

Office Use Only: Funding Source: Private CDBG NPP

Community Action Development Bethlehem (CADB) is a private, nonprofit organization. All applicants are asked to supply demographic information as required by our donors and evaluators. All demographic information provided is voluntary and is used to determine our compliance with federal civil rights law to ensure that CADB is inclusive of all people in our community.

DATE OF APPLICATION: ___ / ___ / ___

DEMOGRAPHIC INFORMATION

CONTACT INFORMATION

Name (Please Print)	
Home Address (No P.O. Boxes)	
Mailing Address (If Different)	
Home Phone	<input type="checkbox"/>
Cell Phone	<input type="checkbox"/>
Email Address	<input type="checkbox"/>

Check the best way for us to reach you. ▲

Gender Male Female Other

Date of Birth ___ / ___ / ___

Race (Please check all that apply):

- American Indian/Native Alaskan
- Native Hawaiian/Pacific Islander
- Asian
- Black/African American
- White
- Multi Race/Other

Do you have Latino ethnicity? Yes No

Do you describe yourself as an immigrant to the U.S.? Yes No

If yes, # Years in U.S. _____
 Country of Origin _____

HOUSEHOLD INFORMATION

Gender	First/Last Name	Age	Relationship to Head of Household
			Self

Highest Level of Education Completed

- Grade Level 0-8
- Grade Level 9-12 (Non Graduate)
- High School Graduate
- GED
- Some College
- Associates Degree
- Bachelor Degree
- Masters Degree

Are you a veteran? Yes No

Do you have a disability? Yes No

Is head of household disabled? Yes No

Do you have health insurance? Yes No

Household Type Single Person Adults- no children
 Two-Parent Single Parent Other _____



FINANCIAL INFORMATION

Are you the primary income earner in your family? Yes No

What was your total household income last month? \$ _____

Current Employment Status

(Please check all that apply)

Full-Time _____ hrs/week

Part-Time _____ hrs/week

Self-Employed _____ hrs/week

Unemployed Since _____

Not working due to an injury

Not working by choice (incl. retired)

Never Employed

Current Housing Status

Own Rent

Temporary Rent- Section 8

Homeless Public Housing

Other _____

LAST MONTH

	Your Income (monthly)	Income from other Household Members
Salary from a job (s)	\$	\$
Self-employment income	\$	\$
Social Security	\$	\$
SSI	\$	\$
Unemployment Insurance	\$	\$
Pension	\$	\$
TANF	\$	\$
Other Income _____	\$	\$
Total Income Last Month	\$	\$

LAST YEAR

	Your Income (yearly)	Income from other Household Members
Salary from a job (s)	\$	\$
Self-employment income	\$	\$
Social Security	\$	\$
SSI	\$	\$
Unemployment Insurance	\$	\$
Pension	\$	\$
TANF	\$	\$
Other Income _____	\$	\$
Total Income Last Year	\$	\$

Please select the number of people in your household under the Household Size column **and** the appropriate income category from one of the three columns immediately to the right of the Household Size number.

Household Size	Extremely Low Income	Very Low Income	Low Income	Over 80% AMI
_____ 1 person	_____ \$0 – \$19,050	_____ \$19,051 – \$31,750	_____ \$31,751 – \$50,750	_____ Over \$50,750
_____ 2 people	_____ \$0 – \$21,800	_____ \$21,801 – \$36,250	_____ \$36,251 – \$58,000	_____ Over \$58,000
_____ 3 people	_____ \$0 – \$21,330	_____ \$21,331 – \$35,300	_____ \$35,301 – \$56,450	_____ Over \$56,450
_____ 4 people	_____ \$0 – \$25,750	_____ \$25,751 – \$45,300	_____ \$45,301 – \$72,500	_____ Over \$72,500
_____ 5 people	_____ \$0 – \$32,470	_____ \$32,471 – \$48,950	_____ \$48,951 – \$78,300	_____ Over \$78,300
_____ 6 people	_____ \$0 – \$37,190	_____ \$37,191 – \$52,550	_____ \$52,551 – \$84,100	_____ Over \$84,100
_____ 7 people	_____ \$0 – \$41,910	_____ \$41,911 – \$56,200	_____ \$56,201 – \$89,900	_____ Over \$89,901
_____ 8 people	_____ \$0 – \$46,630	_____ \$46,631 – \$59,800	_____ \$59,801 – \$95,700	_____ Over \$95,700

