



NO COST ENERGY-SAVINGS IMPROVEMENTS

City of Lawrence can help homeowners
Save \$\$\$\$\$ on energy bills

The City of Lawrence has grants available for weatherizing homes throughout the City. Improvements are limited to:

- *Attic Insulation
- *Storm Windows
- *Weather-stripping of entry doors

Grants for these improvements will be made to eligible homeowners.
No repayment for this assistance is required. Grants will be awarded on a first-come, first-serve basis.

NOTE: Applications must be postmarked by or delivered to the address in #6 below, no later than August 31, 2016. Incomplete applications will be returned.

Eligibility requirements for this assistance are:

1. The property must be located within the City Limits. The home for which the application is being made cannot have received weatherization assistance from the City since January 1, 1993.
Mobile homes and rental units are not eligible.
2. The home must be owner-occupied with no more than two dwelling units. The applicant must be the owner/occupant of the property for a minimum of one year prior to application and payment of ad valorem taxes must be current.
3. Home ownership will be verified.
4. Community Development staff will have sole discretion to determine the suitability of the property and appropriateness of the needed improvements.
5. Annual gross family income cannot exceed the following guidelines:

Family Size	80% of Median
1	\$41,850
2	\$47,800
3	\$53,800
4	\$59,750
5	\$64,550
6	\$69,350
7	\$74,100
8+	\$78,900

6. Application forms are available at the office of Planning and Development Services Department located at: 1 Riverfront Plaza, Level 1, Suite 110, P.O. Box 708, Lawrence, Kansas, 66044.
For more information, call 832-7700 or view our website at www.lawrenceks.org/pds.
7. Submit the completed forms to the City's Development Services Department. Enclose evidence of family gross income for the preceding and current year.

Documentation of occupant income must be returned with this application. See other side of this page for acceptable forms of documentation. If income documentation is not included the application will be returned.

Certification Documents

EARNINGS or INCOME (during past 12 months):

Employment, Unemployment, Business Earnings, Self-Employment, Real Estate Rental, Social Security, Disability, Pensions, VA, Annuities, Child Support, Alimony, Welfare, Recurring Cash Contributions

Documentation of occupant income must be returned with this application and consist of any and all of the following that apply to your household:

1. If you filed IRS income taxes, a copy of your signed **2015 IRS 1040** tax return.
2. Completed **Authorization for Release of Information** (below)
3. Copies of the most recent three (3) consecutive paycheck stubs
4. Copies of the most recent three (3) months checking/savings account statements
 - a. If you don't have a checking account, you must document your income by providing
 - i. Copies of Social Security or Social and Rehabilitation Services benefits letter(s),
 - ii. Statement summary of Debit card transactions
 - iii. Or any other verifiable source of payments received.
 1. Staff must be able to determine what payments you are receiving
5. Copies of pension or annuity payments/statements
6. Copies of child support payments/statement
7. Copies of incomes for certificates of deposits or bank accounts.

APPLICATIONS ARE DUE ON OR BEFORE August 31, 2016

LAWRENCE, KANSAS CDBG PROGRAM ELIGIBILITY CERTIFICATION

1. NAME OF PROJECT: ENERGY SAVING IMPROVEMENTS (WEATHERIZATION)

2. APPLICANT INFORMATION

Name _____ Spouse _____

Address _____, Lawrence, KS. ZIP _____

Telephone H) _____ Alt) _____

Email _____

How did you hear about this program? _____

Household Characteristics: circle and write responses.

Head of Household? **Male or Female** Disabled? **Yes or No** Age _____

Number in Household _____ Must mark: Hispanic or Latino? **Yes or No**

Must choose one category below:

White _____ Black/African American _____ Asian _____ American Indian/Alaska Native _____

Native Hawaiian/Other Pacific Islander _____ American Indian/Alaska Native & White _____

Asian & White _____ Black/African American & White _____

American Indian/Alaska Native & Black/African American _____ Other Multi-Racial _____

3. INCOME REQUIREMENTS-circle "Household Size" number for your family.

Household Size

1
2
3
4
5
6
7
8+

Gross Annual Income

Under \$41,850
Under \$47,800
Under \$53,800
Under \$59,750
Under \$64,550
Under \$69,350
Under \$74,100
Under \$78,900

My family income is: \$ _____

4. CERTIFICATIONS

- I hereby certify that the gross annual income) of all adult members of the household cited in item #2 falls within the income category range as circled above. I also understand and agree that any misrepresentation on my part of information contained herein may constitute fraud. I have enclosed evidence of family gross income for the preceding and current year as described in #7 of eligibility requirements. (**Employment, Unemployment, Business Earnings, Self Employment, Real Estate Rental, Social Security, Pensions, VA, Annuities, Child Support, Alimony, Welfare, Recurring Cash Contributions.**)
- I hereby certify that I have been informed of Lead-Based Paint Hazards and that I have received a copy of the notice entitled: **Renovate Right - Important Lead Hazard Information for Families, Child Care Providers and Schools.** (Please keep the attached information.)
- I hereby certify that I will not discriminate upon the basis of race, color, religion, sex, handicap, familial status, or national origin in the sale, lease, rental, use or occupancy of the property improved through financial assistance provided from the Community Development Block Grant (CDBG) program of the City of Lawrence.

Date

Signature of Applicant

AUTHORIZATION FOR RELEASE OF INFORMATION

I hereby give my permission to the Planning and Development Services Department of the City of Lawrence, Kansas to acquire information regarding one or all of the following items:

1. Employment.
2. Income.
3. Hazard Insurance.
4. Taxes.
5. Federal, State, or local assistance programs.
6. Mortgage.
7. Other requested information.

Print name

Signature

Date

Address

City / State / Zip