

GIRARDVILLE BOROUGH
HOUSING REHABILITATION APPLICATION

Name of Homeowner(s): _____ Date: _____

Property Address: _____

Home Telephone: _____

Names and ages of all residents living in the home:

Name	Age	Relationship	Gross Annual Income
		<i>Self</i>	
Total of all sources \$ >>>>			

Do you own the property? ____yes ____no

Name(s) on deed: _____

Is this a rental property? ____yes ____no

Is this a mobile home? ____yes ____no

DATE RECEIVED BY OFFICE OF PRODESIGN PLUS _____

BY: _____
initials

**THE APPLICANT'S PERSONAL INCOME INFORMATION
WILL NOT BE AVAILABLE FOR PUBLIC USE**

Name: _____

Have you had housing assistance in the past? _____ If you received assistance, when did you receive assistance and what agency was involved? _____

Please list home repairs needed:

Check type of Dwelling:

SINGLE HOME _____

DOUBLE HOME _____

ROW HOME _____

OTHER _____

The Prodesign Plus Staff will contact you when your application is ready for inspection. Do not expect an immediate response due to the large Caseload. We strongly encourage homeowners to repair and maintain the structure while awaiting assistance. Also, Homeowners will not be contacted to proceed with interviews unless funding is available to proceed with the work.

PLEASE RETURN COMPLETED APPLICATION TO:

Prodesign Plus, P.C.
101 West Frack Street
Frackville, PA 17931