

List cash available such as checking or savings, credit union accounts, 401K, etc.

Bank or Type of Savings	Estimated Balance	Type of Account/Bank (Checking, Savings, etc.)	Average Monthly Deposit

How long have you owned this property? _____

How did you acquire this property? _____

Are there any mortgages, liens or encumbrances on this property? If so, please list.

Certification (SIGNATURE BELOW IS REQUIRED)

I CERTIFY THAT ALL OF THE ABOVE INFORMATION IS CORRECT AND TRUE TO THE BEST OF MY/OUR KNOWLEDGE. I UNDERSTAND THAT THE INFORMATION OBTAINED IS TO BE USED IN DETERMINING ELIGIBILITY FOR FINANCIAL ASSISTANCE FOR HOUSING DEMOLITION PROGRAM THROUGH THE CITY OF FLORENCE. I UNDERSTAND THAT ANY FALSE OR MISLEADING INFORMATION WILL AFFECT MY ELIGIBILITY. I FURTHER UNDERSTAND THAT I AM FULLY RESPONSIBLE FOR THE MAINTENANCE OF THE PROPERTY AS REQUIRED BY THE CITY OF FLORENCE AND THAT THIS APPLICATION DOES NOT ALLEVIATE ME OF THIS RESPONSIBILITY. LASTLY, THE COMPLETION OF THIS APPLICATION IN NO WAY GUARANTEES ASSISTANCE THROUGH THE CITY'S HOUSING DEMOLITION PROGRAM.

Applicant's Signature _____ Date _____

Co-Applicant's Signature _____ Date _____

As the owner(s) of the abandoned/dilapidated property described below, I hereby grant and authorize the City of Florence to demolish this property.

Location of Abandoned/ Dilapidated _____

Owner(s) Signature:

