



GENERATIONS HOUSING REHABILITATION PROGRAM

PURPOSE

The Port St. Joe Redevelopment Agency (PSJRA) has created a program to honor our senior citizen residents by improving some of the interior and exterior portions of their homes. This program includes, but is not limited to, roof replacement, exterior painting, rail installations, HVAC upgrades, and other light construction work.

Qualifications:

- At least 60 years old
- Homeowner
- Currently claims homestead exemption
- Home is located in North Port St. Joe neighborhood

Note: Homeowners younger than 60 years old may be considered on a case-by-case basis.

Other considerations (along with qualifications)

- Income
- Physically disabled
- Veteran
- Resident for at least 10 years
- Home is a single-family unit
- Head of household with dependents under 18
- Priority will be given to the North Port St. Joe Neighborhood

Included In the Rehab:

- Permits
- Demolition
- Dumpster and Port-o-Let fees
- Replace decking, as needed per spec
- Replace sub-fascia per spec
- Replace ridge vents per spec
- Install architectural shingles per spec
- Install vented vinyl soffit
- Install railing
- HVAC
- Sod replacement
- Other light construction services as needed

Contact Us:



Darrell Starling, CRA Director
813.598.0072



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P.O. Box 278
Port St. Joe, FL 32457



Note: (1) Eligible properties must meet Code Compliance Standards. (2) Proof of income is required for eligibility. (3) This is a limited-funded program. (4) Applicants who have received assistance through the Generations Housing Rehabilitation Program cannot reapply for a three (2) year period from the date of completion of work.

www.psjra.com

REQUIRED DOCUMENTS:

- Proof of Identification
 - State issued picture ID or Passport
 - Marriage Certificate If married and last names are different
- Warranty Deed
- Most recent mortgage statement
- Proof of dependents under the age of 18
 - Picture ID
 - W2 (tax return)
- Proof of income
 - Pay stub
 - W2 (tax return)
- Social Security Disability Documents
For Veterans
DD-214

