

TYPE OF WORK REQUESTED

(PLEASE CIRCLE)

INTERIOR	EXTERIOR	ENERGY
DOORS	SIDING	INSULATION
ELECTRICAL	LEADERS	PIPE INSULATION
PLUMBING	GUTTERS	CAULKING
HEATING	PORCH	WEATHER STRIPPING
WATERPROOFING	STEPS	THERMOSTAT
SUMP PUMP	GARAGE DOOR	BURNER
SMOKE ALARMS	CELLAR DOOR	FIRE ESCAPE
WINDOWS	CHIMNEY	

Other: _____



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Division of Housing & Community Development



**HOME
 IMPROVEMENT
 PROGRAM**



**DIVISION OF HOUSING
 &**

COMMUNITY DEVELOPMENT

“The strength of a nation derives from the integrity of
 the home.”
 -Confucius

Putting Essex County First

Are you a homeowner who needs repairs to your house?

Are you financially strapped and unable to pay for renovations?

The Essex County Home Improvement Program may be able to help you

What is the Home Improvement Program?

The Home Improvement Program is funded through the Community Development Block Grant Program. It provides Deferred Loans to low and moderate income homeowners who occupy a 1 to 3 family home. Residents of the following municipalities are eligible for assistance through this program.

BELLEVILLE	MONTCLAIR
CALDWELL	NORTH CALDWELL
CEDAR GROVE	NUTLEY
ESSEX FELLS	ORANGE
FAIRFIELD	ROSELAND
GLEN RIDGE	SOUTH ORANGE
LIVINGSTON	VERONA
MAPLEWOOD	WEST CALDWELL
MILLBURN	WEST ORANGE

Will I have to repay the Deferred Loan?

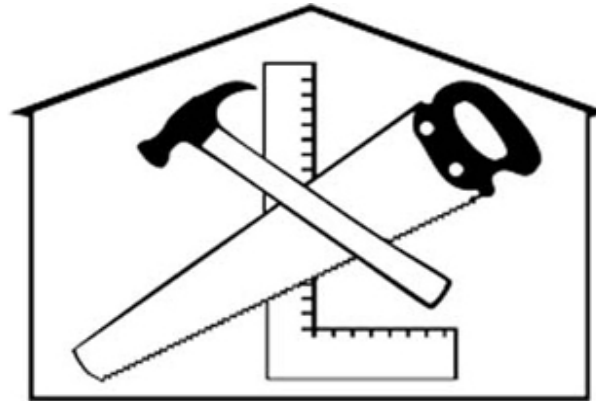
A lien will be recorded against your property. The lien must be paid off only if you sell or transfer ownership of the property within a 10 year period.

Who is eligible?

Homeowners who occupy a 1 to 3 family home in a participating municipality and who meet program income guidelines.

What type of improvements are eligible?

Examples of eligible improvements include: Heating system, roofing, plumbing, electrical, and code violation abatement.



For additional information please contact:

Mr. Elvin Pereira, Loan Advisor

Division of Housing and Community Development
 20 Crestmont Road, Verona, NJ 07044
 Telephone: (973) 655-0200 ext. 316
 Fax #: (973) 655-0982
 Monday — Friday 8:30am - 4:30pm

REQUEST FOR HOME IMPROVEMENT PROGRAM APPLICATION

Date: _____

Name (s): _____

Address: _____

City/Town: _____

State: _____ Zip Code: _____

E-mail: _____

Home Phone: _____

Work Phone: _____

Please answer YES or NO

Owner Occupant? Y/N _____

Handicapped? Y/N _____

Senior Citizen? Y/N _____

Female Head of Household? Y/N _____

Family Size: _____

Number of Dwelling Units: _____

Annual Income: \$ _____

Last 4 Social Security #: _____