



**City of Kansas City, Mo.**  
**Housing and Community Development Department**  
**Property Preservation Division**  
**414 E. 12<sup>th</sup> St., 11th floor**  
**Kansas City, MO 64106**  
**(816) 513-3025**

## Paint Program Application

The Paint Program provides paint to Kansas City, Mo., residents who meet these qualifications:

- Applicants may not own more than one property
- Applicants must own and reside in the property to be painted.

**Application Checklist (requirements)**

- Provide proof of ownership (recorded warranty deed or deed of trust) – may be obtained through the county courthouse
- Provide proof of income – provide proof of all income sources for all household members, pay stubs, award letters W-2s and Schedule C
- Completely fill out the entire application – be sure to sign and date

**Income Guidelines**

Number of people in household/Maximum yearly income

One person	\$39,400	Five people	\$60,800
Two people	\$45,050	Six people	\$65,300
Three people	\$50,650	Seven people	\$69,800
Four people	\$56,300	Eight people	\$74,300

*Total income is calculated from all resources and is based on gross pay – before taxes and expenses are deducted.*

Homeowner's Name \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_

Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_

Race  Black  Hispanic  White  Other (specify) \_\_\_\_\_ Age \_\_\_\_\_ Gender \_\_\_\_\_

Marital Status  Single  Married  Divorced  Separated  Widowed

Spouse's Name \_\_\_\_\_ Work Phone \_\_\_\_\_

Female head of household?  Yes  No

### Household Members

Name	Gender	Social Security Number	Date of Birth	Relation	Yearly Income
Total Yearly Income					

**Declarations**

I hereby apply for assistance from the City of Kansas City, Mo., Paint Program.

I declare that

- I own and reside at the address listed above
- This is not rental property
- I do not own more than one property.

I will prepare the property by making any repairs, scraping, cleaning and preparing exterior as needed. After the exterior is prepared for paint, I will call the Property Preservation Division for an inspection.

I understand that I must redeem my voucher for paint within seven calendar days from the issued date on the voucher; after this date, the voucher is void. My paint voucher must be redeemed prior to Dec. 31 of the year the voucher was issued. If the voucher is not redeemed by Dec. 31 it will be canceled and I will have to re-apply if I wish to receive free paint from this program. I understand I will have my choice of standard in-store paint colors and will not be able to have any color-matching done or pay extra to upgrade the paint.

I will use all of the paint and supplies I receive on this property and I will have the property completely painted within 21 calendar days of receiving the paint. City staff will conduct an inspection of the property and if the property is not completely painted within this time frame, I understand that the paint and supplies may be confiscated by the City.

I understand that my statements are subject to verification. I will report immediately, any changes in the information I have given. I declare that the information on this application is true, correct and complete to the best of my knowledge.

**Homeowner's Signature** \_\_\_\_\_ **Date** \_\_\_\_\_