



**GRANT APPLICATION  
FOR  
REHABILITATION /RENTAL REHABILITATION PROPERTY**

|                  |      |      |      |       |      |  |
|------------------|------|------|------|-------|------|--|
| Property Address |      |      |      |       |      |  |
| City             |      |      |      | State | Zip  |  |
| Total # of Units | 1-BR | 2-BR | 3-BR | 4-BR  | 5-BR |  |
| # of Stories     |      |      |      |       |      |  |

Details on current occupancy - including current rent: \_\_\_\_\_

Purpose of Grant - (Explain) \_\_\_\_\_

Description of the management of the property & experience of the firm or individuals, (use additional page & attach to application if necessary) \_\_\_\_\_

Owner's previous experience with th Authority? (Use additiona page if needed): \_\_\_\_\_

Estimated Improvement Cost \$ \_\_\_\_\_

| APPLICANT                    |  |  | CO-APPLICANT |  |  |
|------------------------------|--|--|--------------|--|--|
| Full Legal Name              |  |  |              |  |  |
| Age / Social Security Number |  |  |              |  |  |
| Present Address/ How Long    |  |  |              |  |  |
| Home Phone / Business Phone  |  |  |              |  |  |
| Previous Address/ How Long   |  |  |              |  |  |
| Employer                     |  |  |              |  |  |
| Employer Address             |  |  |              |  |  |
| Employer Phone Number        |  |  |              |  |  |
| Occupation                   |  |  |              |  |  |
| Time on Job (yrs/Mos) / Rate |  |  |              |  |  |

AGREEMENT: The undersigned applied for the grant indicated in this application, and represents that the property will not be used for any illegal or restricted purpose and that all statements made in this application are true and are made for the purpose of obtaining the grant. Verification may be obtained from any source named in this application. The original or a copy of this application will be retained by the grantor. I/we fully understand that it is a federal crime punishable by fine or imprisonment, or both, to knowingly make any false statements concerning any of the above facts as applicable under the provisions of Title 18, United States Code, Section 1014. I/we acknowledge that a copy of the Department of Housing and Urban Development's Housing Quality Standard is included with this Rental Rehabilitation Grant Application. I/we acknowledge that a copy of the brochure "Protect your Family from Lead in Your Home" is included in the Grant Application and I/we will provide the current tenant(s) with a copy.

Applicant's Signature \_\_\_\_\_ Date \_\_\_\_\_

Co-Applicant's Signature \_\_\_\_\_ Date \_\_\_\_\_



**We Do Business In Accordance With the Federal Fair Housing Law**

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