

City of Muskegon

Community & Neighborhood Services

Priority Home Repair Application

The Priority Home Repair Program is administered by the City of Muskegon with funding provided by the U.S. Department of Housing and Urban Development under the Community Development Block Grant Program. This program addresses necessary basic home improvement issues that threaten life, health, and/or safety of the homeowner(s).

The total household income must be at or below 60% of the Area Median Income (AMI). If your household income is between 51% - 60%, you will be required to pay a \$250.00 program fee which is due at the time your application is approved. There will also be a lien placed on your home for the repairs that are done on your home for five (5) years.

You must be able to answer yes to the following questions to continue with this application. If you answer no to any of them, you do not qualify for this program.

1. _____ Is your name on the Warranty Deed to the home?
2. _____ Is this your primary residence?
3. _____ Do you have proof of Homeowner's Insurance?
4. _____ Are your mortgage payments current?
5. _____ Are your property taxes current?

Please attach all verification document listed below with this application.

- _____ Driver's License(s) or State Issued ID(s) for everyone over 18 years old in household
- _____ Birth Certificates(s) for all minor children (17 or younger) in household
- _____ Proof of all income for the past 3 months for everyone in household
- _____ Bank Statements from everyone in household for the past 3 months
- _____ Warranty Deed, Quit-Claim Deed or Land Contract
- _____ If Land Contract, a written letter from Land Contractor Holder giving permission for repairs to be done and a lien placed on the home
- _____ Homeowner's Insurance Declaration Page along with paid receipt
- _____ Current Mortgage Statement
- _____ Receipts showing Property Taxes are paid

APPLICATION DATE

APPLICATION NUMBER

APPLICANT INFORMATION

Last Name		First Name & MI		Date of Birth
Street Address		City	State	Zip Code
Phone ()		Neighborhood		Marital Status
Email Address:				

HOUSEHOLD COMPOSITION

Name	Relationship to Head	Sex M/F	Date of Birth	Race	Legally Disabled	Hispanic or Latino
	Head of Household					

Total Number of Persons Living in the Household

RACE CATEGORIES (FOR ABOVE)

- 1. White
- 2. Black or African American
- 3. Asian
- 4. Native Hawaiian or Other Pacific Islander
- 5. American Indian or Alaska Native
- 6. Other

Income - List Monthly Income for each Household Member

Name				
Employer				
Paid (Circle One)	Weekly	Bi-Weekly	Twice Monthly	Monthly
Hours per Pay				
Wage per Hour				

Name				
Employer				
Paid (Circle One)	Weekly	Bi-Weekly	Twice Monthly	Monthly
Hours per Pay				
Wage per Hour				

Name				
Employer				
Paid (Circle One)	Weekly	Bi-Weekly	Twice Monthly	Monthly
Hours per Pay				
Wage per Hour				

Name				
Employer				
Paid (Circle One)	Weekly	Bi-Weekly	Twice Monthly	Monthly
Hours per Pay				
Wage per Hour				

OWNERSHIP

Date of Ownership:		
Move in Date:		
Home Insurance Company:		
Term of Policy (dates)		
Are your Property Taxes Current?	YES	NO
Have you owned your home for one (1) year?	YES	NO
Have you lived in your home for one (1) year?	YES	NO
Is your home built before 1978?	YES	NO
Are you in or have filed for Bankruptcy?	YES	NO
Have you been served a notice of foreclosure?	YES	NO
Do you have a Reverse Mortgage?	YES	NO
Have you received assistance before?	YES	NO
If yes, has it been 10 years?	YES	NO

NATURE OF REPAIR (CHOOSE ONLY ONE)

<input type="checkbox"/> Furnace/Water Heater <input type="checkbox"/> Roof <input type="checkbox"/> Electrical <input type="checkbox"/> Plumbing/Sewer <input type="checkbox"/> Foundation	Describe Reason for Repair

OWNER(S) DECLARATION

The applicant(s) certify that the information provided is true and accurate. The applicant(s) authorize the City of Muskegon to request any additional information needed for verification. Failure to give complete and accurate information will disqualify my application and remove me from any waiting list were applicable.

Homeowner's Signature

Date

Homeowner's Signature

Date