PROPERTY INFORMATION

<p>Property owner(s) <i>Please print the name(s) exactly as they appear on the deed</i></p>	<p>Lien Information</p>																									
<p>Social Security number(s)</p>	<p>Do you have any overdue or past due taxes, water/sewer bills, or other amount to the City of Bethlehem?</p>	<table border="1" style="width: 100%;"> <tr> <td style="width: 50%; text-align: center;">Yes</td> <td style="width: 50%; text-align: center;">No</td> </tr> </table>	Yes	No																						
Yes	No																									
<p>Address of property to be rehabilitated</p>	<p style="text-align: right;"><i>If yes, what is owed?</i></p>																									
<p>Owner's mailing address <i>if different</i></p>	<p style="text-align: right;"><i>How much is owed?</i></p>																									
<p>Home Phone</p>	<p>To your knowledge, has this property ever been rehabilitated by funding through the City of Bethlehem or other government funding programs?</p>																									
<p>Cell Phone</p>	<table border="1" style="width: 100%;"> <tr> <td style="width: 50%; text-align: center;">Yes</td> <td style="width: 50%; text-align: center;">No</td> </tr> </table>		Yes	No																						
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<p>Email Address</p>	<p><i>If yes, please provide information including source of funds, dates, and amounts of such funding.</i></p>																									
<p>Do you currently live at this address?</p>	<p><i>Have the requirements of these programs been completely satisfied?</i></p>																									
<p>Is there a mortgage on the property?</p>	<p>Do you have any judgments against you?</p>																									
<p>How long have you owned the building?</p>	<p>Do you have any overdue taxes on this property?</p>																									
<p>Do you have any tenants living or working at this property? <i>Please provide their names and contact information below.</i></p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 10%;">Unit</th> <th style="width: 60%;">Name</th> <th style="width: 30%;">Phone</th> </tr> </thead> <tbody> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> </tbody> </table>	Unit	Name	Phone																						<p>Do you know of any municipal liens on the property? <i>Please explain.</i></p>	
Unit	Name	Phone																								
<p>Property Insurance Company</p>																										
<p>Policy #</p>																										
<p>Agent name</p>																										
<p>Agent phone number</p>																										

All of the application information is complete and accurate to the best of my knowledge.

Initial _____

FOLLOW-UP SURVEYS

From time to time, Community Action Development Bethlehem collects follow-up information from its participants to learn more about what participants have experienced. I agree, as a program participant, to provide certain information to CADB on a timely basis. If I am asked to provide confidential data, I am assured that my name will not be attached to the data and I can be confident that the information will be shared in a trustworthy manner.

Initial _____

PUBLICITY PERMISSION

I give permission to Community Action Lehigh Valley and its subsidiary, Community Action Development Bethlehem, to use my name, likeness, image, voice, and/or appearance as such may be embodied in any pictures, photos, video recordings, audiotapes, digital images, and the like, taken or made on behalf of CALV. I agree that CALV and CADB have complete ownership of such pictures, etc., including the entire copyright, and may use them for any purpose consistent with either organization's mission. These uses include, but are not limited to illustrations, bulletins, exhibitions, videotapes, reprints, reproductions, publications, advertisements, and any promotional or educational materials in any medium now known or later developed, including the internet. I acknowledge that I will not receive any compensation, etc for the use of such pictures, etc., and hereby release CALV, CADB and its agents and assigns from any and all claims which arise out of or are in anyway connected with such use.

Initial _____

YES, I consent

NO, I do not consent

PRIVACY POLICY

Community Action Development Bethlehem is committed to protecting the personal information of all participants. CADB values its relationships with participants and assigns maintaining the trust and confidence of its participants the utmost importance. In efforts to preserve a strong relationship with clients, we have outlined below our privacy policy. This privacy policy will remain in effect even after the participant's formal relationship with CADB has ended. By signing below, you accept this privacy policy.

Organizational Security

To ensure that the personal information of clients remains confidential, our organization requires that every staff member sign a confidentiality agreement that details not-for-disclosure client information. In addition, we take appropriate measures in our use of technology and data management to limit access to client files. CADB and CALV staff members have access to these files only on a need-to-know basis, i.e. to fulfill specific job-related functions.

Information Collection

Throughout the application process we collect and consider personal information about you. Included in this information is nonpublic data on demographic, household, and economic status. CADB collects information from: (1) Information from applications and/or other organizational documentation, (2) Information about transactions or past experiences with partnering organizations, (3) Information that you provide us with from a consumer-reporting agency.

Information Disclosure and Use

The CADB does not disclose non public personal information to anyone, except if it is permitted and/or required by law. This is also applicable to all former participants.

Signature _____

Date _____

This form must be signed in order to receive our services.