

**REQUEST FOR FINANCIAL ASSISTANCE
FOR PAYMENT OF SNOW REMOVAL - APPLICATION
Fargo Community Development Program
2011-2012**

SECTION A: GENERAL INFORMATION		
Name:	# of People in Household:	Date:
Address:	Home Phone:	Work:
SECTION B: ANNUAL INCOME	SECTION C: RACE/ETHNICITY	
Applicant: \$ _____ Spouse: \$ _____ Other Dependents: \$ _____ (Over Age 15) Total Income: \$ _____	The Applicant is: _____ White _____ Hispanic _____ Black/African American _____ Asian _____ American Indian/Alaskan Native _____ Native Hawaiian/Other Pacific Islander _____ American Indian/Alaskan Native & White _____ Asian & White _____ Black/African American & White _____ American Indian/Alaskan Native & Black _____ Other Multi-Racial	
SECTION D: CERTIFICATION		

I certify that to the best of my knowledge all the above information is correct. I understand that if I have knowingly given false information, I will not be eligible to receive any assistance and may be subject to other penalties.

Signature of Applicant

Date

REQUIRED DOCUMENTATION - PLEASE NOTE !!!

This Program requires that you complete and sign the attached "Income Worksheet" (form attached) with your application for assistance. **Send the following five items to our Office:**

- ***Completed Application Form***
- ***Signed and Completed Income Determination Worksheet***
- ***Statement of Social Security Benefits for 2011***
- ***Statement of Pension for 2011***
- ***Statement of interest income for 2011***

If you have any questions when filling out this application, please call Monica Graber in Planning at 241-1474.

NOTE: Race/Ethnicity info is obtained for statistical purposes only. Data will not be considered by any local or Federal official in determining the applicant's eligibility.

**SEND APPLICATION TO:
MONICA GRABER
FARGO PLANNING & DEVELOPMENT
200 3RD STREET NORTH
FARGO, ND 58102**

