



Mobile Home Heat Tape Program

Application Form

Please complete the following application in full & submit with all required attachments to the City of Faribault's Community & Economic Development Office.

BASIC INFORMATION		
Applicant		
Primary Contact Person		
Address	City	Zip
	Phone	Cell
Email		Fax
ELIGIBILITY		
Do you own this home?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Is this your primary residence?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Are you current on your property taxes?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
CERTIFICATION		
<p>I certify that by signing this application that the information stated above is true and correct to the best of my knowledge. I realize that giving false information will result in disqualifying me from receiving assistance. I further certify that I have read and understand the guidelines of the program for which I am applying for assistance.</p>		
_____ Signature of Applicant		_____ Date
_____ Signature of Co-Applicant		_____ Date
_____ Signature of Mobile Home Owner if Applicant is Renting Home		_____ Date

SIGNATURE PAGE / INFORMATION RELEASE AUTHORIZATION

Tennessee Warning: Data Privacy Statement

The information provided in the application materials or to be obtained separately as a part of the application process will be used by the Faribault Housing and Redevelopment Authority (“HRA”) to determine whether you qualify as a prospective borrower from the HRA. The information provided in the application and information authorized above for assistance will become a matter of public record with the exception of those items protected under Minnesota Statutes, Chapter 13, also known as the “Minnesota Government Data Practices Act.” You are not required to submit this information. However all information requested in this application process is deemed necessary to process your application and failure to supply any information will result in your application being denied.

The people with whom this information, both public and private, may be shared include:

1. The HRA Board;
2. Staff who are involved in program administration;
3. Auditors who perform required audits of the program;
4. Authorized personnel from other County, State, Federal, or Regional Agencies providing funding assistance to you;
5. Anyone listed on a valid court order as having access to the data;
6. Those other persons who you authorize to see the information; and
7. Law enforcement personnel in the case of suspected fraud.

Unless otherwise authorized by Minnesota or federal law, other governmental agencies using the private data must also handle the data as private. You may wish to exercise your rights as contained in the Minnesota Government Data Practices Act. Those rights include:

1. The right to see and obtain copies of the data maintained on you;
2. The right to be told the contents and meaning of the data; and
3. The right to challenge the accuracy and completeness of the data.

To exercise these rights, contact the designated data practices official at the respective government agency upon which you are making your request.

The Faribault HRA is an equal opportunity lender.

I certify that all statements made in the application are an accurate representation of my financial condition on this date and are made for the purpose of obtaining the funding indicated. Verification and re-verification of any information contained in the application may be made at any time.

APPLICATION SUBMITTAL REQUIREMENTS

Please return the completed application, and all requested submittal attachments to:

Faribault HRA

208 NW 1st Ave ~ Faribault, MN 55021

Attn: Community Development Coordinator

Or email to:

communitydevelopment@ci.faribault.mn.us

ATTACHMENTS – INCOMPLETE APPLICATIONS WILL NOT BE ACCEPTED

Proof of ownership (copy of title) or lease if renting mobile home

Proof that property taxes are current (payment receipt from Rice County, canceled check or statement from lender)