



**Re: City of Lincoln Lead Hazard Control Grand Grant Application**

Thank you for your interest in the City of Lincoln Lead Hazard Control Grant Program. To be eligible, the dwelling unit (house, apartment, etc.) must have been constructed prior to 1978. The occupant(s) must qualify under the income limits (see below - income guidelines are subject to change), and property owners must give priority to rent the dwelling unit to families with a child six years old or younger for at least three years following the completion of lead abatement activities.

We can make copies of your attachments when you drop off the application (555 South 10th Street, Suite 205). After submitting a complete application, city staff will contact you if additional information is needed. If you prefer to mail the application and attachments, please send it to the following address:

Attn: Vayda Kirshman, Community Resource Specialist  
Urban Development Department  
555 S. 10<sup>th</sup> Street Ste 205  
Lincoln, NE 68508

The application materials can also be e-mailed to [vgkirshman@lincoln.ne.gov](mailto:vgkirshman@lincoln.ne.gov).

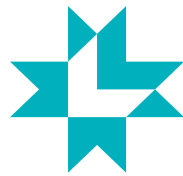
Following our review of the materials submitted, you will be contacted to set up an appointment to come to your residence and determine the scope of our potential assistance and discuss the program with you.

If you have questions regarding completion of your application or our grant program, please call Vayda at 402-441-7808 or send an email to [vgkirshman@lincoln.ne.gov](mailto:vgkirshman@lincoln.ne.gov)

There may be a waiting list to receive assistance. All information provided is confidential and must be retained by the City Lincoln Lead Hazard Control Program. There are preferences on the waiting list for households with children that have an Elevated Blood Level (EBL). If you or a family member has a disability and think that you might need or want a special accommodation, you may request one at any time. This is not a housing rehabilitation program. All projects will focus on the removal of lead paint hazards only.

Sincerely,

City of Lincoln



**LINCOLN**  
Urban Development

|                                  |
|----------------------------------|
| Required documents for LANDLORDS |
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- ☐ Completed and signed Application;
- ☐ Copy of photo i.d. of all applicants;
- ☐ Declarations page, i.e. summary page of your homeowners insurance policy showing dates and limits of coverage. Also include proof of payment of your premium if not escrowed through your mortgage payments;
- ☐ Verification of the balance(s) of the mortgage(s) on the property; to include any home equity loans you may have. A monthly statement from the lenders will suffice;
- ☐ Signed Authorization

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| Required documents for TENANTS, even if living in a property also occupied by the property owner |
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- ☐ Copy of your most recent federal income tax return, not just a W-2 form. If you are not required to file a tax return, please provide a signed and dated statement to that effect;
- ☐ Copy of photo i.d. of all applicants;
- ☐ Copy of birth certificates OR any official record including school records, medical records, etc., that identify the child and their birthdate for all children aged six years and under;
- ☐ Current paystubs and/or copies of benefits statements to document all income into the household;
- ☐ Current bank statement
- ☐ Signed authorization;
- ☐ Signed "Attestation Form" for every person in the household 19 years old and older. Family members not yet 19 years old need to be included in the bottom section of a parent's/guardian's attestation form. Make copies of a blank form if extras are needed.

**It is important you send the requested information with your application or processing of your application will be delayed.**

# City of Lincoln Lead Hazard Control Program Application

Office Use:

App#

*For further information or assistance call the Urban Development Department at (402)441-7808.*

## Part I: Property Information

Property is (check one): Single-family dwelling      Multi-family dwelling

Is the property owner-occupied, even if it also has tenants? \_\_\_\_\_

Property Address: \_\_\_\_\_

# of Dwelling Units: \_\_\_\_\_

Approximate year of initial construction: \_\_\_\_\_

## Part 2: Applicant Information

Applicant #1:

Name \_\_\_\_\_ Birthdate \_\_\_\_\_ SS# \_\_\_\_\_

Address, if different from above \_\_\_\_\_

Primary phone # \_\_\_\_\_ Work phone # \_\_\_\_\_

Email address \_\_\_\_\_

Preferred method of contact (circle one): Primary phone      Work phone      Email

Marital Status: Married \_\_\_\_ Single \_\_\_\_ Divorced \_\_\_\_ Widowed \_\_\_\_

Race (circle all that apply): American Indian/Alaskan Native      Asian      Black/African American

Native Hawaiian/Other Pacific Islander      White      Other

Hispanic? \_\_\_\_\_

Applicant #2 (If there is more than one owner)

Name \_\_\_\_\_ Birthdate \_\_\_\_\_ SS# \_\_\_\_\_

Address, if different from above \_\_\_\_\_

Primary phone # \_\_\_\_\_ Work phone # \_\_\_\_\_

Email address \_\_\_\_\_

Preferred method of contact (circle one): Primary phone      Work phone      Email

Marital Status: Married \_\_\_\_ Single \_\_\_\_ Divorced \_\_\_\_ Widowed \_\_\_\_

Race (circle all that apply): American Indian/Alaskan Native      Asian      Black/African American

Native Hawaiian/Other Pacific Islander      White      Other

Hispanic? \_\_\_\_\_

### **Part 3: Financial Information**

Are you and other owner(s) current (up to date) on all **mortgage** payments on the property? YES      NO      If not, please explain:

Are you and other owner(s) current on all **real estate taxes and assessments** levied on the property? YES      NO  
If not, please explain:

Are you and other owner(s) current on all **State & Federal Taxes** and assessments on the property? YES      NO  
If not, please explain:

Have you or any other owner(s) filed for **bankruptcy** during the past 7 years YES      NO  
If Yes, please explain:

**Part 4: Unit Information**

| Unit | Name or Resident<br>(or vacant) | # in<br>household | # of<br>children 6<br>years old<br>and under | Phone number |
|------|---------------------------------|-------------------|--|--------------|
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|      |                                 |                   |  |              |
|      |                                 |                   |  |              |

Are there any young children with elevated blood lead levels (EBL) residing in the building or visiting six hours or more per week? YES      NO

If Yes, Number of EBL children \_\_\_\_\_

Has the property ever been tested for lead-based paint? YES      NO

If yes, when?      Did it test positive? YES      NO

Do you have a code violation or lead order? YES      NO      If yes, explain: