



**CITY OF CARBONDALE  
SINGLE FAMILY HOUSING CONVERSION PROGRAM  
APPLICATION**

**REFERENCE ORDINANCE NO. 2007-39 ATTACHED HERETO**

Applicant / Home Buyer: \_\_\_\_\_

Current Address of Home Buyer: \_\_\_\_\_

Phone: \_\_\_\_\_

Number of family members to occupy residence: \_\_\_\_\_

Address of Property to be Purchased: \_\_\_\_\_

Current / Previous Property Owner: \_\_\_\_\_

Date of Property Transfer / Possession: \_\_\_\_\_

Name and address of Lending Institution if property acquisition is being financed:  
\_\_\_\_\_  
\_\_\_\_\_

Loan Officer: \_\_\_\_\_

I have reviewed Ordinance No. 2007-39 as attached along with the Agreement and understand the terms and conditions and further allow the City to verify the information in order to ensure that the program requirements are met. Submission of this application does not in itself obligate the City or Home Buyer without execution of the agreement.

Home Buyer(s)

\_\_\_\_\_ Date \_\_\_\_\_

\_\_\_\_\_ Date \_\_\_\_\_

**CITY VERIFICATION / REVIEW & SIGN-OFF**

Zoning verified (Planning Division): \_\_\_\_\_ Date \_\_\_\_\_

Verification of Rental Residence (BNS Division): \_\_\_\_\_ Date \_\_\_\_\_

City Housing Inspection (BNS Division): \_\_\_\_\_ Date \_\_\_\_\_

Housing Programs Administrator (Development Services): \_\_\_\_\_ Date \_\_\_\_\_

Approval by City Manager: \_\_\_\_\_ Date \_\_\_\_\_