

City of Edmond CDBG Code Compliance Program Income Certification Form

The City of Edmond CDBG Department has received notice of, or a Code Enforcement Officer has identified, one or more hazardous structures on your property. If you qualify, the structure(s) could be removed by a contractor, supervised by the City of Edmond, at NO COST TO YOU. This program is funded by the City of Edmond CDBG Program and the US Department of Housing and Urban Development. ALL INFORMATION PROVIDED IS CONFIDENTIAL AND SUBJECT TO VERIFICATION.

Name of Property Owner/Applicant

Phone Number(s)

Street Address

Description of structure(s) on property to be removed

City, State, Zip

To Be Completed By Occupant

To be eligible, **household** income must be less than the dollar amounts below. Gross income shall include all earnings of all individuals who occupy the home, including children, relatives and unrelated residents.

- 1 person household - \$41,000
- 2 person household - \$46,850
- 3 person household - \$52,700
- 4 person household - \$58,550
- 5 person household - \$63,250
- 6 person household - \$67,950
- 7 person household - \$72,650
- 8 person or more household - \$77,300

Annual **Household** Income: _____

See the chart to the left, do you meet this requirement?

YES or NO

Number of Adults in your Household: _____

Number of Children in your Household: _____

Number of Disabled persons in your household: _____

Female Head of Household? YES or NO

For HUD Reporting Purposes Only - Please account for each household member:

- Race: _____ White
 _____ American Indian/Alaskan Native & White
 _____ Asian
 _____ Black/African American
 _____ Asian & White
 _____ Black/African American & White
 _____ American Indian/Alaskan Native
 _____ American Indian/Alaskan Native & Black/African American
 _____ Native Hawaiian/Other Pacific Islander
 _____ Hispanic/Latino
 _____ Other Multi-Racial

I authorize the City of Edmond to hire a contractor to remove the hazardous structure(s) at the address above. I understand that once the demolition has begun all of the contents and debris will be discarded and removed from the property. I certify that the information provided is true and I understand that any false information provided could result in the dismissal of this application for assistance.

Tenant Signature: _____

Date: _____

Homeowner Signature (required): _____

Date: _____

**Return completed form to:
 City of Edmond, CDBG, 10 S. Littler, PO Box 2970, Edmond, OK 73083
 Phone 405/359-4694 Fax 359-4767**