

Town of \_\_\_\_\_  
0% Interest Home Repair Loan Program  
Letter of Interest

To Whom It May Concern:

I have read the information regarding the Housing Rehabilitation Loan program for the **Town of** \_\_\_\_\_ under the HUD program. I believe I may be eligible according to the program guidelines listed below and may apply for and take advantage of the program funded by a Community Development Block Grant if it is awarded to the **Town of** \_\_\_\_\_, CT.

- 10 percent equity in my home (Estimate your current mortgage \_\_\_\_\_)
- Up to date on all municipal taxes (including sewer taxes)
- HUD Income Limits (Persons in Household/Low Income)

Limit (1) \$47,600 (2) \$54,400 (3) \$61,200 (4) **\$68,000** (5) \$73,450 (6) \$78,900 (7) \$84,350 (8) \$89,800

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

# of Household Members: \_\_\_\_\_ Household Income: \_\_\_\_\_

Telephone Number: \_\_\_\_\_

Email: \_\_\_\_\_

Briefly describe the work needing to be done: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

How did you hear about the Program? \_\_\_\_\_

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

*Note: a typed name will substitute for a handwritten signature (if emailed)*

Please mail, e-mail or fax to: **Lisa Low & Associates**  
**293 Riggs Street, Oxford, CT 06478**  
**(203) 888-5624 phone**  
**(203) 888-8800 fax**  
**info@lisalowassociates.com**