



211 N. Gear Avenue, Suite 100
West Burlington, Iowa 52655

Tel: 319.753.5107
Fax: 319.754.4763
Website: www.seirpc.com

August 26, 2020

RE: City of Keokuk
Owner Occupied Rehabilitation Grant

Dear Homeowner,

The City of Keokuk has been awarded a Community Development Block Grant that will go toward housing rehabilitation. Homeowners are eligible to receive up to \$24,999 for repairs to their home. Southeast Iowa Regional Planning Commission is administering the program and at this time are accepting Housing Sustainability Interest Forms.

Allowable rehab items would include but are not limited to; new roof, siding, insulation, windows, doors, foundation, and lead based paint remediation. Lead based paint remediation will be the only inside work allowed. To qualify, your household income cannot be above the amount listed below for your family size. Please note that these are gross incomes and not your net or take-home pay.

1 person family	2 person family	3 person family	4 person family	5 person family	6 person family	7 person family	8 person family
\$38,850	\$44,400	\$49,950	\$55,500	\$59,950	\$64,400	\$68,850	\$73,300

Please return your Interest Form to; SEIRPC, 211 N. Gear, Suite 100, West Burlington, IA 52655, or to shecox@seirpc.com or clees@seirpc.com. The deadline for submitting the form is **Friday, September 11, 2020**.

Sincerely,

Sara Hecox
Housing Administrator





**CITY OF KEOKUK
2020 HOUSING SUSTAINABILITY
INTEREST FORM**

This form shows interest in the housing sustainability (rehab) program. Please complete the entire form. It does not guarantee acceptance to the program or funding.

APPLICANT INFORMATION

Homeowner Name:	Co-Resident Name:
Address:	Address:
Home Telephone #:	Home Telephone #:
Other Telephone #:	Other Telephone #:
Email Address:	Email Address:

HOUSEHOLD INFORMATION

Number of members in your household: _____

Ages of members in your household: _____

Is there anyone currently living with you that is not included in the above household number?

yes _____ no _____ If yes, explain: _____

Will your household structure change within the next 12 months? (marriage, divorce, birth of child, etc.)

yes _____ no _____ If yes, explain: _____

Does any member of your household receive Social Security: yes _____ no _____

Is any member of the household disabled? yes _____ no _____

TOTAL HOUSEHOLD YEARLY INCOME:

Include income for all household members 18 years of age and older. \$ _____

Sources of income: _____

**Homes being purchased on contract are ineligible for this program.
Homeowners insurance is required and property taxes must be current.**

Home repairs needed: _____

By signing this form I acknowledge that the information I provided is true and correct. I understand that submitting this form does not guarantee acceptance into the program or funding for my house.

Applicant Signature Date

Applicant Signature Date

RETURN TO: SEIRPC/Sara Hecox 211 North Gear Avenue, Suite 100 West Burlington, IA 52655
shecox@seirpc.com or clees@seirpc.com 319-753-5107