

FAIR LAWN HOME IMPROVEMENT PROGRAM QUESTIONNAIRE

Please list ALL individuals residing in your household and any individual that's name is on the Deed whether they reside in the house or not (they should be counted as part of your total household) including yourself:

NAME	AGE	RELATION TO OWNER	TYPE OF INCOME
_____Self/Owner_____			
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

TOTAL INDIVIDUALS IN YOUR HOUSEHOLD _____

Please answer ALL questions.

Is this a single family home? _____ or a two family home? _____

If a two family, do you rent the floor you do not live on? YES _____ NO _____

Do you have a current Mortgage? YES _____ NO _____

Do you have more than one Mortgage? YES _____ NO _____

Do you have a Reverse Mortgage? YES _____ NO _____

Do you have current Homeowners Insurance? YES _____ NO _____

Are your Property Taxes paid up to date? YES _____ NO _____

Have you filed bankruptcy in the past 7 years? YES _____ NO _____

Total Gross Income for your Household \$ _____

Maximum Income Limits: (total gross a year)

1 Person	\$63,000
2 Person	\$72,000
3 Person	\$81,000
4 Person	\$90,000
5 Person	\$97,200
6 Person	\$104,400
7 Person	\$111,600
8 Person	\$118,800