

CITY OF CARBONDALE
SINGLE FAMILY HOUSING CONVERSION PROGRAM APPLICATION
REFERENCE ORDINANCE NO. 2007-39 and NO. 2016-29 ATTACHED HERETO

Applicant / Home Buyer: _____

Current Address of Home Buyer: _____

Phone: _____

Number of family members to occupy residence: _____

Address of Property to be Purchased: _____

Current / Previous Property Owner: _____

Date of Property Transfer / Possession: _____

Name and address of Lending Institution if property acquisition is being financed:

Loan Officer: _____

I have reviewed Ordinances No. 2007-39 and NO. 2016-29 as attached along with the Agreement and understand the terms and conditions and further allow the City to verify the information in order to ensure that the program requirements are met. Submission of this application does not in itself obligate the City or Home Buyer without execution of the agreement.

Home Buyer(s)

Date

Date

CITY VERIFICATION / REVIEW & SIGN-OFF

Zoning verified (Planning Division): _____ Date _____

Verification of Rental Residence (BNS Division): _____ Date _____

City Housing Inspection (BNS Division): _____ Date _____

Housing Programs Administrator (Development Services): _____ Date _____

Approval by City Manager: _____ Date _____