

Applicant No. _____

Village of Wilmette
Emergency Housing Assistance Program
Application

Instructions: Please print or type clearly. All questions must be answered, applications must be signed and all required statements and forms attached. All information will be kept confidential and is only for use by Village staff. The Emergency Housing Assistance Program is funded by the Village of Wilmette and administered by the Community Development Department.

Return the completed form to:

Community Development
Village of Wilmette
1200 Wilmette Avenue
Wilmette, IL 60091

For further information or if you have questions, please call (847) 853-7522.

Name: _____

Address: _____

Phone: (day) _____ (eve) _____

I/We, the undersigned, state that the information on this application is correct to the best of my/own knowledge. I/We understand that funds approved by the Village of Wilmette are for one-time assistance only to be used for the purpose of assisting in housing related emergencies and that there is no guarantee of assistance. I/We understand that the Village accepts no liability in extending any financial assistance. I/We understand that a referral interview by a social worker or similar professional must be completed before grant monies may be approved. I/We understand that whenever possible, assistance will be made as a check payable solely to the billing entity.

Applicant's Signature _____

Signature of Spouse or
Other Eligible Applicant _____

Date _____

III. GROSS INCOME

Please attach the federal and state tax returns and verification forms as listed below. If unable to supply supporting documentation, please explain on page 4.

Salaries, Wages, and Commissions Received \$ _____
Attach copies of W-2 forms for verification.

Social Security Received \$ _____
Attach copy of Social Security form SSA-1099.

Pension and Retirement Funds Received \$ _____
Attach copies of forms verifying this income.

Dividends and Interest Received \$ _____
Attach copies of IRS form 1099 for verification.

Cash Regularly Received From Others \$ _____
Attach copy of statement from person(s) providing assistance.

Other (please explain): _____ \$ _____

GROSS TOTAL INCOME \$ _____

IV. MONETARY ASSETS

(not including home and car, as of date of application)

CASH

Please include total amount including savings accounts, checking accounts, certificates of deposit, etc. Attach copies of appropriate bank, savings and loan, or money market statements. If unable to supply supporting documentation, please explain on page 4.

MARKETABLE SECURITIES

List each of these securities and their current total value in the space below.

# of Shares	Name of Company	Total Value
_____	_____	_____
_____	_____	_____
_____	_____	_____

Total Marketable Securities \$ _____

Business Income \$ _____

Real Estate Other Than Residence \$ _____

TOTAL ASSETS \$ _____

V. EXTENUATING CIRCUMSTANCES

Please use this space to explain any deviations from the minimum requirements. Attach a separate sheet if necessary.



FOR OFFICE USE ONLY

VI. REFERRAL INFORMATION

Check here if a separate letter is attached _____
Referral source and date

tax bill _____ W-2 form _____ assets summary _____
disability _____ SS 1099 form _____ referral letter _____
Federal form _____ savings statement _____ other _____
IL tax form _____ checking statement _____ other _____

Village of Wilmette Action and Direction:

Approved by: _____ (date)

