Community Action Program Evansville
Owner Occupied Rehab/Windows Repair Program

Purpose: The City of Evansville and CAPE provide several programs to assist qualified homeowners to pay for repairs needed to their primary residence. This application helps to determine eligibility for many of these programs. Once you have completed this application, CAPE will determine if you are eligible and qualify for us to assist you with the repairs. Eligibility requirements are below:

Eligibility: To be eligible for these programs you must:

- ☐ Own the home outright or have a mortgage that is current on payments.
- ☐ Occupy the home for which repairs are to be made as your primary residence.
- ☐ Be located within the City limits of Evansville.
- ☐ Be current on all property taxes.
- ☐ Have home insurance.
- ☐ NOT intend to sell or relocate from this home within the next five (5) years.
- ☐ Meet the income requirements as listed below.

2024 HUD Income Guidelines Effective as of May 1, 2024				**2024 Poverty Guidelines**		
Household Size	30% of Median	50% of Median	80% of Median	125%	150%	200%
1 Person	$17,450	$29,100	$46,500	$18,825	$22,590	$30,120
2 Person	$19,950	$33,250	$53,150	$25,550	$30,660	$40,880
3 Person	$22,450	$37,350	$59,800	$32,275	$38,730	$51,640
4 Person	$24,900	$41,500	$66,400	$39,000	$46,800	$62,400
5 Person	$26,900	$44,850	$71,750	$45,725	$54,870	$73,160
6 Person	$28,900	$48,150	$77,050	$52,450	$62,940	$83,920
7 Person	$30,900	$51,500	$82,350	$59,175	$71,010	$94,680
8 Person	$32,900	$54,800	$87,650	$65,900	$79,080	$105,440

How many persons aged 18 and over live in the home: _____
How many children between the ages of 7 to 17 live in the home: _____
How many children aged 6 and under live in the home: _____
Total number of Household members (Please list on Page 2): _____

What is the total household income: $_____ Please see the chart, to confirm eligibility.

Address to be repaired/rehabilitated: _____, Evansville, IN _____

Who owns the Property (should be applicant)? _____

How long have you lived in the house: _____(Please provide approximate Month/Year)

If less than one-year, what was your previous address? _____

What type of repair do you need? ____ Roof _____HVAC _____Electrical _____ Plumbing

_____ Foundation _____ Weatherization Other, explain _____

Were you referred to this program by either the Building Commission _____
or Vanderburgh County Health Department _____

Who is in the household? This list should match the number of people reported on Page 1.

Name	Age	Social Security #	Marital Status

The primary contact should be listed as the Applicant. The Applicant must own the home. If the Applicant is married, the spouse must be listed as a Co-Applicant unless a legal separation exists.

	Applicant	Co-Applicant
Contact Information		
Name		
Phone		
Email		
Date of Birth		
Employment Please provide the name of the Previous Employer if at Current Employer for less than 3 years.		
Current Employer Name		
Address		
Contact		
Occupation		
Previous Employer		
Address		
Contact		
Occupation		

Government Monitoring Information I do not wish to furnish information on my race or sex_____	The following information is requested by the Federal Government for certain types of grants/loans to monitor agencies compliance with 24 CFR Part 107.30 regarding Nondiscrimination and Equal Opportunity in Housing under Executive Order 11063. You are not required to furnish this information but are encouraged to do so. The rehabilitation programs will not discriminate on the basis of this information, nor on your choice not to furnish information.	
Male (M) or Female (F)		
Caucasian, White		
African American, Black		
Asian		
American Indian/Alaskan or Hawaiian Native		
More than one Race		
Other Not Listed above		
Do you consider yourself to be of Hispanic Origin: Yes or No		

You must include income from all persons aged 18 or older who live within the Household.

