



McHenry County  
Department of Planning and Development

OFFICE: McHenry County Admin. Bldg. 667 Ware Road, Woodstock, Illinois  
MAIL: 2200 N. Seminary Ave. Woodstock, Illinois 60098



Community Development  
Division

[www.mchenrycountyil.gov/cd](http://www.mchenrycountyil.gov/cd)

Ph: 815-334-4560 Fax: 815-334-4608  
[mchenrycountycomdev@mchenrycountyil.gov](mailto:mchenrycountycomdev@mchenrycountyil.gov)

## *Lead Safe Homes Program* Pre-Application

Thank you for your interest in the Lead Safe Homes Program! Please complete this pre-application and submit it along with the required supplemental documents listed on the last page.

If you have any questions or concerns regarding the program or the application process, please email [LeadSafeHomes@mchenrycountyil.gov](mailto:LeadSafeHomes@mchenrycountyil.gov) or call 815-334-4560 and ask to speak with the Lead Safe Homes Program Manager. Program details are also available online at [www.mchenrycountyil.gov/LeadSafeHomes](http://www.mchenrycountyil.gov/LeadSafeHomes).

### Directions

- (1) Fully complete the pre-application below.
- (2) Submit the pre-application and supporting documents through one of the following ways:

- **Mail**

- McHenry County Department of Planning and Development  
Attn: Community Development Division  
2200 N Seminary Ave,  
Woodstock, IL 60098

- **Drop-off**

- McHenry County Department of Planning and Development  
Attn: Community Development Division  
667 Ware Rd,  
Woodstock, IL 60098

(3) Once your pre-application is reviewed, you will be contacted regarding next steps. Only pre-applications that are approved will be invited to complete a full application, which will be completed by the residents of the unit (unless vacant). The timing of invitation to full application will be based on program availability and other prioritization criteria.

If you do not hear back within fourteen (14) days of submission, please email [LeadSafeHomes@mchenrycountyil.gov](mailto:LeadSafeHomes@mchenrycountyil.gov) or call 815-334-4560 and ask to speak with the Lead Safe Homes Program Manager.

## A. Eligibility Check

Please use this as a reporting tool to help you and program staff determine whether you may be eligible for the Lead Safe Homes Program\*. If you choose any answer in **red text** it means that your answer would disqualify your property from the program.

*\*Note: the tool is only as accurate as your own reporting, so if there is any doubt as to the accuracy, please proceed to complete the pre-application.*

### 1. What type of building are you seeking lead hazard grant funds on behalf of?

- A public building or facility
- A public housing unit
- A private residential dwelling unit (condo/townhouse, apartment, single-family home, multi-family home, etc.)
- A private unit for commercial use
- A private unit for industrial use

### 2. When was the building/structure of the dwelling unit built?

- Before 1940
- Between 1940-1959
- Between 1960-1977
- 1978 or After

### 3. Are you the resident of the unit, or the owner of the unit?

- Yes, I am both the resident and owner
- Yes, I am the landlord of the unit
- Yes, I am a tenant who lives in the unit via a rental lease
- No, none of these apply to me

### 4. Is the unit located in McHenry County?

- Yes
- No

### 5. Do any children live in the unit, OR do any children visit the residence at least 6 hours a week (on average), OR do any pregnant women live in the unit?

- Yes
- No

### 6. How many household members live in the unit (Excluding: Live-in aids, children of live-in aids, or children being pursued for legal custody or adoption who are not currently living with the household)?

\_\_\_\_\_

### 7. What is the estimated Annual Gross Income for all adults in the unit (Excluding: Live-in aids)? (\*WARNING: This is only an estimate, and may vary from the in-depth income calculation that would be conducted later)

\_\_\_\_\_

8. Based on the household size and the projected Annual Gross Income listed above, do the residents of the unit have an annual income that falls under the income limits in the chart below?

