

In Association with the

County Of Suffolk's
Community Development
Office

**Town of East Hampton
Office of Housing and
Community Development**

267 Bluff Road
in Amagansett
267-7896

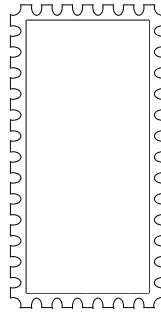
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Technician



THE TOWN OF EAST HAMPTON
Office of Housing and Community Development
159 Pantigo Road,
East Hampton, New York 11937

**TOWN of
EAST HAMPTON**

**OFFICE OF HOUSING AND
COMMUNITY
DEVELOPMENT**



**Home
Improvement
Program**

PRELIMINARY
Homeowners
APPLICATION

For Office Use Only

App.# : _____

Priority: _____

PRELIMINARY HOMEOWNER APPLICATION

Home must be owner occupied

Please print or type application form completely and return by mail (postage required). If you prefer to return it in person please call the Office of Housing and Community Development at 267-7896. Open Monday-Friday from 9am - 4 pm.

NOTE: This is a preliminary application form for screening purposes only. A more detailed application will be required after the preliminary screening.

NAME: _____ **DATE:** _____

MAILING ADDRESS: _____

STREET ADDRESS: _____

(H) PHONE #: _____ **(W) PHONE #:** _____ **CELL PHONE #:** _____

EMAIL ADDRESS: _____

HOUSEHOLD MAKE-UP

Please list the name, age and relationship of all people living in this household, listing yourself as Entry 1.

1. _____
2. _____
3. _____
4. _____
5. _____
6. _____

INCOME (includes wages, tips, pensions, social security, social service, child support, alimony and cash payment of any kind)

Please list total household income: \$ _____.

ASSETS OTHER THAN THIS HOUSE AND CAR (including, but not limited to: savings, stocks, bonds, other property)

Please list all assets and estimated value of each: _____

WHAT HOME IMPROVEMENTS NEED TO BE DONE

SIGNATURE: _____