	Applicant	Co-Applicant	Adult #3	Adult #4
Name				
Income (per month)				
Gross Income				
Social Security				
Pension				
T.A.N.F. Temporary Assistance to Needy Families				
Unemployment				
Child Support				
Rental				
Interest				
Other (explain)				
TOTAL:				
Housing Expenses				
1st Mortgage				
2nd Mortgage				
Gas & Electric				
Water & Sewer				
Property Taxes if not escrowed				
Home Insurance if not escrowed				
Other (explain)				
TOTAL:				
Other Fixed Expenses				
Car Payment				
Car Insurance				
Life Insurance				
Medical Insurance				
Cable				
Phone				
Other (explain)				
TOTAL:				

Please list all assets and debts of the Applicant and Co-Applicant.

Assets & Liabilities				
	Cash Value	**Annual Income**	**Bank Name**	**Account #**
Checking				
Savings				
Savings Bond				
Stocks				
Life Insurance				
Other (explain)				
Automobiles /Motor Vehicles	**Make**	**Year**	**Value**	**Loan Balance**
Mortgages or Contract Sales	**Address**	**Lender**	**Account #**	**Loan Balance**
Credit Cards	**Account #**		**Monthly Payments**	**Balance**

Other financial Information:

- Are there any outstanding judgments against you? Yes No
- Have you ever declared bankruptcy? Yes No
- Have you had property foreclosed upon or given title in lieu thereof? Yes No

  When _____ Where _____

- Are you currently party to a lawsuit? Yes No
- Are you obligated to pay alimony or child support? Yes No
  - Are you current with these obligations? Yes No
- Are your property taxes current? Yes No

Certification

The Applicant(s) certify that the above information and the information contained in any schedules which may be attached hereto are true, accurate and complete statements of financial condition as of the date stated herein. The Applicant(s) certify that they own the above stated property, unless otherwise noted.

The Applicant(s) fully understand and agree that they shall be disqualified from this program and from any program administered/funded through the City of Evansville's homeowner repair programs if any statement in this application is found to be purposely fraudulent.

Applicant's Signature	Co-Applicant's Signature	Date
Interviewer Signature	Agency	Date

Documentation:

You may be required to provide additional documentation to prove certain conditions. Applications are evaluated on the information provided; therefore, unanswered questions within the application or missing documentation may cause your application to be rejected. Please review with your partner, what documentation they require. Documentation could include the following:

- ☐ Driver's License or other Government Issued ID for Applicant and Co-Applicant.
- ☐ Social Security cards for ALL members of the household.
- ☐ Mortgage statement showing lender's name.
- ☐ Property Tax Receipt showing taxes paid for the most recent installment. If you do not have a receipt, you may go to the Assessor's site at https://engage.xsoftinc.com/vanderburgh, enter your address, click on 'Taxes' and then the most current year to print payment activity.
- ☐ Home Insurance Policy showing agent's name and contact information.
- ☐ Bank Statements for the past two months showing Bank Name and Address and Account Holder.
- ☐ Proof of Income for past two months (paystubs, social security or pension statements, ext.).
- ☐ Income Tax Return for most recent year end (include Schedule E if multiple properties are owned)
- ☐ Stock Statements (Form 1099-B, if applicable).
- ☐ Utility Bills for most recent month. If asking for HVAC or energy efficiency assistance, please provide 6 months.
- ☐ Credit Report – https://www.annualcreditreport.com is authorized to provide FREE credit reports through TransUnion, Equifax, and Experian.

The following documentation will be specific to the funding partner.

- ☐ Compliance with environmental restrictions and regulations, including but not limited to floodplain, historic preservation, lead-based paint, etc.
- ☐ General Release Form will be signed with the City or Non-Profit assigned to provide funding for the repairs.
- ☐ Verification of Mortgage or Deed of Trust may be required to enable the assigned provider to verify status of existing mortgages.
- ☐ Pre-Inspection Acknowledgement
- ☐ Authorization and Acknowledgements
- ☐ Indemnify and Hold Harmless