



ALACHUA COUNTY S.H.I.P. PROGRAM HOME REPAIR NOTIFICATION REQUEST

Thank you for your interest in the Alachua County SHIP Home Repair Program. This program is designed to perform general code related repairs and improvements for very low and low income homeowners. Items eligible for repair include roofs, heating and cooling, plumbing, electrical, and accessibility repairs. Applicants must also meet homeowner criteria and household income requirements to be considered eligible for the program.

You are not eligible to participate in this program:

- If you live in Gainesville city limits
- If the home is listed in someone else's name (you are not the owner of the home)
- If this is not going to be used as your primary residence
- If you have received SHIP assistance in the past
- If your household is over income (see chart below)
- If you have a manufactured or mobile home (only eligible for demolition or replacement through the CDBG)
- If your taxes and/or mortgage payments are not current
- If you have an attached property e.g. condo, duplex, townhouse – roof repairs are not eligible
- If your home is not insured

Filling out the Notification Request Form does not guarantee that you will receive assistance, but that you will be notified when funding is available.

Instructions: Completely fill out the Notification Request Form and return it to the Alachua County Housing Programs Division at 218 SE 24th St. Gainesville, FL 32641, or email it to housing@alachuacounty.us. For more information please contact the Housing Program office at 352-337-6240.

APPLICANT'S INFORMATION:

Applicant Full Name: _____

Property Address: _____
Street city/state/zip

Mailing Address (if different): _____

Home Number: _____ Cell Number: _____

Email address: _____

Total people residing in household (including you)? _____ Are any disabled/considered special needs? _____

Is the home a Single Family (SF), Duplex (D), Condo (C), Townhome (T) SF____ D____ C____ T____

Household Size	1 person	2 person	3 person	4 person	5 person	6 person	7 person	8 person
Annual Household Income*	\$39,850	\$45,550	\$51,250	\$56,900	\$61,500	\$66,050	\$70,600	\$75,150

* Income limits as of 4/24/2019, income limits are subject to change.

I certify that all information I have provided above is true and correct. I consent to the release of information contained in this screener questionnaire to Alachua County Community Support Services. I understand that my completion of this notification request form is not a guarantee of assistance from Alachua County Housing Programs Division.

Signature _____

Date: _____