



**City of Takoma Park Maryland
EMERGENCY TREE FUND
HOMEOWNER APPLICATION**

The Emergency Tree Fund Program provides assistance to income eligible homeowners unable to afford to pay for hazardous tree's on private property. If selected to participate in the program, approved tree removals will be completed by a licensed contractor under the direction of the City. Prior to the City assigning a contractor, homeowners will be required to enter into an agreement with the City identifying the specific work that will be performed on their behalf and detailing their obligations under the program. Approved work will be done at no cost to the homeowner.

SECTION 1: APPLICANT INFORMATION

Name of Homeowner

Street Address

Phone Number	Daytime	Email Address
	Cell	

Number of people living in the house	Do you own other property?	
--------------------------------------	----------------------------	--

Number of years at this address	<i>If yes, list address</i>
---------------------------------	-----------------------------

Do you have a mortgage?	Do you have any renters?
-------------------------	--------------------------

Is your mortgage payment current?	<i>If yes, amount of monthly rent</i>	\$
-----------------------------------	---------------------------------------	----

Alternate Contact (in case we cannot reach you)	Relationship
---	--------------

Phone Number	Daytime	Email Address
	Cell	

SECTION 2: HOUSEHOLD MEMBERS. This information is required for of the homeowner and ALL of the people living in the home regardless of their age or familial relationship.

Name	Relationship	Date of Birth	Ethnicity Race	Disabled Yes / No
	Homeowner			

SECTION 3: ANNUAL HOUSEHOLD INCOME. List ALL sources of income – both taxable and nontaxable –

for ALL of the members of the household. Documentation of all sources of income including but not limited to current tax returns and social security statements must be provided to the City before your application will be considered.

Source of Income	Homeowner	Other	Other	Other
Wages, Salary, Tips	\$	\$	\$	\$
Interest / Dividends	\$	\$	\$	\$
Social Security/ SSDI Benefits	\$	\$	\$	\$
VA Benefits	\$	\$	\$	\$
Pensions / Annuities	\$	\$	\$	\$
Alimony / Child Support	\$	\$	\$	\$
Rental Income	\$	\$	\$	\$
Income from Business	\$	\$	\$	\$
Other - list all sources of income	\$	\$	\$	\$
	\$	\$	\$	\$
	\$	\$	\$	\$
	\$	\$	\$	\$
Total ANNUAL Gross Income	\$	\$	\$	\$

ELIGIBILITY REQUIREMENTS

To qualify for the Emergency Tree Fund Program, the homeowner must own and live in the house. Priority will be given to homeowners who are lower income residents who can't afford to remove hazardous trees from their private property. Current income limits are identified by household size can be found in the adjoining table. This program covers incomes defined as less than 85% of median income for Montgomery County.

HOUSEHOLD SIZE	MAXIMUM ANNUAL GROSS INCOME
1	\$64,700
2	\$73,850
3	\$83,150
4	\$92,300
5	\$99,700
6	\$107,100
7	\$114,50
8	\$121,90

SECTION 4: REQUESTED TREE REMOVAL. Please identify and briefly describe any needed tree removals.

Listing of Eligible Exterior Repair/Energy Upgrades	Description of Tree in need of Removal
Tree Removal	
Tree Pruning	
Tree in Decline	
Extremely Hazardous Tree	

SECTION 5: REQUIRED DOCUMENTATION. Please attach the following items to the application.

	Most Recent Mortgage Statement (ONLY if there is a mortgage on the house.)
	Verification of Homeowners Insurance
	Income Documentation including, but not limited to, the most recent completed Federal Income Tax Return, Social Security Benefit Statement, SSA Benefits or Budget Letter, etc.

SECTION 6: APPLICANT CERTIFICATION

By signing this application, I certify that I own the property identified herein Section 1, that it is my primary residence, and that there are no present plans to offer this property for sale or for rent over the next two years. I further certify that the information contained within this application is a true and accurate accounting of the members of my household and of the total gross annual income of the household.

Homeowner's Signature

Preparer's Signature (if not the homeowner)

Printed Name

Printed Name

Date

Date

**RETURN THE COMPLETED APPLICATION AND
ALL SUPPORTING DOCUMENTATION TO**

City of Takoma Park, Maryland
Public Works
Attention: Jan Van Zutphen
31 Oswego Ave
Silver Spring MD 20910
301.891.7612
FAX 301.585.2405
janvz@takomaparkmd.gov