City of Reading
Historical Architectural Review Board
Financial Hardship Application

Name of Applicant

Name:_____Date of Birth:_____
Last Name MI First Name DD/MM/YYYY

Address:_____
Number Street City State Zip

Phone:_____
(XXX)XXX-XXXX

Single Family Applicant:

Total number of dependents in household (including self):_____

Total Annual Household Income for each of the previous two calendar years: _____

Year _____ $_____ Year _____ $_____

Commercial Applicant: (not required for not for profit applicants)

Total Annual Income: $_____

Total Annual Expenses: $_____

Net Annual Cash Flow: $_____

Property Value

Certified Appraised Value of Property: $_____Date of Purchase: _____
Or (MM/DD/YYYY)

Property Value from 3 Supporting Listing Sources:

Value #1: $_____
Address:_____
Value #2: $_____
Address:_____
Value #3: $_____
Address:_____

(Provide recent listing or valuation from three credible sources; example: Trend MLS, Zillow.com, Realtor.com, Trulia.com etc.)

Purchase Price: $_____
(Provide Parcel Search, HUD 1 Document or Deed)

Person to who property was purchased from: _____
(Name)

and relationship to person: _____
(Example: None, relative, friend)

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Property Improvements

Briefly explain proposed improvements or repairs: _____

_____

_____

_____

_____

_____

Secretary of Interior Standards compliant construction costs:
Quote #1: $_____
(Provide licensed contractor's quote)

Quote #2: $_____
(Provide licensed contractor's quote)

Secretary of Interior Standards non-compliant construction costs:
Quote #1: $_____
(Provide licensed contractor's quote)

Quote #2: $_____
(Provide licensed contractor's quote)

I _____ certify that all the above information is accurate and a true
(Print Name)
account of my current economic situation.

_____ _____
(Signature) (Date)

For Administrative Use Only

Operating Income: $_____ Operating Expenses:_____
Appraised Property Value: $_____Purchase Price: $_____
Compliant Construction Costs: $_____Non-Compliant Costs: $_____
Composite Rating Index:_____
Cumulative Ratio:_____

_____ _____
(Historic Preservation Specialist) (Date)