

Pre-Application for Town of Warrensburg

Housing Rehabilitation Program

The Town of Warrensburg is applying for a Community Development Block Grant, funded by the NYS Office of Community Renewal, for the purpose of providing housing rehabilitation funds to eligible Town residents.

- Applicant must own, occupy, and have title to a single family residence.
- The property must be located in the Town of Warrensburg limits.
- The property must be the applicants' primary residence.
- Applicant must be current with all local, school and property taxes.
- Applicant household must be within the income limits.
- Filling out this pre-application does not guarantee program participation.

Please return this pre-application via email to rebecca@flatleyread.com, by mail to "Warrensburg Housing Grant, 12 Spring Street #102, Schuylerville, NY, 12871", or in a sealed envelope to the Warrensburg Town Clerk's Office]

Applicants must meet all eligibility guidelines listed in this brochure. If a question doesn't apply to you, please write n/a.

Owner/Applicant Name(s): _____

Mailing Address (Physical): _____

Street Address (if different than above): _____

Home/Work Phone: _____ Cell: _____ Email Address: _____

Section/Block/Lot (found on your taxes) _____ Age of home: _____

Are taxes paid and up to date? _____ Do you have a mortgage? _____ Do you have homeowners insurance? _____

Total Household Income Limits

1 Person	2 Person	3 Person	4 Person	5 Person	6 Person	7 Person	8 Person
\$48,350	\$55,250	\$62,150	\$69,050	\$74,600	\$80,100	\$85,650	\$91,150

Is the total household income at or below the above limits for your household size? _____

Assistance is provided as a declining balance loan, *for which no payments are made* as long as the applicant maintains program eligibility. Sale of a program-assisted home may result in repayment of all or part of program funds to NYS. The declining balance loan becomes a grant upon completion of a 5 to 10 year regulatory period, depending on the amount of assistance. This pre-application is being submitted to establish a waiting list and does not guarantee program participation.

By signing below, I acknowledge that additional qualifying documents will be required if my pre-application is selected for the program. I also certify that the information provided is true and give permission to the Town of Warrensburg to verify.

Applicant Signature _____ Date _____