CHANGE OF INFORMATION		FOLIO:
☐ Address change	NAME	PHONE
☐ Contact change	ADDRESS	
☐ New owner		
HOME OWNER GRANT APPLICATION		
l,		have read and understand the Home Owner Grant eligibility
PRINT NAME IN I		
requirements and certify	that I qualify for	·: -
☐ BASIC GRANT		ADDRESS OF RESIDENCE:
□SENIOR GRANT		
(age 65 or over) My birth date is	/ /	PHONE:
	MONTH DAY	EMAIL:
□OTHER ADDITIONAL GRANT		
I understand that the collector may require any documentation necessary to establish any eligibility for the grant		
		DATE
SIGNATURE (IF CLAIMIN	G GRANT) Owne	er (or Deceased Owner's Spouse/Relative)