

NORTH WILKESBORO

HOUSING REHABILITATION LOAN PROGRAM

ELIGIBILITY FOR APPLICANTS

- Residents living in the town of North Wilkesboro
- Owner occupied property
- Ability to pay back loan

INCOME ELIGIBILITY

Family income of \$42,160 or less

ELIGIBLE PROJECTS - including, but not limited to:

- Roofing repairs and replacement
- Plumbing and electrical wiring
- ADA accessibility
- HVAC improvements and replacements
- Bathrooms and Kitchens repairs
- Energy efficient doors and windows
- Repairs to porches, decks, and detached garages

LOAN AMOUNT AND TERMS

- The maximum loan amount is \$20,000
- The interest rate is 1% with a 10 year maximum repayment loan term



Town of North Wilkesboro
PO Box 218
832 Main Street
North Wilkesboro, NC 28659

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Office: (336) 667-7129
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NORTH WILKESBORO

HOUSING REHABILITATION LOAN PROGRAM

APPLICANT INFORMATION

Name

Date of birth

Social Security Number

Telephone Number

CO-APPLICANT INFORMATION

Name

Date of birth

Social Security Number

Telephone Number

DEPENDENTS

Name

Age

Name

Age

*If additional dependents, please use an attachment

PROPERTY INFORMATION

Street Address

City

Zip

Do you own the above property? Yes No

Do you live in the above property? Yes No

*Please provide evidence of homeowner's insurance of the property.

EMPLOYMENT

Applicant Employer

Years at employer

Monthly Income

Co-Applicant Employer

Years at employer

Monthly Income

*Please provide evidence of current income, including recent paycheck stubs, verification letter from employer, or other appropriate documentation

ADDITIONAL INCOME

APPLICANT

Social Security

Retirement

Disability

Public Assistance

Alimony

Child Support

Other, _____

CO-APPLICANT

Social Security

Retirement

Disability

Public Assistance

Alimony

Child Support

Other, _____

*Please provide documentation for the above additional income.

PLEASE PROVIDE A DESCRIPTION OF YOUR PROJECT.

Requested Loan Amount

Certification

I certify that all information on this application and all information furnished in support of this application given for the purpose of obtaining assistance from the North Wilkesboro Rehabilitation Loan Program is true and complete and to the best of my knowledge and belief. I authorize the Town of North Wilkesboro to investigate references, statements, and other data contained on my application or obtained from me or any other source pertaining to my credit worthiness. I will furnish further information if requested.

Applicant's Signature

Date

Co-Applicant's Signature

Date

Please remember to attach:

- Proof of homeowner's insurance
- Evidence of current income from all sources

