

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 the Housing Commission. The Emergency Housing Assistance Program is directed by and funded through the Wilmette Housing Commission.

Return the completed form to:

**Housing Commission**  
**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 Housing Commission 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** \$ \_\_\_\_\_

