Lexington-Fayette Urban County Government
Division of Grant and Special Programs
200 East Main Street, 6th floor, Lexington KY 40507
(859) 258-3070
CDBG/HOME
Community-Wide Housing Rehabilitation Loan Program

PRELIMINARY APPLICATION

1. **Date of Application:** _____

2. **Applicant's Name:** _____ _____ _____
   First M.I. Last

3. **Co-Applicant's Name:** _____ _____ _____
   First M.I. Last

4. **Home Address:** _____
   Street Address Zip Code

5. **Telephone Number:** **Applicant:** _____ _____ _____
   Home Work Cell

   Co-Applicant: _____ _____ _____
   Home Work Cell

6. **# of Persons in Household:** _____ **Adults 18 or Older** _____ **Children 17 or Under**

7. **The annual income from all sources of applicant(s):** _____

   The annual income from household members 18 and under: _____

   TOTAL: $ 0.00

8. **Do you own the home?** **Yes** ____ **No** ____

9. **I currently:**
   - ☐ **Own my house free and clear.**
   - ☐ **Am buying my house (I have a mortgage to pay off)**
   - ☐ **Other :** _____

10. **The current outstanding debt on our home is:**
    - _____ **1st Mortgage balance**
    - _____ **2nd Mortgage balance**
    - _____ **Other**
    - $ 0.00 **TOTAL**

11. **Please check all of the following programs from which you have received assistance:**
    REACH ☐ CVC ☐ Habitat ☐ Urban League ☐ Repair Affair ☐ KHC ☐

I/We certify that all the statements on this pre-application are true and correct to the best of my/our knowledge. I/We understand that any willful misstatement of material fact may be grounds for disqualification.

Applicant: _____ _____
Signature **Date**

Co-Applicant: _____ _____
Signature **Date**

FOR OFFICE USE ONLY

PVA: $_____ **Year Built:**_____ **Previous Assistance?**_____ **When:**_____ **Program:** _____ **Amount: $**_____

Denied Previously?_____ **When:**_____**Reason:**_____**Placed On Waiting List:**_____**By:** _____

CE _____ **M**____ **R**____ **TFN**____ **RA $**_____ **CAC $**_____**Letter Sent** _____**By:**_____

It is illegal to Discriminate Against Any Person Because of Race, Color, Religion, Sex, Handicap, Familial Status, or National Origin (The Fair Housing Amendments Act of 1988).

EQUAL HOUSING OPPORTUNITY