



For Office Use Only

Date _____
Year Built _____
Taxes _____
\$ Source _____ HOME _____
Flood Plain _____

Venango County Housing Rehabilitation Program

Administered By
The Venango County Regional Planning Commission
1168 Liberty Street
Franklin, Pa., 16323
(814) 432-9547

1. APPLICANT NAME _____ CO-APPLICANT NAME _____
2. ADDRESS _____

3. MUNICIPALITY _____
4. PHONE NUMBER (Home) _____ (Work/Other) _____
5. SOCIAL SECURITY #S (Applicant) _____ (Co-Applicant) _____
6. NAME(S) ON DEED (1) _____
(2) _____
7. CAN YOU PROVIDE A COPY OF DEED OR TITLE TO VERIFY OWNERSHIP _____
8. IS PROPERTY IN A FLOOD PLAIN? _____ IF SO, DO YOU HAVE FLOOD INSURANCE? _____

8b. Please have insurance company fax a copy of HOMEOWNERS insurance. [Fax: (814) 432-9679]

Please have insurance company fax a copy of FLOOD insurance, if property is in FLOOD PLAIN. [Fax: (814) 432-9679]

IF YOUR HOME WAS BUILT BEFORE 1978, YOU WILL HAVE A LEAD TEST. IF LEAD IS PRESENT, YOUR CONTRACTOR MUST GIVE YOU AN INFORMATION PAMPHLET.

9. PLEASE LIST THE ISSUES THAT HAVE PROMPTED YOU TO REQUEST A HOUSING REHABILITATION GRANT

[illegible]

10. NUMBER OF BEDROOMS IN THE HOME _____

11. ARE YOUR BOROUGH AND COUNTY PROPERTY AND SCHOOL TAXES CURRENT? _____

12. PLEASE CHECK ALL THAT APPLY TO OWNER/APPLICANT

Senior Citizen

Disabled

Veteran

Racial Minority

13. HOUSEHOLD COMPOSITION AND INCOME (*List all occupants living in household. Income only counted if at least 18 years old*)

AGE

ALL SOURCES OF INCOME

Taxable & Non-Taxable

GROSS AMOUNT
per month or year

VERIFIED
for office use

[illegible]

14. ASSETS (List all assets, including cash savings, mutual funds, annuities, investments, and real property other than your own residence)

VERIFIED
for office use

**SECTION 1001 OF TITLE 18 MAKES IT A CRIMINAL OFFENSE TO
WILLFULLY PROVIDE FALSE INFORMATION TO ANY AGENCY WITHIN
THE JURISDICTION OF THE U.S. GOVERNMENT**

I (WE) CERTIFY THAT THE ABOVE STATEMENTS ARE TRUE AND COMPLETE, TO THE BEST OF MY (OUR) KNOWLEDGE. I (WE) ABSOLVE THE COUNTY OF VENANGO OF ALL LIABILITY CONNECTED WITH THE WORK TO BE DONE WITHIN COMMUNITY DEVELOPMENT BLOCK GRANT-FUNDED ASSISTANCE FOR WHICH I (WE) HEREIN APPLY.

SIGNATURE OF APPLICANT

DATE

SIGNATURE OF CO-APPLICANT

DATE

RETURN APPLICATION TO:

Venango County Regional Planning Commission
1168 Liberty Street
Franklin, Pa., 16323
Attn: Joshua Sterling, Community Development Planner