



Please fill out the application in its entirety and make sure all relevant attachments requested are included upon submittal. Completed submittals can be emailed to mkordus@stevenspoint.com or mail hard copies to: **Community Development Department, 1515 Strongs Avenue, Stevens Point, WI 54481.**

Questions regarding the application process can be made via email to mkordus@stevenspoint.com or by calling 715-346-1554 anytime M-F, 7:30-4:00PM.

Date of Application: _____ Date of Pre-Application Meeting: _____

Name of Applicant

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DOB	Contact Phone	Email
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Name of Co-Applicant/Spouse

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DOB	Contact Phone	Email
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Property Address	# of Years Living at Property
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Total number of individuals living at the above address? _____

Total annual household income per last year's adjusted gross income (AGI) from federal income tax return (Form 1040) is _____ for a household of _____. Attach most recent income tax return(s).

Homeowners insurance policy holder	Policy Number
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Company Name	Local Agent Contact Name	Phone
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Address	Email
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Attach homeowners insurance policy.

Are you current on property taxes, assessments, and water utility payments? Yes No
 Attach signed release.

Describe the projects you would like to fund, and any benefits it would provide for the applicant, City and surrounding neighborhood. *Attach additional sheets if necessary for all sections.*

Provide the names of the contractor(s)/individual(s) who would complete the labor for your projects:

Contractor/Volunteer Name	Work Being Performed	Contact Number

Please provide a list of materials for the project and estimated costs:

Material	Estimated Costs

Timeline For Project Completion	Estimated Increase in Property Value as a Result of Funding

Applicant Signature **Date**

Co-Applicant Signature **Date**

Print Name

Print Name

For City Use Only

Tracking Number _____

- | Yes | No | Checklist |
|--------------------------|--------------------------|--|
| <input type="checkbox"/> | <input type="checkbox"/> | Is last year's income tax return provided? |
| <input type="checkbox"/> | <input type="checkbox"/> | Is income less than 80% of Portage County's household median? |
| <input type="checkbox"/> | <input type="checkbox"/> | Is the applicant the outright owner of the property? |
| <input type="checkbox"/> | <input type="checkbox"/> | Is homeowners insurance valid and in full force? |
| <input type="checkbox"/> | <input type="checkbox"/> | Are water bills, taxes and any other outstanding assessments against the property current? |
| <input type="checkbox"/> | <input type="checkbox"/> | Should property be inspected prior to issuance of grant? |
| <input type="checkbox"/> | <input type="checkbox"/> | Does the project require a permit? |
| <input type="checkbox"/> | <input type="checkbox"/> | Does the project require a licensed contractor? |
| <input type="checkbox"/> | <input type="checkbox"/> | Is valid cost estimate provided? |
| <input type="checkbox"/> | <input type="checkbox"/> | Has the labor source has been verified? |

General comments or conditions related to the application review and/or approval

Reviewed By: _____

Date: _____

Approved By: _____

Date: _____