Yes  No

Household Size	1	2	3	4	5	6	7	8
Income	\$51,000	\$58,250	\$65,550	\$72,800	\$78,650	\$84,450	\$90,300	\$96,100

## B. APPLICANT INFORMATION

Date: \_\_\_\_\_

Your Full Name: \_\_\_\_\_  
First Middle Last

Your Address:

\_\_\_\_\_  
Street Address Unit/Apt/Suite

\_\_\_\_\_  
City State Zip Code

E-mail: \_\_\_\_\_ Phone: \_\_\_\_\_

Alternate E-mail: \_\_\_\_\_ Alternate Phone: \_\_\_\_\_

**Primary Applicant Relationship to Property:**

Landlord  Owner-Occupant  Other: \_\_\_\_\_

## C. OWNER DETAILS

Name of Owner #1: \_\_\_\_\_

DOB: \_\_\_\_\_ Age: \_\_\_\_\_

Is this their Primary Place of Residence?  Yes  No

The following information is requested by the Federal Government for statistical purposes, program administrative reporting, and/or civil rights compliance reporting. You are not required to furnish this information, but are encouraged to do so. There is no penalty for persons who do not complete this section. The McHenry County Community Development Division may neither discriminate on the basis of this information, nor on whether you choose to furnish it.

Ethnicity

- Hispanic or Latino  
 Not Hispanic or Latino  
 I do not wish to furnish this information  
 American Indian or Alaskan Native  
 Asian

Race

- Native Hawaiian or other Pacific Islander  
 White  
 Other  
 I do not wish to furnish this information  
 Black or African American

Sex

- Male  
 Female  
 I do not wish to furnish this information

Name of Owner #2 (if applicable): \_\_\_\_\_

DOB: \_\_\_\_\_ Age: \_\_\_\_\_

Is this their Primary Place of Residence?  Yes  No

The following information is requested by the Federal Government for statistical purposes, program administrative reporting, and/or civil rights compliance reporting. You are not required to furnish this information, but are encouraged to do so. There is no penalty for persons who do not complete this section. The McHenry County Community Development Division may neither discriminate on the basis of this information, nor on whether you choose to furnish it.

Ethnicity

- Hispanic or Latino
- Not Hispanic or Latino
- I do not wish to furnish this information
- American Indian or Alaskan Native
- Asian

Race

- Native Hawaiian or other Pacific Islander
- White
- Other
- I do not wish to furnish this information
- Black or African American

Sex

- Male
- Female
- I do not wish to furnish this information

**Name of Owner #3 (if applicable):** \_\_\_\_\_

**DOB:** \_\_\_\_\_ **Age:** \_\_\_\_\_

**Is this their Primary Place of Residence?**  Yes  No

The following information is requested by the Federal Government for statistical purposes, program administrative reporting, and/or civil rights compliance reporting. You are not required to furnish this information, but are encouraged to do so. There is no penalty for persons who do not complete this section. The McHenry County Community Development Division may neither discriminate on the basis of this information, nor on whether you choose to furnish it.

Ethnicity

- Hispanic or Latino
- Not Hispanic or Latino
- I do not wish to furnish this information
- American Indian or Alaskan Native
- Asian

Race

- Native Hawaiian or other Pacific Islander
- White
- Other
- I do not wish to furnish this information
- Black or African American

Sex

- Male
- Female
- I do not wish to furnish this information

**Name of Owner #4 (if applicable):** \_\_\_\_\_

**DOB:** \_\_\_\_\_ **Age:** \_\_\_\_\_

**Is this their Primary Place of Residence?**  Yes  No

The following information is requested by the Federal Government for statistical purposes, program administrative reporting, and/or civil rights compliance reporting. You are not required to furnish this information, but are encouraged to do so. There is no penalty for persons who do not complete this section. The McHenry County Community Development Division may neither discriminate on the basis of this information, nor on whether you choose to furnish it.

Ethnicity

- Hispanic or Latino
- Not Hispanic or Latino
- I do not wish to furnish this information
- American Indian or Alaskan Native
- Asian

Race

- Native Hawaiian or other Pacific Islander
- White
- Other
- I do not wish to furnish this information
- Black or African American

Sex

- Male
- Female
- I do not wish to furnish this information

## D. DWELLING UNIT INFORMATION

Below, please provide relevant information regarding the dwelling unit (i.e. house, condo, apartment), and residents of the dwelling unit that you are applying on behalf of.

