



Application for Canopy Care Program

Signature Page

I/we understand that North Carolina Statute provides that willful false statements or misrepresentation concerning income; asset or liability information relating to financial condition is a misdemeanor of the first degree, punishable by fines and imprisonment provided under Statutes. I/we further understand that any willful misstatement of information will be grounds for disqualification. I/we certify that the application information provided is true and complete to the best of my/our knowledge. I/we consent to the disclosure of information for income verification related to deciding of my/our eligibility for program assistance by the City of Charlotte or their Partners. I/we agree to provide any documentation needed to assist in determining eligibility and are aware that all information and documents provided are a matter of public record. **The City reserves the right to conduct criminal background checks on household members.** Criminal convictions may not necessarily disqualify you from the program.

All members of the household over the age of 18 must sign the application below.

Owner's Signature: _____ Date: _____

Household Member # 2: _____ Date: _____

Household Member # 3: _____ Date: _____

Household Member # 4: _____ Date: _____

How did you hear about the program?

___ Church (name) _____

___ Friend (name) _____

___ Radio Station (name) _____

___ Community Center (name) _____

___ TV _____

___ Other _____

Income Estimate Page

List all income sources before taxes for all household members living in the home. All residents 18 years old and older are subject to a criminal background check before application approval. Attach additional income information using a copy of the application. Additional information may be required.

	Owner	Household Member # 2	Household Member # 3	Household Member # 4
Name				
Wages, Tips, and other compensation				
Social Security Income, Retirement, or pension funds payments				
Unemployment Benefits or Worker's Compensation				
Income from business and/or rental property, stocks, and annuities				
Alimony, Child Support				
Welfare Payments for Rent or Utilities				
Savings /Checking Accounts				
Cash gifts/stipends exceeding \$200 a month, Other Income				
Total Income – indicate per YEAR				