

Grant Application

	Da	ate Received
Applicant Names(s)		
Project Address		
Telephone Numbers: Home		
Email Address		
Is this an owner-occupied structure?	Yes No	
2024 Assessed Property Value: \$	Are the property taxes paid?	Yes No
Project description (check all those that a	pply):	
New construction; expansion of the Complete remodel of interior space Energy efficiency upgrades, such a Environmental remediation, remoderation in New detached freestanding garage Written description of the project:	ce to modernize and to improve usabilit as insulation, window replacement, inst oval of asbestos or lead-based paint ges (if no garage exists)	y and marketability alling a heat pump
Total Project Cost: \$		
Ineligible costs - The project cannot inclu	(up to \$5	•
addition; Repairs to accessory buildings; I member or unlicensed contractor; purcha maintenance of home components that a reroofing, residing, water heaters, furnace	Reimbursement of prior work; Labor co use, installation or repair of furnishings are expected to be replaced periodically	sts of any household; replacement or such as appliances,
Gross monthly Income \$	Monthly Homeowner's insurance	e \$
Monthly mortgage principal and interest		

TO COMPLETE YOUR APPLICATION, PLEASE ATTACH THE FOLLOWING DOCUMENTATION

▶ Plans and bids for the work being proposed. Sign the bid you wish to accept.
Please note that any work completed prior to applying for the program is not eligible.

Read and initial the statements belov	Read	and initia	I the stat	tements	below	:
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	I understand that if I sell the property within with one (1) year of the issuance of an occupancy permit for the Project, the entire grant amount must be repaid.
	I have read the list of ineligible items and agree that my project does not contain any of these items or others that the City determines to be ineligible
	I understand the City of Edgerton reserves the right to deny funding.
	I understand if I intentionally make misstatements or conceal any information in an attempt to obtain assistance, it is in violation of federal and state laws that carry severe criminal and civil penalties.
	I authorize the City of Edgerton or its agents to verify all information given by me about my property.
	I authorize and direct all custodians of my records, including my insurance company, to release information to the City of Edgerton or its agents.
	Failure to comply with these conditions could result in the withdrawal of the City of Edgerton EHR Program participation or the recall of the full amount of the grant.
	I understand that I am responsible for paying to correct the work improperly done including additional costs resulting from work improperly done
	I understand that I may select a bid that is within 10% of the lowest responsible bid and that I will pay the difference between the lowest responsible bid and the chosen bid.
	I understand that if I will not be reimbursed for any labor for household member's or unlicensed contractors.
Signatı	ure(s) of Applicant(s):
D-4	