

OFFICE OF THE CITY ENGINEER- 1120 MONROE AVENUE NW, Grand Rapids 49503
APPLICATION FOR SIDEWALK REPAIR ASSISTANCE – GRANT ELIGIBLE PROPERTY OWNERS

NAME: _____
 ADDRESS: _____
 TELEPHONE NO: _____

PRIMARY RESIDENTIAL EXEMPTION: YES NO

TABLE OF ANNUAL HOUSEHOLD INCOME

Household Size-Persons	1	2	3	4	5	6	7	8
Income Limit	\$20,850	\$23,800	\$26,800	\$29,750	\$32,150	\$34,550	\$36,900	\$39,300

HOUSEHOLD MEMBERS

HOUSEHOLD INCOME

Name

Age

Monthly Income

Source of Income

_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Written verification of all household gross income must be attached to qualify for assistance. Household Income excludes the earnings of minor children, full-time students, and the value of food stamps or other non-cash assistance provided by other public agencies.

APPLICANT CHARACTERISTICS: Female Head of Household: YES NO

Race: Please circle the appropriate box

White	Black/ AA	Asian	Am. Indian/ Alaskan Native	Native Hawaiian/ Other Pacific Islander	Am. Indian/ Alaskan Native & White	Asian & White	Black/AA & White	American Indian/ Alaskan Native & Black/ African American	Other Multi- Racial
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I certify that, to the best of my knowledge, the information stated on this application is true and factual. I give permission to any person to release information that will verify information in this application. I also understand that any false statement or misrepresentation of information will cancel any/all agreements entered into with the City Engineer's Department.

 APPLICANT SIGNATURE

 DATE

 APPLICANT SIGNATURE

 DATE

ALL INFORMATION REQUESTED ABOVE MUST BE COMPLETED

FOR OFFICE USE ONLY:

Parcel Number: _____ Low Income _____ Extremely Low Income

Total Expected Annual Household Income: _____ Household Size: _____

Income verified by: _____ Date: _____