

## Application for Residential Assistance



APPLICANT NAME:

Current Address:

City, State, Zip Code:

Primary Phone:

Alternate Phone:

### HOUSEHOLD COMPOSITION

(List the Head of Household and all other members who live in the residence. Give the relationship of each family member to the head.)

| Member's Full Name | Relationship | Birthdate | Age | Sex | Social Security No. |
|--------------------|--------------|-----------|-----|-----|---------------------|
|                    |              |           |     |     |                     |
|                    |              |           |     |     |                     |
|                    |              |           |     |     |                     |
|                    |              |           |     |     |                     |

### Race of Head of Household (Check One) - Optional

(This information is being collected to assure compliance with fair housing and equal opportunity rules.)

- White
  Black
  Asian/Pacific Islander  
 Native American/Alaskan Native
  Hispanic

You may qualify for a rental/mortgage assistance and/or utility assistance if any or all of the following circumstances can be verified for your household. Please check any that apply to you.

- Are you currently more than 30 days past due on rent and/or mortgage payments? If yes, please explain:  
  
 Are you currently more than 30 days past due on any utility bills? If yes, please explain:

**APPLICATION CERTIFICATION:** I/we understand that the above information is being collected to determine if I/we are eligible to receive residential assistance. I/we authorize the Town of North Brentwood to verify all information provided on this application.

|                             |      |                  |      |
|-----------------------------|------|------------------|------|
| Head of Household Signature | Date | Spouse Signature | Date |
|-----------------------------|------|------------------|------|

---

Overdue Bills

What are the types and amounts of overdue bills (e.g. mortgage/rent or utility bill such as electric, gas, or water)?

| Type of Bill | Amount Past Due | Days Past Due | Payment Basis<br>(weekly, monthly, etc.) |
|--------------|-----------------|---------------|------------------------------------------|
|              |                 |               |                                          |
|              |                 |               |                                          |
|              |                 |               |                                          |
|              |                 |               |                                          |
|              |                 |               |                                          |

Please attach any overdue utility bills or rent/mortgage payment to this application and e-mail the entire package to [cwiley@northbrentwood.com](mailto:cwiley@northbrentwood.com) or [edame@northbrentwood.com](mailto:edame@northbrentwood.com). You may also drop off a hard copy of the application and any accompanying documents at the town office during normal operating hours.

If approved for financial assistance, any monies awarded will be paid directly to the mortgage/lease holder and/or utility company. No direct cash payments will be made to residents.

APPLICATION CERTIFICATION: I/we understand that the above information is being collected to determine if I/we are eligible to receive residential assistance. I/we authorize the Town of North Brentwood to verify all information provided on this application.

|                             |      |                  |      |
|-----------------------------|------|------------------|------|
| Head of Household Signature | Date | Spouse Signature | Date |
|-----------------------------|------|------------------|------|

---