ADMINISTRATIO	N (FHA) MORTGAGE? □ YES □ NO	
What is your monthly mortgage payment?		\$	
Does your mortgage payment include real estate taxes?			
Does your mortgage payment include	homeowner insurance?		
IF NO, how much is your annual homeowner insurance premium?		\$	

Second Mortgage/Equity Line:	
Full address of mortgage holder:	
Original amount of loan:	\$ Current Balance: \$
Monthly payment:	\$

REQUIRED INCOME INFORMATION

List **ALL** household members including yourself, all adults & children - *even if an individual has no income.*

Name	Age	Relationship to applicant	Social Security	Race (*optional)	Gross Monthly Income

*Race: W=White, B=Black, H/L=Hispanic/Latino, N=Native American or Alaskan Native, A=Asian or Pacific Islander, O=Other. The above race/national origin information has been requested by the Department of Housing and Urban Development for monitoring purposes only. You are not required to furnish this information. The law provides that a lender may neither discriminate based on this information, nor on whether you chose to furnish it. This information is provided in compliance with federal requirements and is subject to verification.

*List all household income as per IRS form 1040 definition of gross income, includes but is not limited to; wages, salary, bonuses, interest, dividends, rents, royalties, income from operating a business, alimony, pensions, annuities, share of income from partnerships and S corporates, and income tax refunds.

HOUSEHOLD MEMBER (1)	HOUSEHOLD MEMBER (2)	
Present Employer:	Present Employer:	
Company:	Company:	
Address:		
Zip:	Zip:	
Number of years: Phone:	Number of years: Phone:	
Position:	Position:	
	WIHD Count Down 214	

Gross Monthly Income:		Gross Monthly Income:
ADDITIONAL MONTHLY IN	COME:	
Average overtime earning: \$		Average overtime earning: \$
Part time/seasonal employment:	\$	Part time/seasonal employment: \$
Retirement/pension income: \$ _		Retirement/pension income: \$
Social Security (SSI): \$		Social Security (SSI): \$
Child Support/Alimony: \$		Child Support/Alimony: \$
FIP Benefits: \$		FIP Benefits: \$
Other Income: \$		Other Income: \$
Explain Other:		Explain Other:
ASSET INCOME:		
Checking Acct (6 month balance	e) \$	
Savings Acct (current balance)	\$	
401(k)	\$	
IRAs	\$	
CDs	\$	
Other Assets	\$	
Evplain Other.		

Borrowers' Certification

I/We certify that the statements contained in this application and certification are true and correct to the best of my/our knowledge and belief.

I/We certify that the information given on household composition and income is accurate and complete to the best of my/our knowledge and belief.

I/We understand that if any statement contained in this application and certification is not true or correct, I/We may be subject to criminal persecution or, ass applicable, my/our loan application may be denied or the property improvements with the proceeds of the loan maybe foreclosed upon.

I/We further understand that the final decision regarding approval of this application will be made by the City of Woonsocket, Division of Planning.

I/We certify that no illegal unit(s) exists within the subject property. Any property containing one or more illegal units shall be disqualified from participation in this program. If upon mandatory inspection, and illegal unit is discovered, the unit must be deconstructed, or this application will be terminated. An illegal unit is defined as an additional housing unit not originally intended for occupancy which includes living space, plumbing and electrical service, full bathroom, and kitchen facilities.

Name	Signature	Date	
Name	Signature	Da	te
Have you been cited for	r any code violations at this property?	□ YES	□ NO