



RENSELAER COUNTY  
HOUSING  
RESOURCES



## Access to Home Program Application

### APPLICANT

Please Print Clearly

Name: \_\_\_\_\_  
First MI Last  
 PO BOX? \_\_\_\_\_

Street \_\_\_\_\_  
 City State Zip Code City State Zip Code

Home: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Work: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_  
 \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
Social Security Number Birth Date

**Race (please circle):**

- |                    |   |   |
|--------------------|---|---|
| 1. White           | 2. Black or African American              | 3. American Indian/Alaskan Native           |
| 4. Asian           | 5. Native Hawaiian/Other Pacific Islander | 6. American Indian/Alaskan Native and White |
| 7. Asian and White | 8. Black/African American and White       | 9. American Indian/Alaskan Native and Black |
| 10. Other          |   |   |

**Ethnicity** (please select "yes" or "no" for Hispanic Origin. You should select both a "Race" category and a "yes" or "no" for Hispanic origin:

**Hispanic:** Yes No

**Immigrant Status** (please circle one): 1. You are U.S. born 2. You are foreign born

**Marital Status (please circle):** 1. Single 2. Married 3. Divorced 4. Separated 5. Widowed

**Gender (please circle):** Male Female

**Are you a veteran?** Yes No

**Are you disabled?** Yes No

**Education (please circle one):**

- |                              |                                      |
|------------------------------|--------------------------------------|
| 1. Below High School Diploma | 2. High School Diploma or Equivalent |
| 3. Two-Year College          | 4. Bachelors Degree                  |
| 5. Masters Degree            | 6. Above Masters Degree              |

### CO-APPLICANT

Name: \_\_\_\_\_  
First MI Last  
 \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
Social Security Number Birth Date

**Race (please circle):**

- |                    |   |   |
|--------------------|---|---|
| 1. White           | 2. Black or African American              | 3. American Indian/Alaskan Native           |
| 4. Asian           | 5. Native Hawaiian/Other Pacific Islander | 6. American Indian/Alaskan Native and White |
| 7. Asian and White | 8. Black/African American and White       | 9. American Indian/Alaskan Native and Black |
| 10. Other          |   |   |

**Ethnicity** (please select "yes" or "no" for Hispanic Origin. You should select both a "Race" category and a "yes" or "no" for Hispanic origin) Hispanic Origin: **Yes No**

**Immigrant Status** (please select one): 1. You are U.S. born 2. You are foreign born

**Marital Status (please circle):** 1. Single 2. Married 3. Divorced 4. Separated 5. Widowed

**Gender (please circle):** Male Female

**Are you disabled?** Yes No

**Education (please circle one):**

- |                              |                                      |                         |
|------------------------------|--------------------------------------|-------------------------|
| 1. Below High School Diploma | 2. High School Diploma or Equivalent | 3. Two-Year College     |
| 4. Bachelors Degree          | 5. Masters Degree                    | 6. Above Masters Degree |

**Relationship to Applicant (please circle):** Spouse Daughter Son Sister Brother Girlfriend  
 Boyfriend Mother Father Other: \_\_\_\_\_

**REFERRED FROM**

How did you hear about us?? (Please circle all that apply):

Print Advertisement      Bank      Government      Senior Center      Dept of Aging  
Staff/Board member      Walk-In      Friend      Library      Newspaper Article

If you were referred by a bank, which one? \_\_\_\_\_

If referred by another source not listed above, which one? \_\_\_\_\_

**INCOME**

What is your family income? \_\_\_\_\_

Where does your income come from? \_\_\_\_\_

Number of people in household: \_\_\_\_\_ Age & Relationship: \_\_\_\_\_

**PROPERTY**

What are the Accessibility repairs you are seeking?  
\_\_\_\_\_

Do you own and occupy the home for which you are seeking repairs? Yes No

Is your mortgage paid off? Yes No If NO, what is the balance? \_\_\_\_\_

Are your taxes paid up to date? Yes No

Name(s) on deed: \_\_\_\_\_

Number of units in the building? \_\_\_\_\_

If more than one unit, how much do you collect in rent per month? \_\_\_\_\_

Have you received an estimate for this work? Yes No

If yes, how much was the estimate and who provided it? \_\_\_\_\_

**AUTHORIZATION and AGREEMENT**

- (a) I authorize Rensselaer County Housing Resources to discuss information on my financial situation, employment or related matters with representatives of other firms or agencies if the procedures are necessary in assisting me (us) with my (our) housing issue(s). I authorize Rensselaer County Housing Resources to pull my/our credit report to review my/our credit file for verification purposes. I understand that my (our) personal circumstances will be treated as totally confidential and that no information will be divulged to any party that is not involved in this situation.
- (b) I/We understand that any intentional or negligent representation(s) of the information contained on this form may result in civil liability and/or criminal liability under the provisions of Title 18 United States Code and Section 1001.
- (c) Applicant further certifies: that I am the occupant of the subject property and agree to maintain this home as my primary residence for a period of five (5) years from the start date of the repairs. Property Owner/Applicant further certifies: I understand that if, before the five year period expires, I sell, rent, or convey any interest in the subject property to other than an elderly/disabled low income person, or change the property's status as my primary residence then I must return any and all Access to Home investment to Rensselaer County Housing Resources.
- (d) I agree to make my home accessible to the approved contractor and other workers necessary for the period of time required to complete the repairs.

Applicant \_\_\_\_\_ Date \_\_\_\_\_

Co-Applicant \_\_\_\_\_ Date \_\_\_\_\_

Property Owner \_\_\_\_\_ Date \_\_\_\_\_

PLEASE NOTE: YOUR APPLICATION WILL BE CONSIDERED INCOMPLETE WITHOUT THE FOLLOWING DOCUMENTATION:

- Copies of your most recent income: SSI or Social Security Statements, Paystubs, Pension Statements, or Tax Returns & W-2's
  - A copy of property deed
  - Proof of Current Taxes and (if applicable) Mortgage
  - A copy of your birth certificate or driver's license
    - Documentation of Disability



Application Received Date: \_\_\_\_\_ Time: \_\_\_\_\_