## HOUSING REHAB PRELIMINARY APPLICATION

If you would be interested in applying for a low-interest loan to improve your home, please fill out the following questions.

NAME:		AGE:						
ADDRESS:							_	
CITY, STATE, ZIP:							_	
PHONE:							_	
Do you own your home:	Yes	No						
What is the condition of your	home?	_ Good	Fair	Dilapida	ted			
Names of all residents in your	home (inclu	ding elderly	·):					
		Age				Ag	ge	
		Age				Ag	ge	
		Age	<u> </u>			Ag	ge	
Is the total annual gross income household 18 years of age or of for Knox County as reflected income limit in the chart below	older, who ar n the chart b	e not full-tir	ne students,	less than the of person	e established as in your ho	d low-to-mo ousehold, ple	derate incorease refer to	ne limit
Number of persons in Household	1	2	3	4	5	6	7	8
Income Limit (\$) Effective May 15, 2017	35,100	40,100	45,100	50,100	54,150	58,150	62,150	66,150
My household income is LESS	S than the est	tablished lin	nit. OR	My house	ehold income	e is ABOVE	E the establis	shed limit.
Signed:			310	112) 110 000				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
Applicant			Co-Applicant			Date		

PLEASE SEND THE COMPLETED APPLICATION TO:

CDS Inspections & Beyond

Randy & Leigh Alexander 53506 862 Road, Plainview, NE 68769-2118 If questions, please call CDS at (402) 582-3580 or email at info@cdsne.com