*\*If applying for more than one dwelling unit as a landlord, you must complete a separate pre-application for each dwelling unit, even if they share a building.*

### 1. Address of Dwelling Unit:

Street Address		Unit/Apt/Suite
City	State	Zip Code

2. Date Property was Purchased (mm/dd/yyyy): \_\_\_\_\_

3. Year Dwelling Unit was Built: \_\_\_\_\_

### 4. Type of Dwelling Unit:

- Single-Family Home       Townhome/Condo/Duplex  
 Apartment       Other: \_\_\_\_\_

5. Number of TOTAL Dwelling Units (i.e. condos) in the Property/Building: \_\_\_\_\_  
(Note: Include dwelling unit listed on this application)

### 6. Ownership type:

- Owned by Occupant       Owned by Landlord (rental property)  
 Other: \_\_\_\_\_

### 7. Occupied Status of Dwelling Unit:

- Occupied       Vacant

8. Rent Charged per Month (if rental): \$ \_\_\_\_\_

9. Outstanding Mortgage Loan(s) Against the Property, if any? \$ \_\_\_\_\_

10. Outstanding Taxes Against the Property, if any? \$ \_\_\_\_\_

11. Outstanding Liens Against the Property, if any? \$ \_\_\_\_\_

12. Property is currently covered by a home-owner's insurance policy?  Yes  No

13. Property is currently covered by a flood insurance policy?  Yes  No

## E. RESIDENT INFORMATION

Check this box if property is vacant (skip this section)

1. How many total household members live in the unit (excluding live-in aids, children of live-in aids, or children being pursued for legal custody or adoption who are not currently living with the household)?

\_\_\_\_\_

2. How many legal adults live at the unit? \_\_\_\_\_

3. How many pregnant women live at the unit? \_\_\_\_\_ List Due Date(s): \_\_\_\_\_

4. How many children age 6-17 live at the unit? \_\_\_\_\_

5. How many children under 6 (age 0-5) live at the unit? \_\_\_\_\_

6. Other than those who live at the dwelling unit, are there any children under 6 years of age (0-5) who visit the dwelling unit each week for an average of at least 6 hours (across 2 days for at least 3 hours each day)?

Yes  No  I Don't Know

7. Have any children who live at (or visit) the property ever tested positive for an Elevated Blood Lead Level (EBLL) at a medical office, clinic, or health department?

Yes  No  I Don't Know

8. Estimated Total Household Income for the next 12 months (of all legal adults):

\$ \_\_\_\_\_

## F. SUPPLEMENTAL DOCUMENTS

Owners must submit the below documents along with the pre-application.

- Owner Photo ID (Each owner)
- Owner Social Security Card (Each owner)
- High Quality Photo of the Property
- Copy of deed (proof of ownership and proof of pre-1978 home)
  - If needed, you can request this information on the McHenry County Recorder webpage:  
<https://www.mchenrycountyil.gov/county-government/departments-a-i/county-recorder/public-records-search-options>
- Proof of Property Taxes in Good Standing
  - If needed, you can request this information by searching your property on the McHenry County government website, or contacting the McHenry County Treasurer's Office
    - Web: <https://mchenryil.devnetwedge.com/>
    - Email: [treas@mchenrycountyil.gov](mailto:treas@mchenrycountyil.gov)
    - Phone: 815-334-4260
    - Fax: 815-338-1737
- Proof of Mortgage in Good Standing (if mortgaged)
- Proof of Current Home-Owner's Insurance
- Proof of Current Flood Insurance (if held)
- Current Lease Agreement (if rented)



By signing this, I certify that I am an owner of the listed property above, that I completed the pre-application above, and that I have the legal authority to apply for this program on the unit's behalf;

I have read and understand the program details, including eligibility, and I have had the opportunity to ask for clarification using the program contact information provided on this form;

I understand that my pre-application is subject to screening according to the eligibility criteria of the program, and that invitation to full application is contingent upon staff review and program capacity;

I hereby give consent for the McHenry County Department of Planning and Development to begin an environmental review and historic review of my property, to perform property inquiries including but not limited to title searches and property tax inquiries, and to disclose information from my pre-application to any governmental authorities relating to this, including but not limited to the U.S. Department of Housing and Urban Development and the Illinois Historic Preservation Agency.

I certify that my answers are true and honest to the best of my knowledge. If this application leads to my eventual participation in the Lead Safe Homes program through McHenry County, I understand that any false or misleading information in my application or interview may result in disqualification.

\_\_\_\_\_  
Printed Name of Owner 1

\_\_\_\_\_  
Signature of Owner 1

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed Name of Owner 2

\_\_\_\_\_  
Signature of Owner 2

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed Name of Owner 3

\_\_\_\_\_  
Signature of Owner 3

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed Name of Owner 4

\_\_\_\_\_  
Signature of Owner 4

\_\_\_\_\_  
Date