PRE-APPLICATION FOR HOMEOWNERS WASHINGTON COUNTY HOME REHABILITATION PROGRAM

Please complete this form and return BY MAIL ONLY to:

Redevelopment Authority of the County of Washington 100 West Beau Street, Suite 603 Washington, Pennsylvania 15301

1.	Owner(s) Name(s):				
2.	Property Address:				
	1 0	No.	Street		
	-				
		City	State	Zip	
3.	Municipality:	(City, Township, or Borough)			
4.	Phone Number (Ho	me):	(Work):	(Cell):	
5.	Email Address:				
6.	Do you own AND	occupy this propert	ty/land? Yes	No	
7.	If YES, approximat	e date of purchase	:		
8.	What year was the l	nouse constructed?):		
9.	=		done through the Rede		
10	. Are you currently	in bankruptcy? Yo	es No Delir	nquent Taxes? Yes No	
11	. Number of person	s, including yourse	elf, living at this address	::	
12	. Do you file a Fede	eral Income Tax Re	eturn?		
13	. Household Compo	every person living at this address Source (i.e. Social Security, Employment,			
	Name(s)	AGE	Monthly Amount of Gross Income	Pension, Interest, Etc.)	
1.					
5.					
6					

14.	Asset Information: (List all checking and savings accounts including Certificates of Deposit of all household members.)					
	FAMILY MEMBER	BANK NAME	CURRENT BALANCE			
	List value of all stocks, bo	value of all stocks, bonds, trusts, or other assets:				
	NOTE: All financial inform determining eligibility for	and is used only for the purpose of				
15.		esident Alien? Yes No ty Card, Birth Certificate, a	o You may be required to submit a nd / or Green Card.			
16.	Please list the problems yo	u are having with your hous	se:			
Cre of t	dit Opportunity Act, and the	e Rehabilitation Act of 1973 oes not discriminate on the	erican Disabilities Act of 1990, the Equal 3, as amended; the Redevelopment Authority basis of race, color, religion, sex, handicap,			
fals with to p	e statements or misrepresen hin its jurisdiction. In addition	ntation to any department or on, if you give false informat	e makes it a criminal offense to make willfully agency of the United States as to any matter ion or fail to report any income, you may have on your behalf, as well as standing a chance of			
Ow	ner(s) Signature:	Da	.te:			
Ow	ner(s) Signature:	Da	te:			