



**City of Liberal
Building & Community Department
Home Repair Grant**

Grant Application Checklist

Date Received (office use only): _____

Applicant Name(s): _____

Did you include? (Please check off )

- Application (3 pages completed and signed)
- Copy of most recently filed *federal tax return*, including all attachments and schedules. Copy of W-2 form or other CURRENT proof of income including *2 months pay stubs*, *Social Security Award Letters*, *Pension*, etc. for ALL adults in the household.
- Copy of written verification of your disability (if applicable)
- Proof of Identification – Proof of Veteran (if it applies)
- To verify home ownership submit a copy of the Deed or a Property Tax Bill
- Estimate from a LICENSED CONTRACTOR. (Contractor will need to pull a no fee permit and get inspection done after work is completed.)

MAIL or DELIVER IN PERSON TO:

**Building Programs Coordinator
or Building Dept Staff**
324 N. Kansas Avenue, Liberal, Kansas 67905
Phone: 620-626-2252 Fax:620-626-0572

More information can be found at: www.cityofliberal.org

INCOME VERIFICATION

In order to participate in the City of Liberal Senior Citizen Grant Program, applicant must meet the program’s income requirements. We need information on your household income in order to verify your eligibility. Please use the following table to calculate your combined GROSS annual income.

For each person contributing to household income, list source of income and total amount of earnings. You must also submit proof of income for each source. *Refer to the “Proof of Income Required” chart below for a list of acceptable proof of income.

| Name of Person | Source of Income | Gross MONTHLY Income | Gross Annual Income |
|---------------------|------------------|----------------------|---------------------|
| | | \$ | \$ |
| | | \$ | \$ |
| | | \$ | \$ |
| | | \$ | \$ |
| | | \$ | \$ |
| | | \$ | \$ |
| TOTAL INCOME | | \$ | \$ |

| List of Required Proof of Income: | |
|--|--|
| For each source of income, you must submit proof. | |
| Type of Income | Proof of Income Required |
| Salary | Federal Tax Returns, W-2, 2 most recent pay stubs |
| Social Security or Disability | Social Security Verification or Award Letter (most recent) |
| Welfare | Statement from Caseworker |
| Alimony | Court order/Divorce Papers |
| Child Support | Court order/Divorce Papers |
| Unemployment Insurance | Statement of Award, Verification |
| Self-Employed | Income Tax Returns – Federal & State (most recent) |
| Interest Income or Stocks | Bank Statement |
| Other (Pension/Retirement) | Bank Statement or Monthly Benefit Receipt |

I (we) that I am the owner(s) of this property, that all the above statements are true, and correct to the best of my knowledge and certify that the City of Liberal shall not be liable for damages that may arise out of, or in connection with home improvements done under this grant. I (we) authorize the City of Liberal to verify employment, mortgage information, title to the property and payment of property taxes.

Applicant Signature

Date

Co-Applicant Signature

Date