Siouxland Interstate Metropolitan Planning Council (SIMPCO) in partnership with

Western Iowa Community Improvement Regional Housing Trust Fund

Owner Occupied Home Repair/Rehab Waitlist Registration

6401 Gordon Drive, Sioux City, Iowa 51106 | Phone: 712-279-6286 | Fax: 712-279-6920

Please complete the following information as accurately and completely as possible. When funding becomes available in your area, you will be contacted at that time and provided with an application to complete and return. Please note that this waitlist registration does not guarantee funding.

Applicant Name	
Property Address	
City/State/Zip/County	
Mailing Address	
Phone	
Email	
Total Number of People in household	
Applicant Date of Birth	

Annual Income:

Gross income is the total revenue before any deduction or allowances, such as taxes. Please list **ALL** sources of income for **ALL** household members.

Source of Income	Applicant	Co-Applicant	Other HH member 18 years or older
Gross Salary (Primary Job)	Hr. Wage \$	Hr. Wage \$	Hr. Wage \$
	Hrs. per week	Hrs. per week	Hrs. per week
	Annual \$	Annual \$	Annual \$
Gross Salary (Second Job)	Hr. Wage \$	Hr. Wage \$	Hr. Wage \$
	Hrs. per week	Hrs. per week	Hrs. per week
	Annual \$	Annual \$	Annual \$
Bonuses			
Social Security			
Retirement/Pension			
Child Support			
Unemployment			
Commission/Tips			
Other			

Asset Income:

Asset income refers to money generated by investments or holdings that an individual owns. Please list **ALL** assets including but not limited to checking, savings, credit unions accounts, stocks, bonds, annuities, retirement plans, pensions, and/or life insurance policies.

Family member	Asset Description	Current Cash Value	Actual Income from Assets
Applicant (Head of Household)			
1			
2			
3			

Household Type (please check all that apply): This information is collected for compliance

reporting purposes only.

□ Widowed

🗆 Elderly

 \Box Separated

□ Married

□ Single adult

DivorcedSingle with Dependents

DisabledMarried with Dependents

🗆 U.S. Veteran

Primary repair need:	
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Secondary repair need: ____

Are the repairs flood related? \Box Yes \Box No

Please initial that you have read and agree to the following terms and conditions:

I understand that this waitlist registration does not guarantee funds for the repair or rehab of my home.	
I understand that I will be asked to provide detailed financial information to be approved for any future funds.	
I understand that should I be awarded funds; a restriction of deed will be filed on my property for 5 years.	
I understand that I must be current with my mortgage & taxes to qualify for assistance.	
I understand that I must have & maintain homeowners' insurance to be eligible for assistance.	

Applicant Printed Name

Signature

Date

SIMPCO & WICIRHTF operate in compliance with the Fair Housing & Equal Opportunity Employment Acts. Rules for acceptance and participation are without regard to race, color, creed, religion, gender, sexual orientation, gender identity, family or martial status, national origin, age disability, or status as a requirement of the funding agency(ies) will be followed.

