



## HOME IMPROVEMENT GRANT PROGRAM

---

This program is funded through the Community Development Block Grant for the purpose of issuing \$25,000.00 in home improvement grants to eligible residents in the City of Rahway. All homes must be owner-occupied.

### Typical Repairs

- Roofs
- Gutters and leaders
- Windows and Doors
- Heating
- Plumbing
- Painting
- Electrical
- Bathrooms
- Kitchens
- Vinyl Siding

### Required Documents

- Current Federal and State Income and Income Tax Forms
- Verification of Employment
- Mortgage Information
- A copy of your most recent tax bill
- A copy of your homeowners insurance policy
- Additional documents may be required to verify family size and income
- A copy of your deed

---

### 0% DEFERRED LOANS

---

This program is available to owner-occupants of one or two family dwellings whose gross income does not exceed the limits of the charts below:

Number of family members:	Gross income
1	\$52,850.00
2	\$60,400.00
3	\$67,950.00
4	\$75,500.00
5	\$81,550.00
6	\$87,600.00

---

### PROGRAM PROCESS

---

Upon review you will be contacted by Community Consultants, and informed of the additional documents needed to complete the application process and an appointment will be scheduled for verification.

Your home will be inspected and a bid package will be assembled and distributed to eligible contractors. The lowest bidder will receive the contract. You may request a registered, certified and insured contractor to bid on your repairs; however if they are not the lowest bidder, you must pay the difference.

Following homeowner's approval of the work completed, the city will pay the contractor directly. No payments are made to the homeowner.

The Home Improvement Grant Program provides a maximum grant of \$25,000.00.

**PRELIMINARY APPLICATION**

Date \_\_\_\_\_ EMAIL \_\_\_\_\_  
Phone (Home) \_\_\_\_\_ (Work) \_\_\_\_\_  
Address \_\_\_\_\_  
Social Security Number(s) \_\_\_\_\_ Date of Birth \_\_\_\_\_

**FAMILY COMPOSITION** (Names of all persons living in household)

Name	Relationship to Head	Age	Sex

**INCOME**

Name	Employer or Type of Income	Amounts
Self		

**BUILDING/HOUSE INFORMATION**

Block # \_\_\_\_\_ Lot # \_\_\_\_\_ # of Units \_\_\_\_\_

Name and Address of Mortgage Company  
\_\_\_\_\_  
\_\_\_\_\_

Second Mortgage, Lender's Name and Address  
\_\_\_\_\_  
\_\_\_\_\_

Balance of First Mortgage \_\_\_\_\_ Monthly Payment \_\_\_\_\_  
Balance of Second Mortgage \_\_\_\_\_ Monthly Payment \_\_\_\_\_

Name of Homeowners Insurance Company \_\_\_\_\_  
Do you Have a Copy of Your Deed? \_\_\_\_\_ Date of Deed \_\_\_\_\_  
Are You Receiving Alimony or Child Support Payments? \_\_\_\_\_  
Are You Presently or Have You Previously Been Involved With:  
Bankruptcy \_\_\_\_\_ Judgement \_\_\_\_\_ Lawsuit \_\_\_\_\_  
Have You Ever Applied for This Loan Previously? Yes \_\_\_\_\_ No \_\_\_\_\_  
Explain \_\_\_\_\_  
\_\_\_\_\_

Briefly describe the needed improvements \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Signature of Applicant \_\_\_\_\_

Signature of Applicant \_\_\_\_\_

WARNING; SECTION 100 ONE OF TITLE 18 OF THE U. S. CODE MAKES IT A CRIMINAL OFFENSE TO MAKE WILLFUL STATEMENTS OR MISREPRESENTATION TO ANY DEPARTMENT OR AGENCY OF THE U. S. AS TO ANY MATTER WITHIN ITS JURISDICTION.

Return To: Elton Armady, Economic Development Officer, 1 City Hall Plaza, Rahway NJ 07065