## <u>Portland Regional Lead Hazard Control Grant Program</u> Community Development Corporation Grant Application

## Eligible properties are:

- > constructed prior to 1978; and
- currently house a family with one or more children age 6 or younger; or
- recently vacant but available to a family with children age 6 or younger.

## **Owner/Applicant(s) Information**

Mailing Address:  City/State/Zip:  Contact Person:  Contact Person:  Phone:  Phone:  Fax:  Email:  Federal Tax ID#  Required Attachments  Completed property/tenant survey information (See reverse. If additional space is needed, please copy).  List of units in prioritized order of inspection.  Copy of the declaration page of the hazard/liability insurance policy on each property.  Copy of Articles of Incorporation  Copy of current executed Bylaws  Copy of current executed Bylaws  Copy of current 501(c)3 determination letter.  Corporate resolution to apply for lead hazard reduction grant.  If applicable, copy of project rehabilitation plan including sources and uses statement for entire rehab project  Certification -  I certify that the information provided in this application, including the Property/Tenant Surve and correct as of the date set forth opposite my signature on this application and acknowledge my understanding or negligent misrepresentation of the information contained in this application may result in civil liability and/or contained in this application may result in civil liability and/or contained in this application may result in civil liability and/or contained in this application may result in civil liability and/or contained in this application may result in civil liability and/or contained in this application may result in civil liability and/or contained in this application may result in civil liability and/or contained in this application may result in civil liability and/or contained in this application may result in civil liability and/or contained in this application may result in civil liability and/or contained in this application may result in civil liability and/or contained in this application may result in civil liability and/or contained in this application may result in civil liability and/or contained in this application may result in civil liability and/or contained in this application.			
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(Authorized Signature) Date (Authorized Signature)	Date		
By: Bv:			
By: By:	-		
Title: Title:			

PORTLAND HOUSING BUREAU 421 SW 6<sup>TH</sup>, SUITE 500 Portland, OR 97204 (503) 823-2375

Portland Regional Lead Hazard Control Grant CDC Lead Grant Application Revision Date 06-2010

## **Property/Tenant Survey Information**

Owner Name:	
Owner maine.	

	Tenant Name Address	Year Built No. of Bdrms	No. of Year Unit has been a Sec. 8 unit Lease Expires	A N C	o/Age of dults o/Age of hildren Ages	Ethnic- Race*	Annual Household Income (all sources)	Monthly Rent
1								
2								
3								
4								
5								
6								
7								
8								
9								
10	ction of the application can be copied if you							of primary tenan

(This section of the application can be copied if you are making application for more than 10 units.)

\*of primary tenant.