



Devington Community Development Corporation

Providing Innovative Solutions for Traditional Challenges

6004 East 46th Street, Indianapolis, Indiana 46226 / (317) 542-4000

HOMEOWNER INTAKE INFORMATION

Name: _____

Address: _____ PHONE _____

Total Number of People in your Household _____

| Name of Individuals in Household (list everyone) | Relation | Sex | Age |
|--|----------|-----|-----|
| | Self | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |

Is this a female Head of Household? Yes No
 Handicapped/Disabled Yes No

PLEASE LIST REQUESTED REPAIRS

1. _____
2. _____
3. _____

Please itemize household income by source and attach verification:

| SOURCE | AMOUNT (per week, month, or year) | For Office Use Only: Verification Attached? |
|-----------------------------------|-----------------------------------|---|
| SALARIES & WAGES | \$ PER | |
| RETIREMENT/PENSION | \$ PER | |
| SOCIAL SECURITY | \$ PER | |
| OTHER (please itemize) | \$ PER | |
| | \$ PER | |
| For Office Use Only: TOTAL | \$ PER YEAR | |

PLEASE ATTACH COPIES (Originals will not be accepted) OF YOUR:

- Deed to your home (to verify ownership) a copy must be submitted with this application!!
- Most recent property tax receipt
- Verification of all income (tax return, Social Security statement, pay stub, etc.)
- Proof of homeowner's insurance

PLEASE CHECK ALL THAT APPLY (for demographic information only):

- Native Hawaiian/Other Pacific Islander Caucasian
 American Indian/Alaskan Native & White Asian
 Black/African American Black/African American & White
 Asian & White American Indian/Alaskan Native
 American Indian/Alaskan Native & Black/African American
 Hispanic/Latino Other

This affidavit certifies that all information provided to Devington Community Development Corporation in my application for the 2010 home repair program is true and complete to the best of my knowledge, and inquiries may be made to verify.

Signature

Date

DEADLINE: ASAP!!!

Funding for this project is provided by The City of Indianapolis and The U.S. Department of Housing & Urban Development (HUD).

For office use only: Exceed low moderate income? Yes _____ No _____

Census Tract _____ Date ____/____/____