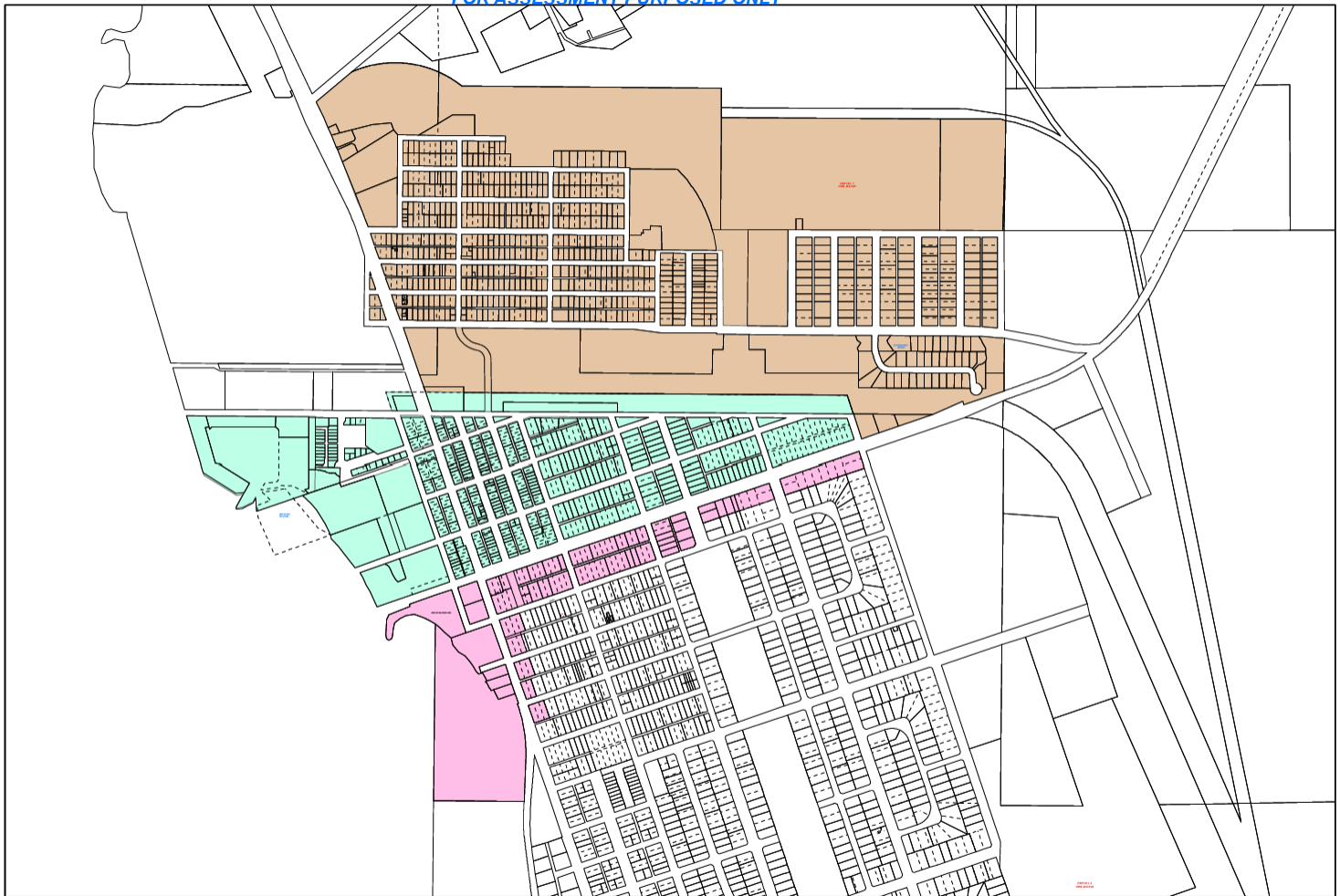


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CRA Map

GULF COUNTY

FOR ASSESSMENT PURPOSES ONLY



FOR ASSESSMENT PURPOSES ONLY

CRA

1 inch = 1,222 feet

Date: 5/13/2014



Generations Housing Rehabilitation Program Application

Date of Application

CONTACT INFORMATION

1. Name:		Date of Birth:
2. Email:		
3. Mailing Address:		
4. Cell Phone:		
5. Annual Income:		

PROJECT INFORMATION

6. Project Address:	Square Feet of Project Location:
7. Do you rent or own the project location? <input type="checkbox"/> Own <input type="checkbox"/> Rent	
8. Proposed Improvements/ Assistance needed: (select all that apply)	<input type="checkbox"/> Exterior Paint <input type="checkbox"/> HVAC <input type="checkbox"/> Handrails/Walkways <input type="checkbox"/> Other: _____

**PLEASE NOTE: ADDITIONAL REPAIRS WILL BE CONSIDERED ON A CASE BY CASE BASIS AND WILL REQUIRE APPROVAL FROM THE COMMUNITY REDEVELOPMENT AGENCY.



CERTIFICATION

Please read the section below carefully. After you have read the program guidelines for the requested funding assistance program, sign the form below and submit your completed application to the Port St. Joe Redevelopment Agency office.

I understand that this application is not a guarantee of assistance. Should my application be approved, I understand that I am committed to completing the project.

I understand that because Florida has a very broad public records law, some or all of the information contained within this application may be subject to public disclosure in accordance with state statutes.

I have read the program guidelines in their entirety and by signing below accept the terms of the program. I understand that if this application is incomplete, contains false information or is not accompanied by the necessary documents, it will not be processed.

Applicant's Signature	Date
Printed Name	Title

FOR OFFICE USE ONLY		
RECEIVED BY:		DATE:
<input type="checkbox"/> COMPLETE	<input type="checkbox"/> INCOMPLETE	<input type="checkbox"/> PACKET ATTACHED