



Neighborhood Stabilization Program Housing Application



The City of Jefferson was a recipient of the Neighborhood Stabilization Program (NSP) which was authorized under Title III of Division B of the Housing and Economic Recovery Act of 2008 (HERA) (Public Law 110-289). NSP was established for the purpose of stabilizing communities that have suffered from foreclosure and abandonment.

The City of Jefferson has properties for sale that have been assisted with NSP funds. These properties will or have been rehabilitated to meet housing quality standards.

Who is eligible?

Applicants must participate in home buyer education classes and meet household income is no greater than:

Program Year 2016	1 person	\$52,650
	2 person	\$60,200
	3 person	\$67,700
	4 person	\$75,250
	5 person	\$81,250

Assistance is provided on a “first come, first served” basis to eligible applicants. Applications are available at City Hall from Planning and Protective Services.

Completed applications should be returned to:

Jayne Abbott, Neighborhood Services Coordinator
320 E McCarty (City Hall, lower level)
Jefferson City, MO 65101
573-634-6410 phone
Jabbott@jeffcitymo.org

Individuals should contact the ADA Coordinator at (573) 634-6570 to request accommodations or alternative formats as required under the Americans with Disabilities Act. Please allow three business days to process the request.

**City of Jefferson
Neighborhood Stabilization Program**



Name _____

Address _____ Zip _____

Phone _____ Email _____

Household Composition: List each individual who resides in your home

NAME	RELATIONSHIP	SSN	DOB
	SELF		

Income Sources (For All Occupants Over 18 Years Old)

INCOME INFORMATION		
EMPLOYER:		
Address:		
Occupation:	Salary:	\$
SPOUSE'S EMPLOYER:		
Address:		
Occupation:	Salary:	\$
	OTHER INCOME	
	SOCIAL SECURITY	\$
	WELFARE	\$
	RETIREMENT	\$
	VETERAN'S BENEFITS	\$
	OTHER INCOME	\$
	TOTAL AMOUNT OF INCOME	
		\$

Certification by Applicant(s)

The Applicant certifies that all information in this application, and all information furnished in support of this application is true and complete to the best of the Applicant's knowledge and belief, and that he/she has read the above statement. The Applicant covenants and agrees that he/she will comply with all requirements imposed by or pursuant to the regulations of the Secretary of HUD and the City of Jefferson. Verification of any information contained in this application may be obtained from any source named herein. I hereby release the City of Jefferson and its agents from any and all liability which may arise as a result of any reason related to the rehabilitation of my home.

Date

Signature of Applicant

Date

Signature of Applicant

Optional Applicant Characteristic Survey:

Information for Government Monitoring Purposes	
<p>The following requested information is <u>voluntary</u> and in no way affects your application for participation in this program. This information will be used for federal reporting and research purposes only to find out how effective our efforts are in reaching all segments of the population and in providing equal opportunity services to the community.</p>	
Applicant	Co-Applicant
<input type="checkbox"/> I do not wish to furnish this Information <u>Race/National Origin:</u> <input type="checkbox"/> American Indian or Alaskan Native <input type="checkbox"/> Native Hawaiian or other Pacific Islander <input type="checkbox"/> Black/African American <input type="checkbox"/> Caucasian <input type="checkbox"/> Asian <input type="checkbox"/> American Indian or Alaskan Native and Caucasian <input type="checkbox"/> Asian and Caucasian <input type="checkbox"/> Black/African American and Caucasian <input type="checkbox"/> American Indian or Alaskan Native and Black/African American <input type="checkbox"/> Other (specify) _____ <u>Ethnicity:</u> <input type="checkbox"/> Hispanic <input type="checkbox"/> Non-Hispanic <u>Sex:</u> <input type="checkbox"/> Male <input type="checkbox"/> Female Birthdate: ____/____/____ <u>Marital Status:</u> <input type="checkbox"/> Married <input type="checkbox"/> Separated <input type="checkbox"/> Unmarried (incl. single widow, divorced)	<input type="checkbox"/> I do not wish to furnish this Information <u>Race/National Origin:</u> <input type="checkbox"/> American Indian or Alaskan Native <input type="checkbox"/> Native Hawaiian or other Pacific Islander <input type="checkbox"/> Black/African American <input type="checkbox"/> Caucasian <input type="checkbox"/> Asian <input type="checkbox"/> American Indian or Alaskan Native and Caucasian <input type="checkbox"/> Asian and Caucasian <input type="checkbox"/> Black/African American and Caucasian <input type="checkbox"/> American Indian or Alaskan Native and Black/African American <input type="checkbox"/> Other (specify) _____ <u>Ethnicity:</u> <input type="checkbox"/> Hispanic <input type="checkbox"/> Non-Hispanic <u>Sex:</u> <input type="checkbox"/> Male <input type="checkbox"/> Female Birthdate: ____/____/____ <u>Marital Status:</u> <input type="checkbox"/> Married <input type="checkbox"/> Separated <input type="checkbox"/> Unmarried (incl. single widow, divorced)