

The City of Woonsocket Lead Hazard Reduction Program

HOMEOWNER REQUIRED INCOME/HOUSEHOLD INFORMATION

Homeowner Checklist

Copy of the Documents you must provide:

All applicants:

- □ Application completed in full and signed by all appropriate homeowners
- □ Blood lead level for any children under 6 residing or visiting the unit (A notarized letter by the parents is also required; stating number of hours they are in the house weekly.
- □ Photo ID
- □ Warranty Deed with exhibit A
- \square Your most recent mortgage statement
- □ A statement indicating the annual premium for your homeowner's insurance

If currently employed:

□ The last four weeks *consecutive* pay stubs for <u>each household member earning income</u>.

 \Box A complete, signed copy of the CURRENT federal tax return or an official IRS Transcript for <u>each person</u> <u>living in the household</u> who is required to file a return.

This complete copy must include all schedules, all W-2 and 1099 forms. Obtain a copy of your official IRS Transcript: <u>https://www.irs.gov/individuals/gettranscript</u>

If currently receiving assistance:

□ A current statement of benefits from social security

https://www.ssa.gov/myaccount/ Phone: (877) 229-3542

 $\hfill\square$ A current statement from your pension holder indicating your gross monthly pension

- \square A compensation letter from the VA
- □ Person(s) claiming no income must complete a NO INCOME STATEMENT

 \Box A letter from your social service agency describing your monthly award if you receive public assistance LIHEAP Award letter: Phone: (401) 235-6000

SNAP, MEDICAID, RI WORKS Award letter: <u>https://healthsourceri.com/</u> Phone: <u>(855) 840-4774</u> OR DHS Office: Phone: <u>(855) 697-4347</u>

If self-employed:

□ Profit and loss (Past six months) notarized.

□ Two most recent years of tax returns