



**Strong Neighborhoods Initiative
SAFE & TIDY NEIGHBORHOOD APPLICATION**



**Do you need help removing junk or heavy items
from your yard?
Let us safely remove it at
NO COST TO YOU!**



In order to keep our homes and neighborhoods safe from accidents, fires, and crime, it is crucial that we keep things tidy and remove unnecessary and dangerous items from our surroundings. If you live in a SNI neighborhood and you need assistance, you may qualify for a **one-time** service to have the unwanted and heavy items removed by an insured contractor at **NO COST TO YOU.**

Rental property is eligible with the property owner's/landlord's contact information and signature. You will need to be present during the inspection and at completion. This program is funded by the City of OKC CDBG Program and HUD. **Return completed application to: City of OKC Planning Department, SNI, 420 W. Main St., Ste 900., OKC, OK 73102 or sniokc@okc.gov. Questions? Call 297-2595.**

Owner's Name

Phone Number(s)

Street Address, City, State, Zip

Owner's email address

Tenant's Name and Phone Number (if applicable)

Tenant's email address

This property is a: Owner-occupied residence Renter-occupied residence
 Vacant structure/building Vacant lot (no building)

Is there an open Code Enforcement case involving this property? YES or NO

To be eligible, the **occupant's annual household income** must be less than the dollar amounts below. Annual household income shall include all earnings of all individuals who occupy the home, including children, relatives and unrelated residents for the next 12 months.

- 1 person household - \$48,200
- 2 person household - \$55,050
- 3 person household - \$61,950
- 4 person household - \$68,800
- 5 person household - \$74,350
- 6 person household - \$79,850
- 7 person household - \$85,350
- 8 person or more household - \$90,850

Annual **Household** Income: _____

See the chart to the left, do you meet this requirement? **YES or NO**

Number of Adults in your Household: _____

Number of Children in your Household: _____

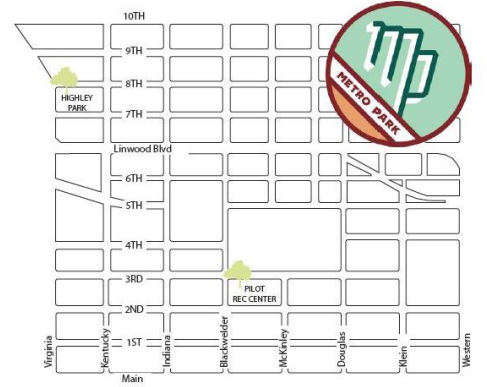
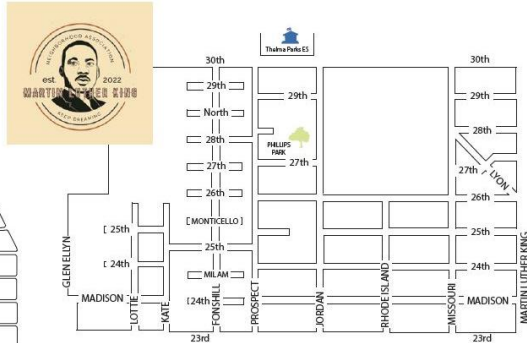
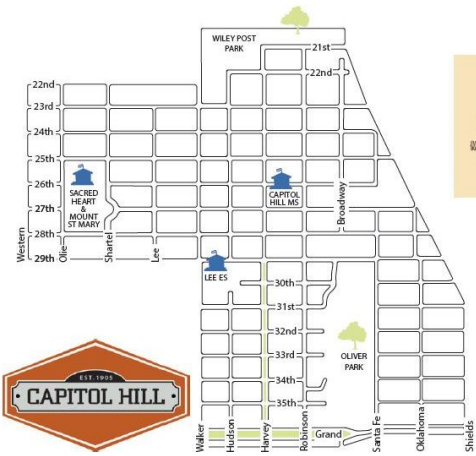
Number of Disabled persons in your household: _____

Female Head of Household? YES or NO

For HUD Reporting Purposes Only - Please account for each person served.

Race:	<input type="checkbox"/> White	<input type="checkbox"/>	<input type="checkbox"/> Native Hawaiian/Other Pacific Islander
	<input type="checkbox"/> Black/African American	<input type="checkbox"/>	<input type="checkbox"/> Black/African American & White
	<input type="checkbox"/> American Indian/Alaskan Native	<input type="checkbox"/>	<input type="checkbox"/> American Indian/Alaskan Native & Black/African American
	<input type="checkbox"/> White Hispanic/Latino	<input type="checkbox"/>	<input type="checkbox"/> American Indian/Alaskan Native & White
	<input type="checkbox"/> Black Hispanic/Latino	<input type="checkbox"/>	<input type="checkbox"/> Asian & White
	<input type="checkbox"/> Asian	<input type="checkbox"/>	<input type="checkbox"/> Other Multi-Racial

SNI Neighborhood Boundaries



The property is located in the following neighborhood: _____ Capitol Hill _____ MLK _____ Metro Park

Please provide a list of all items to be removed. Based on the list you provide below, a contractor will photograph the items and create a scope of work that you will review and approve prior to work beginning and after completion. Add an additional page if needed.

Item(s) to be removed	Location (backyard, side yard, next to garage, etc.)

Hedge trimming, mowing and other small property cleanup that contributes to keeping homes and neighborhoods safe from accidents, fires, and crime may be included. This does NOT include painting, window repairs, demolition or other exterior home or structure maintenance.

Do you request the following services after all items are removed?

_____ Mowing/edging _____ Hedge trimming _____ Minor, small tree maintenance

Do you wish to receive an application for SNI HAZARDOUS TREE TRIMMING OR REMOVAL? YES or NO

Do you wish to receive an application for the HOUSING EXTERIOR MAINTENANCE PROGRAM? YES or NO

Do you wish to receive free installation of SMOKE DETECTORS by the OKC Fire Department? YES or NO

I certify that the information provided is true and I understand that any false information provided could result in the dismissal of this application for assistance. I understand that I must be present during the work and I may be asked to verify the information provided.

Owner's Signature and Date

Tenant's Signature and Date