

See the "Application Checklist" sheet for additional submittal requirements.

Return Home Repair Application & submittals to: Dept. of Community Development 301 N. Broadway Moore, OK 73160 (Phone): 405-793-4571 cdbq@citvofmoore.com

APPLICATION CHECKLIST

Please submit the relevant documents or items for your application review. Submit only the documents relevant to your household.

1. Government-Issued ID

- Provide a valid identification issued by the government.
- - A copy of the deed or a title abstract prepared by a licensed title company within the past six months.

3. 🗌 Federal Tax Return

- Most recent federal tax return, including all schedules and attachments.
- 4. Income Statements
 - Past two (2) months of Income Statements from stocks, bonds, royalties, certificates of deposit, money market funds, and other incomegenerating investments.
- 5. Difference Household Employment Payroll
 - Past two (2) months of payroll stubs for all employed household members including the applicant and joint applicant who are employed.

6. 🗌 Bank Statements

- Three (3) most recent months of checking and/or savings account statements.
- 7. I Mortgage Payment History
 - Current pay history from the mortgage company including the original amount, current balance, monthly payment, and escrow payment.
- 8. Home Insurance Policy
 - Documentation showing your current home insurance coverage.
- 9. 🗌 Real Estate Income
 - Information on real estate or property from which you collect income or in which you have an ownership interest.

10. 🗌 Income Assistance Statements

• Provide letters or statements for all household members receiving Social Security, Temporary Assistance for Needy Families, VA benefits, pensions, child support, alimony, interest income, or other sources.

11. Divorce Decrees

• If applicable.

12. Death Certificate

Required if the deceased spouse's name is on the deed or title of the home.

13. Other Assistance Letters

- If applicable.



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Briefly Describe the Home Repairs Needed

SECTION I – HOUSEHOLD INFORMATION

Property Address										
Property Address:				City:		State:	Zip	o Code:		
Applicant Information										
Applicant Name:			Social Security Number:							
Current Address:					City:		State:	2: Zip Code:		
Phone: Work Phone:						Email:				
Joint Applicant Information		•				•				
Applicant Name:				Social	Security Num	ber:				
Current Address:				City: Si			State:	State: Zip C		
Phone:		Work Ph	one:			Email:				
Household Members Informa	tion	*All persons cur	rently living in	the hous	ehold must be	identified.				
Name	Age	Social Securit	y # Full-Tim	e Studer	nt Race	Eth	inicity	Relation to	Applicant/	Joint Applicant
			Y	/ N						
			Y	/ N						
			Y	/ N						
			Y	/ N						
				/ N						
SECTION II - HOUSEHOLD IN										
Self-Employed Household Me	mber	s Information	*Persons w	vho are se	elf-employed m	ust provide	tax returns	from the pa	st three (3)	years.
Name		E	2021 Self- mployment Income		2022 Self- Employment Income		2023 Self- Employment Incom			4 Anticipated -Employment
		\$			\$		\$		\$	
		\$	\$		\$		\$		\$	
		\$	\$		\$		\$		\$	
		\$	\$		\$		\$		\$	
		\$			\$		\$		\$	
		\$			\$		\$		\$	
Employed Household Membe	rs Inf			1	-			1		
Name	Employer		Hourly Wage		Gross Salary		Total Annu	ual Income	Pay Frequency	
				\$		\$		\$		
				\$		\$		\$		
				\$		\$		\$		
				\$ ¢		\$\$		\$		

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c L	child support, dividends, interest	t income, pens	ion benefits, royalties	not limited to: alimony, annuities, 5, Social Security, Social Security nefits, and any other sources of	
Name	Income Type		Total N	Monthly Amount	
			\$		
			\$		
			\$		
			\$		
			\$		
			\$		
			\$		
			\$		
			\$		
	N [CONTINUED] counts (checking, savings, broken conths of account statements are		nt, money market, etc	.) held by the Applicant or Joint	
Account Name	Account Type		Current Balance		
			\$		
			\$		
			\$		
			\$		
			\$		
			\$		
			\$		
			\$		
			\$		
SECTION III – PROPERTY FINANCIAL STATUS					
Do both the Applicant and Joint Applicant's names appe	ear on the title of the proper	ty? O Yes	O No		
If no, which name is not listed on the title of the proper	rty?	О Арр	licant 🛛 Joint App	plicant O Both	
Is there a mortgage on the property?			O No		
If yes, please list mortgage company information:					
1 st Mortgage Name:					
Address:	City:	State:	Zip:		
2 nd Mortgage Name:					
Address:	City:	State:	Zip:		
Account Number:	Loan Balance: \$		Monthly Payment:	\$	
Are taxes and insurance included in the mortgage paym	nent?	O Yes	O No		
Are all mortgage payments current?		O Yes	O No		
Do you have a conversion mortgage?		O Yes	O No		
Are there currently any real property liens, judgments,	O Yes	O No			
Do you own any rental property?	O Yes	O No If yes, o	complete the following:		



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Rental Property Address	City	State	Zip Code

If yes, what is the current monthly total income for <u>all</u> properties combined? \$

SECTION IV - ASSISTANCE RECEIVED

Did you receive any other assistance for the repair or rehabilitation of the property? O Yes O No If yes, complete the following: Group Name Providing Assistance Amount \$ \$ \$ \$ \$ \$ \$ \$ \$

SECTION V - CERTIFICATION

U.S.C TITLE 18, SEC. 1001, "Whoever, in any matter within the jurisdiction of any department or agency of the United States knowingly and willfully falsifies...or makes any false, fictitious or fraudulent statement or representation, or makes or uses any false writing or document knowing the same to contain any false, fictitious or fraudulent statement or entry, shall be fined not more than \$10,000.00 or imprisoned not more than five (5) years, or both." I have read and understand the foregoing statement:

APPLICANT SIGNATURE:	DATE:
JOINT APPLICANT SIGNATURE:	DATE:
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