



Home Repair Program Waiting List Application



Today's Date: _____

1. Full Name: _____
2. Address: _____ City: _____ State: _____ Zip: _____
3. Mailing Address: _____ City: _____ State: _____ Zip: _____
4. Phone Number(s): _____
5. E-Mail Address: _____
6. Who owns your home? _____ I do. _____ Someone else (_____)
7. County where home is located: _____
8. Is your home a mobile home? _____ Yes _____ No
9. Describe your home repair/rehabilitation needs (continue on back if needed).

10. Are you current on your mortgage (required)? _____ Yes _____ No
11. Do you have homeowner's insurance (generally required)? _____ Yes _____ No
12. Based upon your household size (all children and adults living in the home or listed on the deed), is your household income (cumulative income of all adults living the home or listed on the deed) below the limit in the following table (required)?

13. _____ Yes _____ No (circle the number of people in your household below)
 (*Income limits vary based upon the source of funds being used by NIACOG. The figures below are an approximation.)

Program Income Limits	1	2	3	4	5	6
Cerro Gordo	\$35,700	\$40,800	\$45,900	\$51,000	\$55,080	\$59,160
Floyd	\$35,100	\$40,080	\$45,120	\$50,100	\$54,120	\$58,140
Franklin	\$35,100	\$40,080	\$45,120	\$50,100	\$54,120	\$58,140
Hancock	\$35,700	\$40,800	\$45,900	\$50,940	\$55,020	\$59,100
Kossuth	\$35,100	\$40,080	\$45,120	\$50,100	\$54,120	\$58,140
Mitchell	\$35,100	\$40,080	\$45,120	\$50,100	\$54,120	\$58,140
Winnebago	\$35,100	\$40,080	\$45,120	\$50,100	\$54,120	\$58,140
Worth	\$35,940	\$41,040	\$46,200	\$51,300	\$55,440	\$59,520

14. Are your liquid cash assets less than \$25,000 including cash on hand, checking/savings, stocks that you can withdraw funds from without a penalty, etc. (required)? _____ Yes _____ No
15. Date of birth of oldest member in household: _____; Over 65? Yes _____ No
16. Is someone in your household disabled? _____ Yes _____ No
17. Do children under 6 years of age live in your home OR regularly visit at least twice a week for at least 3 hours/day for a total of at least 60 hours
18. Have you previously received funds from NIACOG Housing Trust Fund? _____ Yes _____ No
19. Is someone in your household a United State Veteran? _____ Yes _____ No