

Incorporated Village of Sea Cliff Community Development

P.O. Box 340, Sea Cliff, NY 11579 Tel: (516) 671-0080 Email: emcdonnell@seacliff-ny.gov

WHAT IS THE RESIDENTIAL REHABILITATION PROGRAM?

The Residential Rehabilitation Program is a locally administered federal grant resource that allows low income families in the Village of Sea Cliff to have certain types of improvement work performed on their owner occupied homes. Households must not exceed HUD defined federal low income limits, among other requirements, to qualify for assistance. Please see page 2 of the application for income limits.

The Village of Sea Cliff Community Development Program administers the Residential Rehabilitation program for the Village of Sea Cliff. The Nassau County Office of Community Development determines final eligibility and actual work to be performed; Nassau County will require the information on the Village of Sea Cliff form as well as additional information before work on the home is approved.

All items on both pages of the application must be complete and the second page must be signed by all household members over the age of 18 years.

**Mail application to
Residential Rehabilitation Wait List, PO Box 340, Sea Cliff, NY 11579
or drop off application at
Sea Cliff Village Hall, attn: Community Development, 300 Sea Cliff Avenue, Sea Cliff, NY 11579**

**For a disability related reasonable accommodation to complete an application,
please call (516) 671-0080 or email emcdonnell@seacliff-ny.gov**



Sea Cliff Village Community Development

P.O. Box 340, Sea Cliff, NY 11579

Tel: (516) 671-0080 Fax: (516) 671-6508

RECEIVED

Village of Sea Cliff use only

Thank you for your interest in the Community Development Residential Rehabilitation Program. Please complete the following questions to determine initial eligibility for the Program. If your household meets Program guidelines, you will be placed on a wait list. Projects are considered in wait list order AS FUNDING BECOMES AVAILABLE; placement on the wait list DOES NOT GUARANTEE renovation(s) will be completed. Nassau County determines final eligibility and actual work to be performed; Nassau County will require the information on this form as well as additional information before work on the home is approved.

Contact Information

Name	Phone
Address	Alt Phone
Mailing Address (if different)	Email

Household Composition and Income: List all persons who will live in the household and include income for **ALL HOUSEHOLD MEMBERS**. Income can be from and not limited to work (including overtime), government assistance (food stamps/EBT, TANF/AFDC, Social Security benefits, etc.), pensions, unemployment benefits, child and/or spousal support, dividends, income from assets, contributions from others, student loans and rent from tenants.

FULL NAME	SOURCE OF INCOME	AGE	GENDER	DISABLED (Y/N)	GROSS INCOME
					\$
					\$
					\$
					\$
					\$
					\$
				TOTAL INCOME	\$

Please check all that apply for the **Head of Household**. This information is for statistical purposes only. Your answers will in no way affect your eligibility.

_____	White	_____	American Indian/Alaskan
_____	Black	_____	Asian/Pacific Islander
_____	Hispanic	_____	Other
_____	Non-Hispanic	_____	Other

Head of Household is

_____	MALE	_____	FEMALE
-------	------	-------	--------

